The Ita Wegman Association
of British Columbia

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COMPANION POLICIES (CP)

CP1: COMPANION RIGHTS AND CHARTER OF RESPONSIBILITIES

Associated standards 1.J.2 a (1, 2, 3), b (1, 2) and 2.A.18 (a, b, c (1, 2), d (1, 2)

POLICY

Glenora Farm is responsible for protecting and promoting the rights of people who are vulnerable or at risk, in accordance with the Canadian Charter of Rights and Freedoms and the United Nations Declaration of Rights.

PROCEDURE

Discrimination is prohibited on the grounds of age, sex, gender, sexual orientation, race, colour of skin, religion, creed, national origin, citizenship, language, marital status, family status, pregnancy/childbirth, mental or physical disability, political belief or any other prohibited grounds of discrimination.

Glenora Farm communicates the rights and responsibilities to Companions at the beginning of service delivery and annually at the Individual Support Plan (ISP) meeting. This policy is available at all times for review and clarification in each program location in the Companion Handbook.

Community Living British Columbia (CLBC) has a digital booklet that talks about rights of people supported at Glenora Farm. Click this link to see the document.

RIGHTS

Each Companion has:

- The right to ethical, sensitive, and respectful care and support,
- The right to be heard,
- The right to provide feedback,
- The right to complain and/or withdraw from programs without reprisal.
- The right to informed consent, refusal, or expression of choice regarding involvement in research projects,
- The right to be included in health and safety training,
- The right to confidentiality (in accordance with Glenora Farm policies)
- The right to be free from any form of abuse, neglect, harassment, discrimination, retribution, financial fraud, and corporal punishment;
- The right to receive medical and dental care when required;
- The right to participate in social and recreational activities if available, appropriate, and according to their abilities and interests;
- The right to receive religious instruction and to participate in religious activities of their choice;
- The right to receive guidance and encouragement to maintain their cultural heritage;
- The right to privacy (in accordance with Provincial and Federal regulations and Glenora Farm policies);
- The right to be provided with support services if a disability is a barrier to consulting with them on decisions affecting their care (at a cost)
- The right to full and effective use of their personal, civil, legal and consumer rights;
- The right to quality support appropriate to their needs and abilities;
- The right to full information about their own state of health and about available treatments;
- The right to be treated with dignity and respect, and to live without exploitation, including but not limited to abuse or neglect;

- The right to live without discrimination or victimisation, and without being obliged to feel grateful to those providing their support and accommodation;
- The right to personal privacy;
- The right to live in a safe and secure environment, and to move freely both within and outside the residence without undue restriction;
- The right to be treated with respect, to be accepted as an individual, and to have their individual preferences taken into account;
- The right to continue their cultural and religious practices, and to keep the language of their choice, without discrimination;
- The right to select and maintain social and personal relationships without fear, criticism or restriction both within and outside the Ita Wegman Association programs;
- The right to freedom of speech and expression;
- The right to maintain their personal independence;
- The right to maintain control over, and to continue being involved in decisions about the personal aspects of their daily life, financial affairs, possessions, and living arrangements in the residence. Please see the Representation Agreement Act for further information;
- The right to have access to services and activities available outside of Glenora Farm programs;
- The right to have access to information about their rights, support, accommodation and any other information that relates to the Companion;
- The right to file complaints and to take action to resolve disputes;
- The right to have access to advocates and other avenues of redress;
- The right to be free from reprisal, or a well-founded fear of reprisal, in any form for taking action to enforce their rights.

Glenora Farm will assist each Companion to exercise their rights, explore options and alternatives, seek advice and support from others to ensure they have information and assistance they need to assert their rights, make informed choices and self-advocate as desired.

Companions have the right to involve advocates or other trusted people with issues of concern.

Limits or Restrictions on Rights or Privileges

Glenora Farm will inform Companions of any limits or restrictions that may be placed on their rights or privileges, the reasons for these restrictions/ limits and the methods to have the rights or privileges reinstated. If a privilege is limited or restricted, it is done so based on a safety need (i.e., personal harm and safety, threatening to inflict harm on self or others, property damage etc.). If privileges are limited or restricted, Companions will be informed how long the privilege will be restricted/limited, and what they may do to get that privilege back.

The development of protocols or support practices occurs at the direction of the Companion with assistance from their support network. In the case where a Companion is not capable of giving informed consent, such consent will be sought through their legally appointed designate. Companions who feel that their rights have been violated will be supported in seeking a remedy through Glenora Farm's complaint resolution process or through external resources available to them.

RESPONSIBILITIES

Each Companion has:

- The responsibility to respect the rights and needs of others;
- The responsibility to care for their own health, safety and well-being, as far as they are capable;
- The responsibility to accept personal responsibility for their own actions and choices;
- The responsibility to inform their medical practitioner, as far as they are able, about their relevant medical history and current state of health;
- The responsibility to regularly attend the day program. If a Companion is consistently indicating they do not want to attend a program, then suitability will be reviewed by the Facility Manager, QAC, Workshop Leaders, House Managers and Family representatives if appropriate;
- The responsibility to be involved in household chores in both personal and common spaces;

- The responsibility to keep their bedroom and living spaces clean and tidy. This includes clear pathways, safe and secure storage of items, and personal snacks should be stored in airtight containers. It is the responsibility of the House Manager to ensure Companions have the support they need to maintain a safe and healthy environment;
- The responsibility to attend required training sessions;
- The responsibility to the best of their abilities follows all Ita Wegman Association policies and procedures.
- The responsibility to not be on cellphones during workshop time. If you are using your cellphone during the workshop consistently, your phone may be taken during the workshop and returned to you after.

I understand that if I feel my rights have been violated, I can make a formal complaint by talking to the Facility Manager (Kristine Millere) or the Quality Assurance Coordinator (Olivia Jackson). They will help me solve the problem.

I have read or had the above information explained to me and have had the opportunity to ask questions and discuss anything I did not understand.

Companion Name:

Companion Signature: Date:

Note - The Ita Wegman Association reserves the right to terminate a Companion support contract with or without cause depending on the seriousness of the situation without employing the stated discharge methods mentioned in *CP12- Transition and Discharge Planning*.

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CP2: COMPANION ORIENTATION AND TRAINING

Associated standard 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I and 2.B.2 (a, b, c)

POLICY

All Glenora Farm Companions must receive an orientation to Glenora Farm and the support available to them. Others such as: family members, medical personnel and identified significant people in a Companion's life may also be involved in the orientation as appropriate. Orientation is to take place at the time of admission or shortly thereafter.

PROCEDURES

Orientation information must be presented in a welcoming manner in clear and simple language appropriate for the Companion. Companions should have the chance to ask questions during orientation.

Orientation includes:

- A description of programs and support provided. This includes general rules, routines, structures, hours of operation, expectations, and what to expect when expectations are not met or maintained.
- Information and clarification of rights and responsibilities.
- Clarification of privacy and confidentiality.
- The process for active participation of the Companion in goal setting.
- The process of documentation and report recording.
- The internal and external procedures for grievances and complaints.
- Introduction to other Companions in the program.

Each house and program location has a Companion Handbook, accessible to Companions at all times, which includes:

- Companion grievance policy and procedure, including telephone contact numbers
- Information about external review and grievance options – Ombudsman, Companion Advocate, including telephone contact numbers
- Limits of confidentiality

Confirmation that the orientation was completed must be noted via a signed and dated checklist filed in the Companion's file.

Responsibility of: Facility Manager and Quality Assurance Coordinator

Monitored by: Executive Director

COMPANION ORIENTATION

Associated standard 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I and 2.B.2 (a, b, c)

Name: _____ **Birthdate:** _____ **Start Date:** _____

Family Representative(s): _____ **Contact number:** _____

Companion Orientation CP2			
Companion name: _____	**Date:**		
Main Coworker responsible: _____			
TO BE COMPLETED ON THE FIRST OR SECOND DAY ((XX/XX/XX - XX/XX/XX))			
Welcome package			

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Item	Coworker sign	Companion sign	Date completed
General weekly schedule (House Coordinator)			
Laundry days (House Coordinator)			
Internal complaint procedure CP7 (Quality Assurance Coordinator (QAC))			
External complaint procedure CP7 (QAC)			
Help and Advice phone list CP7 (QAC)			
Tour of Farm/Emergency Procedures			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Farm tour (QAC/Facility Manager)			
House tour (QAC/Facility Manager)			
Fire emergency procedure EP3 (Facility Manager)			
Earthquake emergency procedure EP4 (Facility Manager)			
Power failure emergency procedure EP14 (Facility Manager)			

Muster station location (meeting place during emergencies) (House Coordinator)			
Fire extinguishers and first aid equipment (House Coordinator)			
Companion handbook (at house meetings) (House Coordinator)			
Forms to sign			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Consent for medical care (QAC – via email)			
Website and media release CP8 (QAC – via email)			
Immunization record (QAC – via email)			
Companion Rights CP1 (QAC – via email) ***No cellphone use during workshops. If phones are being used in workshops consistently, then your phone may be taken away for the workshop and returned to you after.**			
Consent to Receive Support CP3 (QAC – via email)			
Permission to Manage Finances FP12 (QAC – via email)			

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Consent to use power tools HSP26 (QAC – via email)			
General Orientation (To be completed the first week)			
TO BE COMPLETED DURING THE SECOND WEEK ((XX/XX/XX - XX/XX/XX))			
Overview of The Ita Wegman Association of BC			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Overview of support offered, activities and accessibility (QAC)			
Support offered (QAC)			
What program is able to provide (QAC)			
CONSENT TO RECEIVE SUPPORT / PARTICIPATE IN COMMUNITY LIFE CP3 (QAC)			
Responsibility and role of the Companion CP1 (QAC)			
Responsibility and role of Companion representatives (QAC)			
Explain events, behaviour or attitudes that could result in suspension or limiting of privileges (QAC)			

Ways to regain privileges (QAC)			
Cultural and spiritual preferences (QAC)			
Explain Companion files and how to access them CP11 (QAC)			
Parent's Group information provided to family representatives			
Rights of the Companion			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Corporate Compliance OP3 (QAC)			
Internal and external complaint procedure CP7 (QAC)			
Explain Companion input and that it is welcomed (QAC)			
How do you like to communicate? (QAC)			
General Orientation (To be completed in the first month)			
TO BE COMPLETED DURING THE THIRD WEEK ((XX/XX/XX - XX/XX/XX))			

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Roles, Responsibilities and Credentials of Coworkers			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Confidentiality			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Limits of confidentiality (court subpoena, suspected or reported abuse, suspected or reported possibility of harm to yourself or others) CP4 (QAC)			
Consent for release of information - outline process (QAC)			
Outcomes Management Process			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Feedback through surveys OP20 (QAC)			
Feedback through meetings (QAC)			

Individual Support Plan (goal setting, strategies, review of what's working or not, transitions, etc.) CP6 (QAC)			
Policies and Procedures			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Privacy/confidentiality CP4 (QAC)			
Security of personal belongings (Lock box – HC's need a combination or an extra key in case of emergencies) (QAC)			
Conflict of interest ECP31 (QAC)			
Coordinated support			
Item	**Coworker sign**	**Companion sign**	**Date completed**
The Companion, Coworkers and Companion representative(s) will be involved in planning for support CP6 (QAC)			
TO BE COMPLETED DURING THE FOURTH WEEK (XX/XX/XX - XX/XX/XX)			

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Individual Support Plans			
Item	**Coworker sign**	**Companion sign**	**Date completed**
The Companion and Companion representatives work together to create the ISP CP6 (QAC)			
The ISP outlines goals, time frames, responsibilities, and details/strategies agreed upon to complete the goal(s) (QAC)			
Participation of the Companion depends on willingness and ability of Companion (QAC)			
ISP's change as Companions transition through goals and create new goals (QAC)			
Assessments			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Discuss why, how and when assessments are done CP6 (QAC)			
Completed with help of Companion, Coworkers, Companion representatives and partner as appropriate (QAC)			

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Transitions and Change			
Item	**Coworker sign**	**Companion sign**	**Date completed**
Discharge/exit from the program CP12 (QAC)			
Recommendations to other services (QAC)			
Exit quality of care survey (QAC)			
Check-in's (QAC)			
I have had the above information explained to me and I have had the opportunity to ask questions and talk about anything I did not understand.			
Companion Name:			
Companion Signature:			
Date:			
Admissions/Designate Name:			
Admissions/Designate Signature:			
Date:			
CP2			

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COMPANION TRAINING

Associated standards 1.H.3, 1.H.12.b, 2.C.3 (a, b), 2.F.3 and 4.H.6.

Standard	Training Requirement	Provided To	Document Name	Competency Based	Frequency
1.H. HEALTH AND SAFETY					
1.H.3	Education designed to reduce identified physical risks	Companions	TBD	No	Annual
1.H.12.b	Education on procedures regarding infections and communicable diseases	Companions	HSP28	No	Annual
Worksafe BC	Wildfire prevention and preparedness	Companions	File Safety and Prevention BC Wildfire (FileShare>Onboarding>Training)	No	Annual
2.C. MEDICATION MONITORING AND MANAGEMENT					
2.C.3.a.	Advoacy training to assist peersons served in being actively involved in making	Companions	In-person verbal training	No	Annual

	decisions related to use of medications				
2.C.3.b.	Training and education regarding medications	Companions	Medical professional to provide	No	As requested, Coworkers will support Companions to connect with a medical professional to learn more about medicaitons, possible side effects, etc.
2.F. SERVICE DELIVERY USING INFORMATION AND COMMUNICATION TECHNOLOGIES					
2.F.3	Instruction and training on equipment used in service delivery via information and communication technologies creating an appropriate	Companions	In-person verbal training	No	As requested, Coworkers will answer questions and provide training on service delivery using information and comunicatio

	environment to receive services				n technologies (ICT). At this time, Companions are not required to physically use ICT, but may be on a Zoom, Teams, or phone call to ensure a family member or friend can attend a support-related meeting.
4.H. COMMUNITY HOUSING					
4.H.6.	Skill development necessary to live as independently as possible	Companions	In-person adhoc training (cooking, cleaning, appointments, social interactions, advocacy, conflict resolution, hygiene, mental health, physical health, etc.)	No	Adhoc training to increase skill development and maintenance is provided by all Coworkers throughout

					a Companion's time attending program at Glenora Farm.

Date training completed:		Coworker(s) conducting the training:	
Companions in attendance:			

CP3: CONSENT TO RECEIVE SUPPORT / PARTICIPATE IN COMMUNITY LIFE

Associated standards 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I and 2.B.2 (a, b, c)

I, the undersigned, (or my assigned legal representative) _____, hereby consent to receive service including all and any support and resources required to support my care, including but not limited to; receiving medication, assistance with daily living activities (including cleaning personal and common spaces), day programming and/or any medical care

required (Dr., calling ambulance, OT/PT, dentist, other medical care) and will to the best of my abilities follow all program and association policies and procedures.

I understand that I may be asked to leave The Ita Wegman Association if I:

- Physically hurt a Companion / Coworker or make threats of violence to harm others.
- Verbally threaten or abuse other Companions or Coworkers.
- Have a negative attitude that interferes with the comfort of other Companions.
- Have a negative attitude that interferes with my participation in the programs.
- Leave the premises without Coworkers' knowledge.
- Don't agree to follow all policies and procedures as outlined in the Orientation process.
- Willfully show destructive behavior towards land, structures, equipment, animals, etc.
- Abuse substances, such as drugs, alcohol or medication.
- Regularly refuse to participate in Glenora Farm's day program and house activities.
- Regularly refuse to help set and meet individual service goals.
- Regularly refuse to keep personal and common areas clean, which impacts the health and safety of all people in the household or program location.

Companions at Glenora Farm have the responsibility to keep their bedroom and living spaces clean and tidy. This includes clear pathways, safe and secure storage of items, and personal snacks should be stored in airtight containers. It is the responsibility of the House Manager to ensure Companions have the support they need to maintain a safe and healthy environment.

I understand that I have the right to an informed refusal. This means that I do not need to sign a form if I do not agree with it. If I do not sign a form, Glenora Farm Coworkers will explain any possible risks of not signing the form.

I understand that I have the right to list support I do not agree with receiving (receiving medication, assistance with daily living activities, day programming and/or any medical care required (Dr., calling an ambulance, occupational therapist/physical therapist, dentist, other medical care), etc.)

The Ita Wegman Association
of British Columbia

List of medical care, supports, and emergency services that I don't want to receive:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____
7. _____
8. _____
9. _____
10. _____

**Note: Please add an additional page if there are more than 10 supports or emergency services that you do not want to receive.*

Name of Companion: _____

Signature: _____

Legal Guardian (where applicable): _____

Signature: _____

Name of Witness: _____

Signature: _____

Date: _____

The Ita Wegman Association
of British Columbia

CP4: CONFIDENTIALITY

Associated standards 1.E.1 (a, b, c, d, e, f, g, h, I, j, k, l) - 1.E.3 (a, b, c, d, e, f) and 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, i

POLICY

Companions and their support systems involved with Glenora Farm have the right to have information about them kept private and confidential. All Glenora Farm Coworkers must follow Glenora Farm's Confidentiality Agreement.
Please note: The law requires us to disclose information (without requiring the written permission of the Companion) for the following reasons:

- If there is evidence of physical or sexual abuse or neglect as defined by the Vulnerable and Compromised CLBC Regulations or the Family and Child Service Act, or
- If Glenora Farm is court ordered to supply Companion records, or
- If Coworkers are subpoenaed to testify in court, or
- If the physical safety of a person is known to be in danger, or some other dangerous crime is known to be intended.

Unless the courts have specifically written an order that tells Glenora Farm not to allow you to read reports or documents written about you, you have the right to read any reports or documents written about you, and to know ahead of time who (if anyone) will be receiving reports about you. You have the right to request changes to any reports written about you, or have your comments or disagreements noted in writing. If you want to see reports or documents written about you, ask a Coworker to explain the process.

If any of this is unclear, if you need more information, or if you have any special questions, please ask a Coworker or see the ***CP7 HELP AND ADVICE, PROBLEMS, AND COMPLAINT FORM*** provided to you during your orientation to provide you with more information.

Responsibility of: All Companions and Coworkers

Monitored by: Facility Manager

The Ita Wegman Association
of British Columbia

CP5: ADMISSIONS AND RE-ADMISSIONS

Associated standard 2.A.3 (a, b, c) - 2.A.4 a, b (1, 2), c and 2.A.11 (a, b, c)

POLICY

Being referred to, starting or re-starting at Glenora Farm should be an easy experience for the Companion and their support system. Glenora Farm only accepts Companions when accurate and specific information has been gathered to make sure that the Companion is a good fit for Glenora Farm. Glenora Farm only accepts Companions who have funding in place.

PROCEDURES

- A Companion can either self-refer or have a Facilitator from Community Living British Columbia or other community professionals make a request for support.
- Request for admission information is available by contacting the Glenora Farm administration office. All requests are forwarded to the attention of the Facility Manager.
- All initial requests for support are documented, processed, and screened to determine if a suitability review will be engaged with. All information must be complete, accurate, and factual.
- Screening is documented and includes collecting relevant Companion information and consents for possible admission. Information collected includes age, current living/support situation, legal and medical information, special dietary needs, communication method, strengths, challenges, things they enjoy, mobility ability, vision, hearing, speaking ability, primary diagnosis, other diagnosis if applicable, current routines, current funding support and program participation status.
- Information gathered is shared with Glenora Farm Coworkers to determine suitability.
- **If found not suitable** - the Companion and/or legal guardian/representative and/or referral agent is notified within 10 working days and provided an explanation as to why the request was declined. Alternate resource information is provided, if available.
- **If found suitable** - contact is made with the Companion and/or family representative and/or referral agent within 10 working days to confirm a date and time for a trial visit.

- The Facility Manager and Quality Assurance Coordinator work together with the Care Group and Executive Group to determine suitability.
- When a Companion is found suitable after a trial visit, and funding has been confirmed, upon admission or shortly thereafter, an orientation to Glenora Farm is initiated to help familiarize and welcome the Companion and their representative/support system to Glenora Farm.
- A Companion file is completed upon acceptance into the program(s). The Companion file maintains all current and relevant information pertaining to their involvement with Glenora Farm. The Companion file is closed once support is complete or terminated. Files will be kept secure for a minimum of 7 years.

TEMPORARY MEDICAL / LEGAL LEAVE, PERSONAL ABSENCES

In situations where a Companion requests or requires a leave / absence from the Glenora Farm residential program, all efforts will be made to ensure the leave / absence is accommodated for a period of time agreed upon by the Companion, Companion representative / support system (if appropriate), funder and Glenora Farm Coworkers (Care Group, Executive Director). This ensures the Companion maintains a safe and secure place of residency. Program fees are paid during Companion absences.

READMISSIONS

Companions who are readmitted into Glenora Farm are expected to complete the procedures listed above. If a Companion is re-admitted, a new file is opened and all existing information is included in the new file to ensure continuity.

CRITERIA AFFECTING ADMISSION / WAIT LIST

Glenora Farm holds a list of potential Companions who have expressed interest in joining the Glenora Farm Residential Program and/ or Day Program. The wait list includes requests made by Companion representatives and CLBC referral agents.
Companions are prioritized based on suitability and are provided resource information for either alternate or temporary services, when possible.

EMERGENCY OR URGENT ADMISSIONS

In the event of emergency or urgent admissions, Glenora Farm Coworkers will work with CLBC.

TIMELINE

Suitability is determined within ten working days after a trial visit. Suitability is determined by conversations between House Managers, Workshop Leaders, and the Care Group.

House Managers that hosted a Companion for a trial visit determine suitability in collaboration with direct support staff (Workshop Leaders, Community Support Workers), and administrative Coworkers (Facility Manager, Quality Assurance Coordinator, Executive Director). All Coworkers are considered qualified in their position to be able to provide feedback. All Coworkers will be asked to bring their input to the Care meeting following a Companion's trial visit.

After suitability is determined, a clear timeline for placement (pending funding approval) is determined within one month. Glenora Farm aims to have trial visits in the first half of the month, so that prospective Companions may be able to move in on the 15th of the current month or the 1st of the following month.

Responsibility of: Executive Director, Facility Manager, Quality Assurance Coordinator

Monitored by: Care Group, Facility Manager and Business Administrator

CP6: COMPANION ASSESSMENT AND SUPPORT PLANNING, INDIVIDUAL SUPPORT PLANS, CARE PLANS AND RISK ASSESSMENTS, BEHAVIOUR SUPPORT PLANS AND SAFETY PLANS

POLICY

Glenora Farm conducts Companion assessments and reviews at admission and at regular intervals during the Companion's involvement with Glenora Farm to determine the Companions' strengths, abilities, preferences, challenges, needs, risks, and goals/ desired outcomes to inform support planning.

Support planning takes into account the rights and responsibilities of Companions and

promotes and supports each individual's personal development. The Quality Assurance Coordinator and Facility Manager will facilitate such assessments and reviews.

An Initial assessment is completed upon intake and provides a comprehensive overview of a Companion's current needs (Anamnesis and Companion application). Once an initial assessment is completed, the Quality Assurance Coordinator and Facility Manager create a Care Plan to address identified needs in collaboration with House Coordinators and Workshop Leaders. An Individual Support Plan (ISP) meeting is held annually or as-needed to establish Companion support and goals.

Policies and procedures governing Support Planning and their implementation are included in Coworkers training.

INITIAL ASSESSMENT AND SUPPORT PLANNING

2.A.16, 2.B.1

Any Companion accepted into Glenora Farm program(s) will have an assessment of needs, abilities, and risks carried out. When planning support, Glenora Farm Coworkers will consider relevant medical history, psychological, social, and functional information, information on previous direct support services, and other assessments if they are available. With this information in mind, a Care Plan will be completed within 30 days of acceptance into the program.

Glenora Farm will initiate collaborative planning with Companion representatives and other approved social service agencies and groups where the integrity and viability of these groups has been confirmed by the Facility Manager and Quality Assurance Coordinator. Collaborative planning is designed to support Companion needs, Companion legal representative involvement (where applicable), and the involvement of other beneficial services which the Companion may require assistance in accessing.

Glenora Farm documents outcomes of assessments and reviews. Any decisions and outcomes will be made in collaboration with the Companion or be explained to the Companion where necessary. The records of such reviews will be shared with those present, agreed and signed by the Companion, member(s) of the leadership team and all other persons present. Copies of

such records, including supporting documentation solicited from other agencies, are retained in the Companion's residential file and/or in their file in Glenora Farm office.

If a Companion disagrees with the assessment or review, their disagreement, along with the reasons why, will be recorded. If this happens, the Companion might ask for more conversation to fix the issue with at least one Coworker, in addition to those who carried out the original assessment or review and any other person the Companion would like to be accompanied by.

If this does not solve the disagreement, then the Companion may appeal by filing a formal complaint, either verbally with a signature, or in writing with a signature. The Companion will be provided support as requested. The steps outlined in ***CP7- Help, Advice, Problems, and Complaint Form*** will then be followed.

INDIVIDUAL SUPPORT PLANNING (ISP)

2.A.16 (a, b), 2.E.2 and 2.E.3 (a, b)

Each Companion takes part in an annual Individual Support Plan Meeting. They are involved in deciding when an ISP takes place, where it takes place, and who will be invited. Their experiences, perceptions, wishes and intentions are central to ISP meetings.

ISP's may cover a broad range of areas of the Companion's life and activities including:

- Relationships
- Health and Wellbeing
- Cultural and Spiritual Diversity and Inclusivity
- General Observations
- Strengths
- Benefits from Involvement
- Changing Needs and Transitional Planning
- Assistive technology, reasonable accommodations, or adaptive equipment needed
- Community inclusion activities

- Any other topics that the Companion, family member, or Coworker feel are important to discuss
- Goal Review and Setting (skill development goals in the Community Inclusion program and personal life goals in the Community Housing program)

The annual ISP meeting is an opportunity to set goals which include specific and measurable objectives, methods/techniques to be used to achieve the objectives, those responsible for implementation, and how and when progress on objectives will be regularly reviewed.

SETTING GOALS

1. The Companion, House Manager, and family rep work collaboratively to set 1 goal for each program the Companion is engaged in (day program and/or residential) at the annual ISP meeting and determine the Coworker responsible for supporting completion
2. The Quality Assurance Coordinator updates the Care Plan
3. The Quality Assurance Coordinator updates the Goals section in the database
4. Quarterly progress notes (January, April, July, October) are entered in the progress sections of the 'Goals' heading by the Coworker responsible for the Goals section
5. Update the Goals section upon completion of the goal
6. At the next ISP meeting, new goals are set or it is determined to keep working on the existing goal

The ISP is communicated in a way that is understandable to the Companion, their family members, and the Coworkers responsible for implementing the plan.

The ISP is revised annually based on the needs and satisfaction of the Companion.

Responsibility of: All Coworker

Monitored by: Facility Manager, Quality Assurance Coordinator

CARE PLANS INCLUDING RISK ASSESSMENTS

Associated standard 1.H.2 (a, b) - 2.A.16 (a, b) - 2.B.7 a (1, 2, 3, 4, 5), b

POLICY

Glenora Farm Quality Assurance Coordinator creates a Care Plan for the Companion within 30 days of acceptance to Glenora Farm. As per the Residential Care Regulations, Care Plans must include:

- A plan to address medication administration, including safeguards for those who self-administer
- A plan to address behavioural interventions
- A plan to address the use of restraints, if applicable
- An oral health care plan
- A nutrition plan
- A recreation and leisure plan
- A fall prevention plan
- A plan to prevent Companions from leaving and a plan to locate the Companion if they have left the Farm without notifying a Coworker
- Any conditions or requirements under the Mental Health Act
- Assessment of needs (lack of something, requirement, or a desire)
- Preferences
- Ability to make informed decisions

- Background information (care history, diagnosis, and lifestyle)
- SMART Goals (see process above)
- Approaches to satisfy the Companion's needs
- Annual review with objective evaluation of the Care Plan's efficacy
- Documentation of refusal to follow the Care Plan
- All changes or reviews

General risk assessments are included in the Companion's Care Plan, which include risks to health and safety in the community, actions to minimize risk, Coworkers responsible for minimizing risks, and whether to accept a situation with inherent risk. At times, a specific risk assessment may be conducted for an activity, program location, etc. This will be created in collaboration with the Companion, their support network, and other relevant professionals as appropriate/needed. Coworkers will complete an orientation with Companions and review protocols and expectations prior to commencing support. Incidents relevant to protocols will be documented and reviewed by the Facility Manager, Quality Assurance Coordinator, or the Human Resources and Relations Group.

Care Plans will be reviewed annually for each Companion and after their ISP meeting to update any elements as needed.

Companions, Glenora Farm, Island Health or CLBC may instigate a review at any time should there be an identified need i.e. a serious incident or major event in a Companion's life.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

BEHAVIOUR SUPPORT PLANS AND SAFETY PLANS

Associated standard 1.H.2 (a, b) and 2.A.17 a, b (1, 2), c (1, 2, 3), d

POLICY

Behavioural Support Plans and Safety Plans must be developed for Companions who demonstrate aggressive, volatile or selfinjurious behaviours. To ensure Companion safety, a plan is created with the understanding that the least intrusive intervention will be used when a Companion is at risk of self harm or when threatening to harm others.

PROCEDURE

All formal Behaviour Support Plans or Safety Plans must be created and approved by a Behavioural Consultant in compliance with external regulations. Glenora Farm Coworkers will advocate for behaviour management services to be accessed by the Companion if needed. The Quality Assurance Coordinator and Facility Manager will be responsible for advocating for necessary behaviour management services. All Coworkers will be responsible for following the Behavioural Support Plan and completing case notes and relevant reporting as needed.

Glenora Farm Coworkers will never use prohibited practices - actions that are reliant on fear, pain, or threats, or that constitute an infringement on the fundamental human entitlements or rights of a Companion.

Glenora Farm Coworkers will engage with restricted practices as a last resort. Restricted practices include techniques or strategies that limit a Companion's freedom of movement including: removing access to activities or restricting rights for a limited period of time. The period of time must be identified and include how activities and rights can be regained. Restriction of rights must never include taking away adequate food, adequate clothing, and adequate heat, access to health care, suitable shelter or safety, or reasonable access to family members.

DEFINITIONS

***Behaviour Support*:** A set of interventions developed by a professional behavioural consultant to support individuals with challenging or difficult behaviours. These behavioural strategies are designed to improve a Companion's quality of life, are functionally based and are integrated with person-centred planning.

Behaviour Support Plan: A document developed by a behavioural consultant in conjunction with the Companion, their family and The Ita Wegman Association that outlines specific behaviour support interventions or treatment strategies. Includes implementation and review requirements.

***Behavioural Consultant*:** A professional with post-graduate qualifications in clinical or educational psychology or Special education or a university graduate in the process of completing post-graduate work and/or working under clinical supervision.

***Safety Plan*:** An individualized, written document designed to address situations where dangerous behaviour has the potential to harm the Companion or those around them. The Safety Plan outlines the strategies and behaviour support procedures co-workers are to use to de-escalate the behaviours and reduce risk. They can only be developed in conjunction with an overarching Behaviour Support Plan.

***Prohibited Practices*:** Actions that are reliant on fear, pain, or threats, or that constitute an infringement on the fundamental human entitlements or rights of a Companion.

Restricted Practices: Techniques or strategies that limit a Companion's freedom of movement including: removing access to activities or restricting rights for a limited period of time which is identified and includes how activities and rights can be regained. Restriction of rights must never include taking away adequate food, adequate clothing, and adequate heat, access to health care, suitable shelter or safety or reasonable access to family members.

Responsibility of: House Managers, Facility Manager, and Quality Assurance Coordinator

Monitored by: Executive Director

CP7: HELP, ADVICE, PROBLEMS, AND COMPLAINT FORM

Associated standard 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I

If you're having problems in your house or in the day program or have a complaint and are not getting the help you need, or you're looking for information that's hard to find, here are some resources that can assist you.

- **Island Health / Community Care Licensing**

If you have any concerns, complaints or issues regarding your care, treatment or support provided, call:

250-739-5800

- **Community Living British Columbia** (if you are funded by them)

If you have any concerns, complaints or issues regarding your care, treatment or support provided, call:

250-390-7200or 1-877-660-2527

- **Public Guardian and Trustee**

If you have a Public Guardian and Trustee and are worried about your rights in any legal proceedings; contracts being made on your behalf; your money being used by someone else, or not being spent to your benefit, call:

1-800-663-7867 (Inquiry BC) and ask for the Public Trustee in Victoria or **250-356-8160**

- **Ombudsman**

If you feel a decision made for you seems unfair (whether you were listened to or not), doesn't make sense, or is against the rules, call:

1-800-567-3247 anywhere in BC or **250-387-5855** in Victoria

GUIDELINES FOR CONFLICT RESOLUTION

If you have a problem or issue with someone, please follow these steps:

1. Speak to the person you are having the problem or issue with. Be specific and share what the problem is. Remember to be polite and respectful.
2. Focus on one issue at a time.
3. Let the person know how you think the problem or issue can be solved. Allow the other person to share their feedback - they might have a great solution! You might be able to come to a compromise.
4. Make sure that you clearly understand the response to your problem. If you aren't sure, ask the person to explain it differently until you understand. Ask a Coworker if you need help.

5. Have an open mind.
6. Take the time to listen to your own thoughts and feelings before speaking. Stop and think before responding. This might mean saying, “give me a few minutes to think about that”. Take your time.
7. If you feel like the problem has not been solved, or if the problem continues, you can speak to a Coworker. You can also look at the CP7 Help and Advice sheet. Each house has one posted on the wall. If you can’t find it, ask a Coworker to help you find it.

COMPLAINTS, ISSUES OR PROBLEMS

Associated standard 1.J. 3 a (1, 2, 3, 4, 5 (a, b), 6, 7, 8, 9), b (1, 2), c

POLICY

All Companions and their advocates (friends, family, etc.) are given opportunities to voice their complaints, issues or problems about:

- Interactions with Glenora Farm Coworkers.
- Interactions with other Companions in the home or program.
- Rules and regulations of the home and program.
- Rights and responsibilities.

If a Companion or their advocate feel the complaint, issue or problem is of a formal nature which is defined as “any situation where a Companion or their identified representative notifies Glenora Farm’s Facility Manager (Kristine Millere), Quality Assurance Coordinator (Olivia Jackson) or the Human Resources and Relations (HRR) Group of the issue, complaint or grievance”, the Companion or their identified representative must talk to the Glenora Farm Facility Manager, Quality Assurance Coordinator, or Executive Director. The Coworker that you talk to will ask for your signature on the Formal Complaint Form. The Companion or their representative is not required to fill out the full Formal Complaint Form, but they must provide a signature.

Companions and their advocates have the right for their views to be heard and to be included in decisions affecting the Companion. If you make a complaint, you will not get in trouble, be kicked out of the Farm, or not be able to attend the program.

The Facility Manager, Quality Assurance Coordinator, or Executive Director is responsible for investigating the complaint within 3 business days of receiving the Formal Complaint Form and deciding whether the formal complaint will result in actions towards a Coworker or Companion.

Each person involved in the investigation is expected to be honest, respectful, and take accountability for their actions.

The decision will be provided to you or your advocate in writing within a maximum of 15 business days from the time a Companion hands in the Formal Complaint Form. If you are not happy with the decision, you can talk to a family member, a friend, or call Community Living British Columbia, Island Health, or the BC Ombudsperson.

You are welcome to ask an advocate for support at any time throughout the formal complaint process. All Companions have the right to access family, professional, and any community advocate (i.e. ombudsman) for help at any point during the process (refer to ***Help and Advice***). Coworkers can help Companions in finding advocates as requested.

Glenora Farm documents all formal complaints, and at the end of the year, we analyze all of them so that we can understand where people may have issues and keep improving every year.

PROCEDURE

1. **Within 3 business days,** speak directly to the person you are having the problem or issue with. Be specific and state the problem.
2. **Within 3 business days,** if the person does not want to talk with you, or if you feel the problem has not been fixed, please ask a House Manager or Workshop Leader to help find a solution.
3. **Within 7 business days,** if the problem is still not fixed, ask your House Manager or Workshop Leader to help you file a formal complaint.
4. **Within 3 business days,** the Facility Manager, Quality Assurance Coordinator, or Executive Director will begin investigating and decide whether the formal complaint will result in action against a Coworker or Companion.
5. **Within 15 business days,** the decision will be provided to you or your advocate in writing. If you are not happy with the decision, you can talk to a family member, a friend, or call Community Living British Columbia, Island Health, or the BC Ombudsperson.

- At any time in the complaint process, you can ask a coworker to help you follow the steps. The Coworker will help you find a solution.
- All of the steps will be written down by a coworker and kept in your file.

Responsibility of: All Coworker and Companions

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director

COMPANION FORMAL COMPLAINT FORM

Associated standard 1.J. 3 a (1, 2, 3, 4, 5 (a, b), 6, 7, 8, 9), b (1, 2), c

Formal complaints will be addressed by the Facility Manager or desinate within 3 business days of receiving the formal complaint.

Companion Name	Date	Signature
Helping Coworker/ Advocate Name	Date	Signature
Enter specific details of your complaint:		

Steps followed after your complaint:		
Name of Coworker Completing Form	Date	Signature
Companion Reviewing Completed Form	Date	Signature

CP8: CONSENT FOR VIDEO AND PICTURES

Associated standards 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I and 2.A.15 (a, b, c, d, e)

POLICY

Before having a photo, video, or audio recording taken, Companions must provide written consent by signing the ***Website and Media Release Form.*** Companions will not p

PROCEDURES

Media Release and Website Form will be completed upon intake and will include the following information:

- The purpose of the video/photographs;
- Who will have access to the material;
- Ability to withdraw consent at any time, either generally or for specific uses;
- The identification information, if any, which will be included on the material;
- The intended audience for the material;
- Signed consents will be retained in the Companion's file.

A new consent form will be completed if changes to the form are introduced. Companions and Coworkers can withdraw consent at any time. Companions and Coworkers can reach out to the Quality Assurance Coordinator if they have any questions or concerns.

Responsibility of: All Coworker

Monitored by: Quality Assurance Coordinator

WEBSITE AND MEDIA RELEASE FORM

Associated standards 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I and 2.A.15 (a, b, c, d, e)

The Ita Wegman Association
of British Columbia

I _____ (print name) authorize Glenora Farm to use and reproduce photographs, videos, or audio recordings taken of me for the following uses (please indicate yes or no to each category). All recorded media, prints and created media from the content shall constitute the property of Ita Wegman Association of British Columbia.

Are you OK with these? (Yes or No)	**Yes**	**No**
I am OK with having my first name shared		
I am OK with my photos and videos being used for promotional purposes (online and printed)		
I am OK with my photos and videos being used on the Glenora Farm website		
I am OK with my photos and videos being used on Glenora Farm social media platforms		
I am OK with my photos and videos being used for local publications (newspapers, etc.)		
I am OK with my photos and videos being used for Camphill Association of North America or Camphill Foundation social media platforms		

Old photos or videos may be accessed by The Ita Wegman Association Coworkers as needed. I understand that I can withdraw this consent at any time, and / or can withdraw consent for specific photos, videos or uses at any time.

_____

Signature Date

The Ita Wegman Association
of British Columbia

_____

Printed Name and Signature of Parent or Guardian Date

WITHDRAWING CONSENT - General use

I hereby withdraw my consent for photo/video use by The Ita Wegman Association.

_____

Printed Name and Signature of Companion and / or Guardian Date

WITHDRAWING CONSENT - Specific uses

I hereby withdraw my consent for photo/video use by The Ita Wegman Association for the following specific uses (please specify):

_____

Printed Name and Signature of Companion and / or Guardian Date

CP9: CONSENT FOR RELEASE OF CONFIDENTIAL INFORMATION

Associated standard 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I and 2.A.15 a, b, c, d, e

The Ita Wegman Association
of British Columbia

COMPANION NAME	

AUTHORIZATION

I,_____ (name of Companion / Companion legal Representative), authorize _____ (name of Coworkers) to release the following specific information on a strictly confidential basis to

_____

(Name of Person and Agency/Program).

These records are to include: (i.e. medical records, etc.)

1.
2.
3.

The consent will **expire** on: Specific date: _____

☐ 60 days

☐ One year (when the release/obtaining of information is required for ongoing service provision).

The Ita Wegman Association
of British Columbia

I have read and/or been provided support to understand the nature of my consent. I am also aware that I may withdraw my consent at any time and will not be refused services.

_____

Signature of Consenting Person

Date (Consent will take effect on this date)

_____ _____

Signature of IWA Coworker

Date

WITHDRAWING CONSENT

Confidentiality is ensured and information will not be released without informed consent, except in cases where, at the discretion of the service provider, the person's safety, well-being, or the safety of others is at risk and for purposes of supervision. Specific information may be released where law requires Coworkers to do so.

Date Consent Withdrawn: _____

Signature of Person Withdrawing Consent: _____

Title and Signature of Coworker: _____

CP10: FILE TRACKING FORM

1.E.3 b, 2.A.13

Companion Name: _____D.O.B.: _____

Item	Frequency	Location
Name, sex, and date of birth	Upon admission	Database, administration paper file
Medical insurance plan number	Upon admission	Database, administration paper file, administration digital file (on Immunization Record)
Immunization Record	Upon admission, updated as needed	Administration paper file, administration digital file
Date of admission at Glenora Farm	Upon admission	Database
Emergency contact form	Upon admission, updated as needed	Administration paper file,
Name and telephone number of health care provider(s)	Upon admission, updated as needed	Database
Photograph of the individual	Upon admission, updated as needed	Database
Record of medication given	Upon admission, updated as needed	Database, Households (MAR sheets)
Any person who is restricted or prohibited access to the individual or may pose a risk to the health and safety of a person in care	Upon admission, updated as needed	Database, administration paper file

Consent in writing to call a medical practitioner or ambulance in case of an accident or illness (***CP3 - Consent to Receive Support and Participate in Community Life***)	Upon admission, updated as needed	Administration paper file
Companion Funds Management Form (***FP11 - Companion Funds Management***)	Upon admission, reviewed annually at ISP meeting for relevance	Administration paper file
Companion Rights and Charter of Responsibilities (***CP1 - Companion Rights and Charter of Responsibilities***)	Upon admission and annually	Administration paper file
Website and media release (***CP8 - Website and Media Release Form***)	Upon admission and reviewed annually at ISP meeting for relevance	Administration paper file
Care Plan	Upon admission, reviewed and updated annually in December	Database, administration digital file
Plans or documents provided by external specialists (ie. Behaviour Support Plan, Safety Plan, Psychoeducation Assessments, etc.)	Upon receipt, reviewed in accordance with external regulation timelines	Database, administration paper file, administration digital file

The Ita Wegman Association
of British Columbia

CP11: COMPANION FILES, ACCESS TO INFORMATION, AND DOCUMENTATION

Associated standard 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, i

POLICY

Each Companion supported at Glenora Farm will have files to hold all information and important documents. All Companion files will be held in a locked area and only contain information, reporting, and documents that have to do with their support at Glenora Farm. Companions have the right to access their personal information and records. If a Companion wishes to access their information, they must follow these steps:

PROCEDURES

1. Let your House Manager or Workshop Leader know that you want to see your file. Let your House Manager or Workshop Leader know which part of your file you would like to see. Your House Manager or Workshop Leader will ask the Facility Manager or Quality Assurance Coordinator if it is okay. The Facility Manager or Quality Assurance Coordinator will let you know if it is okay within 5 business days.

2. When your request is approved, a Coworker will go with you to look at your file. Your file needs to stay in the office. A Coworker needs to be with you when you are looking at your file.

3. There might be some information in your file that Glenora Farm keeps private. If this happens, there will be a clear reason why it is kept private. If this is a temporary decision, the Coworker will make a note in your file that says when you can view the private part of your file.

Note for Coworkers:

For Companions funded through CLBC:

If the information request comes from the individual or their legal representative, and the request is for many records, or you feel the information needs to be checked for information that could be harmful if released, contact CLBC before proceeding.

If the information request comes from the individual or their legal representative, and is low risk (i.e., their personal plan) and does not contain anyone else's personal information, it is okay to

provide the information. However, information cannot be released to anyone else, including the family, unless a current signed consent is on file or if the individual holds a Representation Agreement with the Companion.

Corrections to personal records received from individuals, or their representatives are to be directed to CLBC. Corrections to personal records are to be completed within five business days after CLBC contacts the service provider.

Law Firms

If the request is from a law firm, please refer the request to the local CLBC office.

Requests From Other Government Agencies and Offices

Glenora Farm may be required to provide any information requested by the Public Guardian and Trustee, Coroners Service, Representative for Children and Youth, Medical Health Officer, or an active police investigation as required by law. Please check with CLBC before proceeding unless there is an immediate risk to safety.

Glenora Farm should not provide any information to other government agencies such as Health Authorities or School Districts unless directed by CLBC or with the signed and current consent of the individual. Please notify your local CLBC office if you receive a request from a government agency.

Other Service Providers

Do not share information with other service providers without the consent of the individual. Please direct the other agency to contact the local CLBC office. You may be asked to provide your records to the local CLBC office.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Business Administrator

DOCUMENTATION

POLICY

Glenora Farm ensures all reporting and documentation regarding support provided to Companions is done in a manner that is clear, factual, includes Companion voice, and is timely. From intake to discharge planning, all reporting is support driven and specific to each Companion's needs. Assessment information, support planning, progress notes, and discharge/transition planning are coordinated to facilitate accountability and continuity of support.

Timelines for record keeping and documentation is as follows:

- **Critical incidents:** Input into the database and emailed to the Facility Manager or designate immediately. Reported to CLBC and Island Health within 24 hours between Monday and Friday, and within 48 hours between Saturday and Sunday.
- **Internal incidents:** Input into the database within 24 hours.
- **Companion files:** Created during the admissions and onboarding process and completed within 2 months of the Companion's entry into Glenora Farm programming. Companion files are destroyed 7 years after their exit from Glenora Farm programming.

Entries on the database are considered legal documents and as such are confidential, please refer to ***CP4- Confidentiality*** and ***Companion Files and Access to Information***. The intended use for our database is for Coworkers to be able to communicate the support needs, general health and medication information, goal tracking in community inclusion and community housing, and the overall well being of a Companion. All family representatives, healthcare professional information and any medical information including but not limited to any medication requirements should be up to date at all times. Each Companion's "landing page" should contain a simple high-level summary of any important care and support information, found under "OTHER FEATURES".

The database also includes the ability to track meeting notes for each of the houses and noteworthy activities that each house engages in as a group. The purpose of meeting documentation is to confirm that important information is moving through our organization to Companions and Coworkers. Noteworthy activities for the house (i.e. going to the farmers market on Saturday) enables Coworkers to input an activity as a house rather than in each one of the Companion's profiles. This provides the organization a method to document all of our Community Inclusion engagement both within our programs at Glenora Farm as well as in the broader community. This documentation is key for our organization to demonstrate to outside

stakeholders that we support Companions to access resources and activities both on and off the farm.

House Managers must create at least 1 database entry for each Companion in their house each week. Anything time-sensitive must be documented as soon as possible but within 24 hours.

Workshop Leaders (Garden, Herbs, Farm, Weavery, Cooking) must create at least 1 database entry for each Companion they work with in a 2-week period. Anything time-sensitive must be documented as soon as possible but within 24 hours.

Workshop Leaders (Music) must create at least 1 database entry for each Companion they work with in a 4-week period. Anything time-sensitive must be documented as soon as possible but within 24 hours.

PROCEDURE

When using the database Glenora Farm requires that all Coworkers are professional and state facts, not opinions. This is a place to share accurate and timely information in order to provide the best standard of care for those we support. Language used must be respectful at all times and have no undertones of gossip or shaming.

- Database entries are not to be used to discuss issues not related to the individual, nor is it a place to express personal opinions or how daily events have impacted Coworkers.
- Entries should be used to help all Coworkers support Companions in their daily activities, personal growth, goals, or skill enhancement in all program activities (residential and community inclusion.)
- These database entries can also be used as a tool to assist us in identifying any common trends throughout program activities and respond accordingly (i.e. two particular Companions seem to trigger each other).
- When making a database entry, one must choose a label for the entry. The options are “complaint, critical incident, email, internal incident, meeting, observation, phone call, therapy session, recommendation, care log, medical appointment, and dental appointment”. Choose the label that best fits the situation you are documenting.
- House Managers are to ensure that all health/medical information is current and is to be updated as soon as there are any changes to a Companion’s care requirements including but not limited to medication changes. General health concerns should be

noted in a professional manner, i.e. “DC woke up with a cold this morning and will be supported at her home to monitor for any fever or additional symptoms, Coworker (name) will contact the GP if symptoms become worse.” Always provide an update(s) to close the loop.

- Planned positive/restrictive procedures or risk assessments should be reviewed. These will be created and/or edited by the lead care team that includes the Facility Manager, Quality Assurance Coordinator, and House Manager(s), and may be created under the guidance and directive of a Behaviour Analyst and CLBC best practice standards.
- Upon departure from Glenora Farm programming, Companion’s database profiles will be marked as “inactive” and will be removed from the landing page. After 7 years, Companion profiles will be deleted.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

CP12: TRANSITION AND DISCHARGE PLANNING

Associated Standard 2.A.3 (a, b, c), 2.A.4 (a, b, c), 2.A.6 (a, b), 2.A.7 (a, b),2.B.9, 2.B.10, 4.G.6 (a, b), 4.H.5 (a, b, c, d)

POLICY

The Ita Wegman Association will ensure that a discharge report and transition plan ***is*** completed for each Companion transition or discharge. The planning process is initiated upon formal notice of transition and/or discharge. The transition plan and discharge report will be completed within 21 business days from the discharge/transition. Glenora Farm works with the

Companion, their representative, the funding agency, and the new service provider, if applicable, during the discharge process to ensure appropriate resources, information sharing, and service referrals are included in the discharge and transition process.

PROCEDURES - DISCHARGE PLANNING

A written ***Discharge and Transition Summary*** is prepared to ensure continuity of support and includes:

- Documents received from previous service providers
- Services received at Glenora Farm
- Medication received at Glenora Farm
- Reason for discharge/transition
- Support still needed
- Noteworthy events
- Progress reports (goals attained, ISP's, goal tracking)
- Identified strengths, needs, abilities, and preferences
- Referrals and other community services information with contact information
- Additional services needed
- Medical services required
- Internal and external assessments
- Accommodation options that could be a good fit
- Medications and current MAR sheet
- Follow-up plan for receiving service provider
- Upcoming appointments
- List of people/organizations that the Discharge and Transition Summary should be sent to
- CP9 - Consent for Release of Confidential Information

- OP4 - Records Management
- Indicate whether permission is granted for Coworkers to reach out to the Companion
- Date for a follow up conversation, if applicable
- Companions and their representatives will receive a copy of the summary form.

UNPLANNED DISCHARGE OR ADDITIONAL SUPPORT REQUIRED

If a Companion is discharged or removed from Glenora Farm due to a critical incident i.e aggressive or assaultive behaviour, communication with the Companion, their representative, and any external funders will occur and be documented within 3 business days post-discharge. Documentation will include attempts made (successful or not) to secure linkages to appropriate services for the Companion. When unplanned discharges occur or additional support or services are needed, the Facility Manager and Quality Assurance Coordinator are responsible for follow up.

COMPANION REFERRAL TO OTHER SERVICES

Where a Companion is transferred or referred to another service provider, the Facility Manager and Quality Assurance Coordinator will forward a copy of the ***Discharge and Transition Summary*** to the new service provider. ***CP8 - Consent to Release Confidential Information*** must be completed by the Companion in advance of sharing the Discharge and Transition Summary with a future service provider. .

During the transition and discharge planning process, Glenora Farm Coworkers are responsible for ensuring Companions are aware of other services and resources in the community that are available to them. Glenora Farm Coworkers are available to assist Companions and their legal representatives in accessing services when requested and appropriate. Glenora Farm Coworkers will work in collaboration with Community Living British Columbia and any other funding partners as appropriate.

Connecting with community networks and available resources involves Glenora Farm working with Companions and their legal representatives (when appropriate) to ensure referral and planning efforts are well integrated and coordinated. When requested and appropriate Glenora Farm Coworkers will work with Companions and their representatives to complete referrals, confirm transition plans i.e., transportation needs, intake processes, follow-up support etc.,

ensure associated reporting (discharge / transition summary) and any other relevant information is forwarded to other service providers / community resources as approved by the Companion. All communication will be managed in consultation with the Companion and / or Companion legal representative.

FOLLOW-UP

Companions and/or their representatives will be asked whether or not they are willing to be contacted after discharge. If appropriate, this decision will be verified at discharge. If affirmative, a telephone follow-up interview will be conducted and documented in the Companion's database profile.

Responsibility of: Facility Manager, Quality Assurance Coordinator

Monitored by: Executive Group and Board of Directors (if appropriate)

DISCHARGE AND TRANSITION SUMMARY

Associated Standard 2.A.3 (a, b, c), 2.A.4 (a, b, c), 2.A.6 (a, b), 2.A.7 (a, b), 4.G.6 (a, b), 4.H.5 (a, b, c, d)

The Ita Wegman Association will ensure that a discharge report and transition plan is completed for each Companion transition or discharge. The planning process is initiated upon formal notice of transition and/or discharge. The transition plan and discharge report will be completed within 21 business days from the discharge/transition. The Ita Wegman Association works with the Companion, their representative, and the funding agency during the discharge process to ensure appropriate resources, information sharing, and service referrals are included in the discharge and transition process. The Ita Wegman Association leadership team will work with the funding agency to assist the Companion and their representative, if applicable, in finding housing that is safe, affordable, accessible, and acceptable.

Companion's Name: Date of birth:

Family representative:

Family representative contact info:

SUMMARY OF TIME AT GLENORA FARM .

Trial visit dates:

Community Inclusion start date:

Community Living start date:

Discharge date:

Primary care provider/ family physician:

Discharge summary completed by:

DOCUMENTS RECEIVED FROM PREVIOUS CARE PROVIDERS

-

SERVICES RECEIVED AT GLENORA FARM

-

MEDICATION RECEIVED

-

REASON FOR DISCHARGE/TRANSITION

-

SUPPORT STILL NEEDED

-

NOTEWORTHY EVENTS

-

PROGRESS REPORTS - GOALS ATTAINED (ISP, GOAL TRACKING, SURVEY RESULTS)

-

COMPANION'S IDENTIFIED STRENGTHS, NEEDS, ABILITIES, AND PREFERENCES (ISP AND CARE PLAN)

-

REFERRALS AND OTHER COMMUNITY SERVICES INFORMATION WITH CONTACT INFORMATION

-

ADDITIONAL SERVICES NEEDED

-

MEDICAL SERVICES REQUIRED

-

INTERNAL AND EXTERNAL ASSESSMENTS

-

DISCHARGE PLAN .

ACCOMMODATIONS - OPTIONS THAT COULD BE A SUITABLE FIT

-

MEDICATIONS AND CURRENT MAR SHEET

-

FOLLOW-UP PLAN FOR RECEIVING SERVICE PROVIDERS

The Ita Wegman Association
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-

UPCOMING APPOINTMENTS

-

COPIES OF THIS DISCHARGE AND TRANSITION SUMMARY TO BE SENT TO THE FOLLOWING INDIVIDUALS AND/OR ORGANIZATIONS

-

CONSENT FORMS RECEIVED

CP9 - Consent for Release of Confidential Information has been signed:

____ Yes, ____ No

OP4 - Records Management: The process of storing the Companion's files/records has been explained:

____ Yes, ____ No

Permission for Coworkers to contact the Companion for follow up has been given:

____ Yes ____ No.

Date for follow up conversation: _____

Companion/ Representative has agreed to participate in Exit Survey:

____ Yes, ____ No

Responsibility of: Facility Manager, Quality Assurance Coordinator

Monitored by: Executive Group and Board of Directors (if appropriate)

CP13: HEALTH AND PERSONAL SAFETY

Associated standards 1.H.2 (a, b), 1.H.3

POLICY

Companion health and personal safety is very important in all daily activities. Glenora Farm is committed to helping Companions minimize personal harm to themselves and others while respecting individual autonomy and the dignity of risk. Glenora Farm will work with each Companion to respond to their level of risk.

PROCEDURE

Every Companion participates in regular health, safety and emergency procedure training along with safety planning to ensure they understand, are knowledgeable of, and are able to follow through with all health, safety and emergency procedures and planning.

Companions may require immediate intervention or substitute decisions in an attempt to avoid imminent danger or harm. Whenever possible, Coworkers will respond to ensure the well-being of a Companion. This may include consulting with medical professionals when appropriate.

The Ita Wegman Association
of British Columbia

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

ILLNESS AND INJURY

Associated standard 1.H.2 (a, b)

POLICY

The health, safety, and well being of the Companions is of prime importance to all Coworkers associated with Glenora Farm. All relevant authorities, internal and external, including legal family representatives, will be notified of any significant illness or injury immediately. Medication will be given or administered to a Companion per doctor's or pharmacist's orders. Coworkers cannot sign consent for medical treatment if a Companion is hospitalized. If the Companion has a legal representative or Public Guardian and Trustee, they must sign consent. If they do not have a legal representative, then the Companion must sign their own consent.

PROCEDURES - GENERAL

Coworkers are knowledgeable of the medical issues of Companions and consider this information in their day-to-day decisions. Coworkers will not dismiss any complaint of health issues and should err on the side of safety.

ILLNESS/INJURY

Coworker Response

Coworkers will follow the Companion Care Plan, if applicable, and immediately report any illness or injury, which occurs to a Companion in their care to the House Manager or Facility Manager. If the illness or injury is of a significant nature, enough to require emergency measures, the House Manager or Facility Manager will give direction to access immediate medical attention and emergency assistance. If the illness or injury does not require immediate or emergency treatment, first aid treatment is provided by trained Coworkers.

Note: If a Companion has been punctured by a needle or bitten by a person with a known or suspected disease, it is expected that Coworkers will seek medical attention for the Companion immediately.

DOCUMENTATION

Any situation involving Companion significant illness or injury will be documented using the Companion Database immediately or within 24 hours of the incident. Critical Incident reports are completed by the Facility Manager and submitted to Community Living British Columbia (CLBC) and Island Health. Any legal family representatives will be contacted, in addition to other professionals as applicable.

RECORDS

Complete and current records must be kept on the Companion database outlining all medical issues reported by the Companions and/or addressed by Coworkers.

Responsibility of: All Coworkers

Monitored by: Facility Manager

CP14: DIGNITY OF RISK

Associated standard 1.H.2 (a, b), 1.H.3

POLICY

Dignity of risk is the right to live life in a way a Companion chooses, even with risk. It recognizes that daily life is uncertain and that taking normal risks can lead to positive outcomes in quality of life, health and well-being. Dignity of risk balances the Companions' strengths, needs, and risks with the right to self-determination. There are some activities that are deemed high-risk where appropriate support is required.

PROCEDURES - HIGH RISK ACTIVITIES DEFINED

High-risk activities include any activity in which there is:

- a need for a formal instructor,
- an increased risk to physical, mental and/or emotional health due to the nature of the environment and/or
- an increased risk to physical, mental and/or emotional health due to a requirement of special physical skills/strength.

ACTIVITIES THAT ARE NOT PERMITTED

Glenora Farm has a responsibility to support people in making healthy decisions. Glenora Farm Coworkers cannot, in good conscience, support or promote activities in which there is a very strong likelihood of injury or damage.

APPROVAL OF ACTIVITIES

Coworkers will consult with the Facility Manager as to whether or not an activity is an approved activity.

CONTINUAL SUPERVISION OF HIGH-RISK ACTIVITIES

Companions involved in high-risk activities, which do not require supervision by a formal instructor will be monitored by Coworkers who are familiar with the risks and safety considerations of the activity and can provide oversight / monitoring as required. Companions will be provided education to reduce identified physical risks.

Responsibility of: All Coworkers

Monitored by: Facility Manager

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CP15: OUTINGS

Associated standard 1.H.8 a (1, 2), b (1, 2, 3, 4, 5) and 2.E.1 a (1, 2, 3, 4), b, c

POLICY

Companions are encouraged to participate in the greater community on a regular basis by going on excursions and taking part in community-based events and programs. House or individual Companion outings may be discussed with the House Manager or Facility Manager. Outings are dependent on access to vehicles and Coworker scheduling. Day program outings should be discussed with the Facility Manager.

When on outings all Glenora Farm policies and procedures must be followed. If the activity is in a community location, Coworkers will make themselves aware of all emergency procedures within the physical environment, i.e., emergency exit routes, process for evacuation etc. Coworkers will make themselves aware of any accessibility needs to be accommodated by the community location. Coworkers and Companions will follow all directions provided by on-site facility staff responsible for the building in the event of an emergency.

PROCEDURES

APPROVAL

Companions should let the House Manager know if they are planning on embarking on a personal outing. In some cases, House Managers may support Companions on outings if appropriate or if needed. If Companions have a representation agreement, their representative may need to approve the outing. Glenora Farm reserves the right to deny any outings based on safety or conflict with association policy.

When embarking on a community outing, the Coworker responsible will ensure they have a copy of the red emergency binder. Glenora Farm Coworkers will ensure all basic needs of the Companions are met during an emergency. Coworkers will ensure that Companions are fed, hydrated, and have a place to rest. Glenora Farm Coworkers will return to Glenora Farm, or if that is not possible, follow the Evacuation Plan documented in the red binder.

INJURIES

In the event of an injury on an outing, Coworkers will:

- Make sure the injured individual, and all other Companions, are not exposed to further danger,
- Perform the necessary first aid,
- Contact medical personnel (if required)
- Complete internal or critical incident reporting (if required)

In the event of an evacuation, if an evacuation can be safely undertaken without emergency assistance:

- Make a plan, and an alternate plan,
- Evacuate using the most acceptable known route.

In the event of an evacuation, if an evacuation requires emergency assistance due to an injury:

- Select a messenger and 2-3 people to form the messenger party
- Leave at least one person with the injured individual,
- Send the messenger party with information on the injured Companion and a map or sketch showing the exact location of the hurt Companion.

Communication

- In the event of an emergency, Glenora Farm Coworkers are responsible for communicating with the Facility Manager to determine if services will continue or be discontinued.
- If Coworkers do not have a cellphone, a cellphone will be provided by the Association.

MISSING COMPANION

In the event of a Companion going missing during an outing, Coworkers will:

- Ensure the safety and security of the remaining Companions (if applicable), supporting and de-escalating the other Companions at the site of departure or mobilizing to an appropriate setting.

- Conduct a search of the immediate area, only if this can be done in a manner that does not jeopardize the safety of the remaining Companions.
- Contact and inform the House Manager and Facility Manager as soon as possible and follow the directions provided. The Facility Manager will inform the Executive Director as soon as it is safe to do so.
- Inform the appropriate authorities as soon as possible and follow the directions provided.
- Make a plan based on the authorities' directions and arrange to have the remaining Companions returned to the residence safely.
- Keep the House Manager and Facility Manager informed at all times.
- When safe and appropriate to do so, complete all reporting and documentation.

Responsibility of: All Coworkers

Monitored by: Facility Manager

CP16: HYGIENE

Associated standard 1.H.2 (a, b)

POLICY

All Glenora Farm Coworkers will support Companions in addressing their personal care needs, where required.

PROCEDURES

Coworkers will encourage:

- A positive attitude towards safe and healthy living.
- Personal responsibilities.
- Adequate physical exercise.
- A regular routine of personal care, cleanliness, and change of clothing.
- Adequate clothing of good quality, appropriate for size, activities, and weather conditions.

Coworkers may need to support Companions in the shower or bath. All Companion bathing preferences are noted in the Companion's Care Plan, updated annually (December) or as needed. Please find an excerpt from Community Living British Columbia's Bathing Guidelines Policy below:

Companion rights in relation to bathing

Any bathing or personal care plan must reflect the following safeguards:

- Consideration of each person's rights, values and beliefs in making personal care decisions;
- Development of a personal communication plan to enable each person's participation in key personal care decisions;
- Identification of a person or network of people who will assist in key personal care decisions; and,
- Proactive discussions on an individual's/family's desires for delivery of personal care.

Planning

Risks can be reduced by being proactive:

- Bathing/personal care plans or protocols will be developed for each individual and documented in agency records;

- Plans will address an individual's personal preferences; identify risks including any personal care issues (actual or potential) that require additional safeguards and outline the measures that will be undertaken to minimize those risks and promote safe bathing and personal care practices for that individual;
- Plans will also identify any equipment requirements and training needs and reassessment schedules to manage any identified risks.

Assessing Risk Factors

It is important to assess the degree of risk based on an adult's personal situation and requirements, caregiver skills and training and the bathing environment. The following factors should be considered:

- An individual's personal preferences for privacy; use of bubble bath or oils; use of jets in bathtub;
- Any current physical, sensory, motor or behavioural concerns that might affect bathing practices or preexisting health conditions such as epilepsy, high blood pressure and osteoporosis;
- Level and independence of mobility;
- Communication skills;
- An individual's ability to use call bells or other safety devices and ability to recognize pending danger;
- An individual's understanding and general capability;
- The availability of staff familiar with an individual to enable safe and appropriate scheduling and level of supervision during bathing times;
- The potential impact of other individuals living in a home;
- The degree of ambient noise in the environment during bathing;
- The determination of the least intrusive options for providing privacy while still recognizing safety risks. Options might include: closing the shower curtain, partial closure of the bathroom door and staff positioning outside the bathroom when intercom /monitoring system is available in bathroom;

- Knowledge and awareness of manufacture guidelines for use of foaming agents in jetted bathtubs and recommended maintenance schedules for bathtub and other special equipment; and,
- Agency policy regarding personal care.

*Please note: Companion preferences for Coworkers providing personal care will be accommodated when possible. Preferences may not be possible to accommodate due to Coworker staffing, Coworker comfort level, or any risks determined by Glenora Farm Coworkers.

Responsibility of: All Coworkers

Monitored by: House Coordinators and Facility Manager

CP17: DISRUPTIVE BEHAVIOUR

Associated standard 1.H.2 (a, b) - 2.A.17 a, b (1, 2), c (1, 2, 3), d

POLICY

All Glenora Farm Coworkers involved in the management of disruptive or dangerous behaviour, by an individual or a group, will attempt to use the least intrusive interventions in balance with the need to ensure the safety of the Companion, other Companions and fellow Coworkers. Coworkers receive annual training in The Mandt System which focuses on positive interventions as a primary tool to support disruptive or dangerous behaviour.

PROCEDURE - LEVELS OF INTERVENTION

All Coworkers will apply the following levels of graded intervention by proceeding with the least intrusive level required for a particular situation and proceeding to the next, more intrusive level only as required:

1. **Philosophy and beliefs:** Used to determine how to respond to situations.
2. **Non-Verbal Communication:** Invite people to feel safe to de-escalate.
3. **Verbal Communication:** Pitch, tone, and inflection combined with words. It's not what you say, it's how you say it.
4. **Walking With/Accompanying:** Walk with or accompany someone to their destination.
5. **Supporting:** Physically support someone to walk somewhere when they are confused, disoriented, or have lost their balance.
6. **Avoiding:** Avoid contact and use verbal communication skills.
7. **Redirecting:** Deflect the Companion's arm/leg without holding on to the Companion.
8. **Releasing:** Invite the Companion to release the hold, sometimes with physical intervention.
9. **Restraining:** A physical hold that limits the movement of a Companion. Restraint never lasts for more than a maximum of 3 minutes. Restraint is the last resort and is always considered a critical incident.

*Note: Coworkers must **only** engage in restraint as a last resort if a Companion is going to hurt themself or someone else. Coworkers should never use restraint if the threat is not realistic, severe, or imminent.

INVESTIGATION

Where a Coworker has been required to use restraint with a Companion, they must complete a Critical incident report. The incident will be subject to an investigation by the Facility Manager to determine:

- The appropriateness of the intervention.
- Whether further action is required.
- The investigation will be fully documented and submitted to the Executive Director.

EVACUATION DUE TO DANGEROUS BEHAVIOUR

Where a program is required to evacuate due to a person's dangerous behaviour, Coworkers will:

- Advise any other Companions to evacuate and, if possible, assist them in this process.
- Immediately inform other Coworkers associated with the program so that they may take steps to protect themselves.
- Summon immediate assistance from the local police (if needed).
- Document the event on the database and send it to the Facility Manager for a Critical Incident Report as soon as it is safe to do so.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

BEHAVIOUR MANAGEMENT

Associated standard 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, i - 1.J. 3 a (1, 2, 3, 4, 5 (a, b), 6, 7, 8, 9), b (1, 2), c - 2.A.1 (a - 1, 2, 3, 4, 5, 6, 7, 8, 9, b - 1, 2, 3, 4, 5, 6), c, d - 2.A.16 (a, b) and 2.A.17 a (1, 2), b (2), 2.A.5, 2.A.18 (a, b), 2.A.19 (a, b, c, d)

POLICY

Upon admission to any Ita Wegman Association program, Companions will be given an orientation that includes behavioural expectations and rules associated with the program and association. Every effort will be made by all Ita Wegman Association Coworkers to respond to Companion behaviour, which could be considered challenging or disruptive in a fair, consistent

and equitable manner, which fosters respect and personal integrity and in accordance with Mandt training guidelines.

PROCEDURES - BEHAVIOURAL MANAGEMENT AND LIMITS

Coworkers will effectively apply a values-based approach and informed perspective in assessments and intervention planning, this will include:

- Emotional, cognitive and physical development baseline
- Socio-cultural norms
- Predictable life crises
- Companion notification of any restrictions or limits on privileges or rights based on behaviour and the means by which they may regain rights or privileges that have been restricted
- Coworkers will be provided with Mandt training on an annual basis a variety of ongoing (minimally annual) training on behaviour management and limit protocols

USE OF POSITIVE INTERVENTIONS

Glenora Farm Coworkers focus on building positive relationships with the people supported. In a challenging behavioural situation that could lead to a crisis, Coworkers evaluate the environment and personal stressors:

- Is the room too loud or quiet?
- Is the room too bright or dark?
- Is there an individual in the room that the person you are supporting dislikes?
- Was their least favourite food served for dinner?

Glenora Farm Coworkers keep their RADAR (Recognize, Assess, Decide, Act, and Review Results) on at all times to try and prevent unsafe behaviour. Coworkers utilize de-escalation techniques as taught in The Mandt System training. Coworkers are aware of and model socially acceptable behaviours for Companions. When a Companion is engaging in socially unacceptable behaviour,

Coworkers redirect the Companion in a positive way. Coworkers do not engage in shame or humiliation techniques to change behaviour. Glenora Farm Coworkers promote personal empowerment so that Companions can change their own behaviour.

Responsibility of: All Coworkers

Monitored by: Facility Manager

CP18: SEARCHES

Associated standard 1.H.2 (a, b) and 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, i

POLICY

Glenora Farm recognizes that a Companion has the right to reasonable privacy and possession of their own personal property, but reserves the right to conduct reasonable searches of:

- The Companion
- The Companion's possessions
- The Companion's living quarters

PROCEDURES

The Facility Manager will authorize all searches. Searches will be conducted with the Companion present. Searches will be conducted with two Coworkers (when possible) present. Internal body searches and strip searches are not permitted. Companions will not be subjected to arbitrary or harassing searches. Searches will not be used as a form of punishment or discipline. Searches will only be conducted when there is a suspicion of weapons, stolen personal property and/or other prohibited items that puts the safety of Companions and

Coworkers at risk. Searches of living quarters may be conducted if there is a concern for health and hygiene that may be detrimental to the Companion.

CONDUCTING A SEARCH

In conducting a search the Companion will be notified of the search, will be given the opportunity to turn over any prohibited items, and will be present during a search of living quarters and possessions. Companions may be asked to do self- searches requesting them to take off jackets and hats, turn out their pockets, remove shoes and socks, and roll up their sleeves and pant legs. At no time will a Coworker touch the Companion.

DISPOSAL OF CONFISCATED ITEMS

Depending upon the nature of the confiscated items, the House Manager in consultation with the Facility Manager or designate will determine the most appropriate disposal, including notifying the police.

RECORDING/REPORTING

All findings will be recorded in the Companion database. Critical incidents must be reported within 24 hours to the Facility Manager.

DISCIPLINE/CONSEQUENCES

Any corrective measures against a Companion following a search will be determined following Glenora Farm policies and procedures and will include consultation with the Executive Group and Board of Directors as needed.

Responsibility of: House Managers

Monitored by: Facility Manager

The Ita Wegman Association
of British Columbia

CP19: CORPORAL PUNISHMENT

Associated standards 1.H.2 (a, b) -1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, i and 2.A.17 a, b (1, 2), c (1, 2, 3), d

POLICY

No Coworker of Glenora Farm will inflict corporal punishment, or allow corporal punishment to be inflicted upon a Companion.

PROCEDURES

It will be the responsibility of all Coworkers to ensure that no Companion is subjected to corporal punishment. Coworkers are provided education regarding corporal punishment upon hire and annually.

CORPORAL PUNISHMENT

Corporal punishment includes, but is not restricted to; any of the following acts designed to discipline a Companion:

- Striking, with or without the assistance of a physical object
- Shaking, shoving, striking or any other form of physical aggression
- Punishing of a Companion by another Companion, or group of Companions, condoned or instigated by a Coworker
- Requiring or forcing a Companion to assume an uncomfortable position
- Interfering with, or interrupting, a Companion's sleep

REPORTING

It is expected that suspicion of or actual knowledge of corporal punishment occurrence will be reported immediately to the Facility Manager, Quality Assurance Coordinator, or designate, and

recorded in a database entry. The Coworker will forward the database entry to the Facility Manager for critical incident reporting and notification of law enforcement. Upon review of the report, corrective action may ensue including but not limited to Companion removal from the program or Coworker termination of employment or contracted services.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

CP20: SOCIAL MEDIA, PHONE AND COMPUTER USE

Associated standard 1.C.1 a (1, 2, 3, 4, 5, 6), b (1, 2, 3)

POLICY

Glenora Farm Companions may use personally owned, operated and maintained: cell phones, computers, tablets, landline phones and similar devices at their leisure in accordance with any provisions in the Companion's Care Plan, provided that use is in conformance with all provincial and federal privacy regulations.

Companions are asked not to use their personally owned cell phones, tablets, or similar devices during the day program time.

PROCEDURE

1. Any Companion possessing a phone/computer system(s) is responsible for all maintenance and upkeep of their phone/computer system(s). Glenora Farm will not be held responsible to support any upkeep or maintenance needs.
2. No Companion will be granted permission to access Glenora Farm computer equipment or programming.

3. Internet access is available in all residential care homes.
4. Phone/computer use will run in accordance with all provincial and federal regulations.
5. Companions are asked not to use their cell phones during the day program.
6. If any of the above information is unclear, or if there are any specific questions, it is expected that all Companions and Coworkers consult with the Facility Manager or Quality Assurance Coordinator for clarity or confirmation.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

CP21: MOBILITY, MEDICALLY FRAGILE, AND AGE-RELATED DECLINE

Associated standard 1.H.2 (a, b) and 2.E.5 a, b (1, 2 (a, b (I, ii)

POLICY

Glenora Farm ensures that any Companion identified with mobility and/or aging issues (i.e., dementia and/or medical fragility) is provided support and training to participate in all programming and emergency drills. Coworkers are trained on related mobility, aging, and medical fragility issues associated with Companions. Support and services required are documented in a Companion's Care Plan by the Quality Assurance Coordinator and are reviewed by the House Manager, Workshop Leader, and Facility Manager.

If Companions exhibit signs of age-related decline or dementia, the Facility Manager, Quality Assurance Coordinator, and House Managers work together to make a plan which must include communication with the primary medical doctor.

If Companions have a confirmed diagnosis of age-related decline or dementia, Glenora Farm Coworkers must determine whether the Companion can remain safely supported to age in place and attend the day program. New needs are identified. If Glenora Farm cannot accommodate the new needs, then appropriate transition planning is initiated which includes timely and accurate transfer of information to new service providers (signed consent from the Companion or representative is required).

PROCEDURES

1) Glenora Farm is committed to helping Companions reduce risk and minimize personal harm to themselves and others while respecting individual autonomy. Glenora Farm will work with each Companion, their legal representatives, and professionals to respond to their ongoing support needs.

2) Any decision or protocols that involve mobility, aging and/or medical needs will be determined in collaboration with the Companion, their legal representative, Glenora Farm Coworkers and any associated professionals.

3) All Coworkers will have an orientation with the Companion(s) whom they are supporting and review protocols, if any, prior to commencing support.

4) Incidents relevant to protocols will be documented on the Glenora Farm database and forwarded to the Facility Manager. The Facility Manager will determine if Critical Incident reporting is required

5) Companions may, in certain circumstances, require immediate intervention to avoid imminent danger or harm.

6) Whenever possible a Coworker will respond and provide direct support to ensure a Companion's well-being. When circumstances allow, Coworkers will consult supervisors with regards to determining a course of action prior to unforeseen situations, and critical incidents.

7) Glenora Farm will assist Companions to access advocates when reviewing emergencies which require immediate intervention or substitute decisions.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

The Ita Wegman Association
of British Columbia

CP22: ACCEPTANCE OF GIFTS

Associated standard 1.A.6.a.(6.a)

POLICY

Glenora Farm recognizes that Companions and Coworkers work and live together in a home-like setting, and therefore gift-giving is a normal part of sharing life together. This policy applies to Companion family members and representatives as well.

PROCEDURE

1. If you wish to give a gift to a fellow Companion you are welcome to do so. If you would like help deciding what gift might be appropriate, you can speak to a family member, legal representative, House Manager and/or Workshop Leader.
2. If you wish to give a gift to a Coworker that is valued at more than $25.00, the Coworker will not be able to accept it.
3. If you wish to give a cultural gift (Christmas, Hanukah, Eid, Purim, etc.) to a fellow Companion or Coworker, you can use the list below to see if your gift is appropriate:

Gifts that are OK: Small and inexpensive gifts, particularly to celebrate a cultural tradition or event.

Gifts that are not OK: Cash gifts, large and expensive gifts or gifts that you cannot afford.

If you are not sure, ask a Coworker for help.

Responsibility of: All Companions and Coworkers

Monitored by: Executive Director, Facility Manager and Finance Committee

The Ita Wegman Association
of British Columbia

CP23: ALCOHOL AND DRUG USE

Associated standard 1.H.2. (a, b) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

Companions at Glenora Farm may be interested in using legal medicinal, prescription, or recreational drugs. Due to the potential for drug interactions, Companions must have written documentation from their medical doctor that outlines their ability to use a specific drug.
Glenora Farm will support the modest use of alcohol at social occasions. Alcohol, like any other drug, must be engaged with responsibly. If a Coworker feels that a situation is unsafe, they may request the Companion stop engaging with the drug.
There are designated smoking areas on site. You will need to talk with your House Coordinator about how, and with whom, you can use cannabis products.
Any alcohol, cannabis and cannabis material needs to be stored in a secure location. Your House Coordinator will help you identify how to properly store any items. Glenora Farm does not permit the growing of cannabis on Glenora Farm property.

If you have a substance use disorder, or are recovering from a substance use disorder, we encourage you to speak with your House Manager, the Facility Manager, or the Quality Assurance Coordinator. Glenora Farm will support you in accessing resources that may be helpful.

PROCEDURE

Companions found to be under the influence of illegal drugs, or found to be in the possession of illegal drugs, will be asked to meet with the Facility Manager or Quality Assurance Coordinator to determine the facts and a course of action.
Companions found to be under the influence of alcohol outside of appropriate social occasions will be asked to meet with their House Coordinator or Facility Manager to determine the facts and a course of action.
Companions found to be under the influence of cannabis without following the steps outlined above, will be asked to meet with their House Coordinator or Facility Manager to determine the facts and a course of action.

Responsibility of: All Companions and House Coordinators

Monitored by: Facility Manager and Quality Assurance Coordinator

The Ita Wegman Association
of British Columbia

CP24: TRAVEL OUTSIDE BC

Associated standard

POLICY

CLBC-supported individuals may travel outside of BC with a CLBC-funded service provider for a maximum of 30 days, as long as all of the conditions set out in the policy are met. Travel outside of BC, and all associated planning, is held by the Companion and their family representative. In the unique situation that a Companion is travelling outside of BC with a Glenora Farm direct support Coworker, the planning would be held by the Quality Assurance Coordinator and the Facility Manager.

Please review the following documents related to travel outside of BC for CLBC-funded individuals:

CLBC policy

Q&A for Service Providers

Ministry of Health policy

Please note that BC's Medical Services Plan (MSP) provides limited coverage during travel outside of BC. Glenora Farm recommends purchasing personal insurance for any travel.

PROCEDURES APPROVAL

If a Companion is traveling outside of BC with a Coworker as part of Glenora Farm programming, a plan must be submitted to and approved by the Facility manager. The Companion is responsible for all travel expenses. Companions should communicate with their family representatives that they are planning to travel outside of BC.

PROCEDURE

PREPARATION

Before traveling outside of BC with Companions, House Managers must provide the Facility Manager with a detailed plan which includes:

- Destination and purpose
- Duration of absence from BC
- Total cost of the trip, including portions that Companions are responsible for
- Emergency contacts, including who will provide support to the individual in the event of a caregiver emergency
- Basic medical coverage
- Consideration and mitigation of any risks to the individual or their level of care
- Reflection of how the travel is person-centered and based on the desires of the individual

Responsibility of: House Managers

Monitored by: Facility Manager and Executive Director

CP25: BULLYING, GOSSIPING AND HARASSMENT

Associated standards 1.H.2 (a, b)

POLICY

The Ita Wegman Association is committed to promoting a living and work environment in which all Companions and Coworkers are treated with dignity and respect and are free from bullying, gossiping, and harassment. Bullying, gossiping, and harassment will not be tolerated.

Bullying, gossiping and personal harassment includes, but is not limited to:

- Unwanted or hurtful actions, gestures, comments, or jokes;

- Belittling or hurtful posters, pictures, cartoons, graffiti or drawings;
- Teasing, excluding of others;
- Threats, purposely frightening someone, bullying, gossiping, forcing another person against their will;

DEFINITION

BULLYING

Bullying is a repeated, health-harming mistreatment of one or more persons. It is abusive behavior that can be: threatening, humiliating, intimidating, and destructive.

"Bullying is when you keep picking on someone to make yourself feel that you're cooler, smarter, stronger or better than them, and to make the other person feel smaller."

GOSSIPING

Gossip is a form of communication among people that is focused on the private, personal and sensitive affairs of others. It occurs when a person communicates information about another person with the desire to hurt, or harm the other. The same is true of a person who spreads stories about another person's personal life that are untrue (rumor).

"If it's not your story to tell, do not tell it. Words can hurt."

HARASSMENT

Harassment is unwanted and hurtful behavior, comments, or actions directed towards another person that continue even after a person has told you it hurts and has asked you to stop. Harassment is ongoing bullying and gossiping.

"If someone asks you to stop bullying them, or gossiping about them and you don't, that is called harassment."

PROCEDURE

Bullying, Gossiping or Harassment of any kind is not tolerated. The following steps must be taken when bullying, gossiping, or harassment occurs:

1. A Companion who feels that they are being bullied, gossiped about or harassed is encouraged to tell the person doing it to stop.
2. If the person does not stop, or if the Companion is not able to talk to the person doing it, the Companion should talk to their House manager or Workshop Leader (if you don't live at the farm) as soon as possible.
3. The House manager or Workshop Leader will help you work through the situation with the other person.
4. If the situation cannot be worked out between you, your support and the other person, the Facility Manager can be included.
5. If the Companion continues with the hurtful behavior, there will be consequences. Consequences could include:

- Training/education on what is right and wrong;
- Talking to the Companion family / representative;
- A formal spoken warning from the Facility Manager;
- A written letter on the Companion's file;
- A change to, or suspension from the program activities (changing workshops, daily routines, or moving house);
- Additional behaviour support planning together with therapists;
- Dismissal from Glenora Farm programs.

Additional information

Companions have a legal and civil right to file a complaint with the B.C. Council of Human Rights.

The name of the person complaining or the type of complaint will not be shared with any other person, except with the person(s) helping to resolve the complaint.

Responsibility: All Companions and Coworkers

Monitored by: House managers, Workshop Leaders, Facility Manager

The Ita Wegman Association
of British Columbia

CP26: ASSAULTS ON OTHER COMPANIONS OR COWORKERS

Associated standards 1.H.2 (a, b)

POLICY

The Ita Wegman Association does not accept the harming or threatening of others. Companions will be held responsible for their behaviour and actions. It is the responsibility of Glenora Farm to ensure the safety of all Companions and Coworkers. Acts of aggression, without deliberate intent on the part of the Companion, will be addressed on a case by case basis by the House Manager, Workshop Leader, Facility Manager, or the Quality Assurance Coordinator. All threats and aggression are not tolerated and will be taken seriously. These actions and behaviours may result in the termination of support / placement in Glenora Farm programming.

Companions involved in programming with The Ita Wegman Association will be informed of this during their orientation and provided information on how to regain their rights or privileges if they have been limited or removed.

PROCEDURES - AGGRESSION/ASSAULT

ASSAULT

If a Companion assaults a Companion or Coworker, the target of the assault, if possible, will seek support from a Coworker to stop the assault. If the Companion refuses to stop and is thought to be endangering self, other Companions or other Coworkers, the Coworker(s) present will use restrictive holds as taught through The Mandt System. The Coworker responsible for supporting the situation will ensure the safety of all individuals in the situation. Coworkers will follow all Mandt training protocols including the Crisis Cycle and the debrief process.

If at any time Coworkers feel that the aggression / assault is risking the safety of other Companions and /or Coworkers, a Coworker will call 911 immediately, or direct another Coworker to do so.

The Coworker doing the restraint will inform the Facility Manager of the restraint as soon as it is safe to do so and is required to write a report of the incident to be included in the Critical Incident Report.

If there have been any injuries sustained, report them to the Facility Manager who will work with the Executive Director to coordinate with Workers Compensation BC. After restraint, Coworkers will observe Companions for 24 hours to ensure they are physically and emotionally well.

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REPORTING

If a Companion assaults another Companion or a Coworker, the target of the assault or the witnessing Coworker will, as soon as possible or within 24 hours, report the incident to the Facility Manager once it is safe to do so.

FOLLOW UP

If necessary the Companion and/ or Coworker assaulted will visit a physician immediately following the incident to determine any injuries and attend to any injuries. The Facility Manager or designate will debrief the incident with all parties involved and inform the Executive Group and consult with the Quality Assurance Coordinator to determine corrective action required and any additional follow-up action plans.

Follow-up action will include but not be limited to:

- Involving external support to determine if additional behaviour consultants, or services need to be engaged.
- Determine whether the Companion demonstrates aggressive behaviour exceeding what The Ita Wegman Association can manage and as a result support / placement will be terminated.
- A facilitated process that involves the assaulting Companion, the victim, and the facilitator will take place with a goal of resolving the issue. Part of this process will be establishing what the safety expectations are moving forward.
- The Companion’s aggressive tendencies will be monitored closely to prevent a re-occurrence of the behaviour. An action plan will be established, noted in the Care plan, and updates will be recorded in the database.

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- The injured Companion or Coworker may choose to pursue legal action against the assaulting Companion.

THREATS

Threats of aggression are not tolerated, will be taken seriously, and are addressed immediately. Continued threats will lead to corrective action which could involve support / placement being terminated and the Companion being requested to leave.

PROBLEM - SOLVING APPROACH

The Ita Wegman Association will take the position of employing problem solving strategies to support limiting aggression at all program sites. To this end, there may be times where a Companion's privileges or rights may be limited. Privileges or rights that are limited will only be limited for a specified amount of time. The Companion will be informed why this is happening, what the timeline is, and will be informed as to what they must do to reinstate privileges or rights.

Responsibility of: All Coworkers and all Companions

Monitored by: Facility Manager, Business Administrator, and Executive Group

CP27: PROVISION OF SERVICES USING INFORMATION AND COMMUNICATION TECHNOLOGIES

Associated standards 2.F.1, 2.F.2

POLICY

Glenora Farm may use information and communication technologies ("technology"), such as telephone, Zoom, Skype, or Teams to see, hear, or interact with Companions,

family/representatives/support systems, and other organizations. Glenora Farm Coworkers only support Companions to engage in provision of services using information and communication technologies when the Companion is present at a Glenora Farm program location. Any requests for provision of services using information and communication technologies to take place off Glenora Farm must be reviewed and approved by the Facility Manager and Quality Assurance Coordinator.

Glenora Farm ensures that all technology and/or equipment is available and functions properly at the beginning of services and throughout the course of services.

These services provided by Glenora Farm may include annual ISP meetings or conversations related to the Companion's support planning. If possible, Glenora Farm prefers to conduct meetings or conversations in person. However, Glenora Farm Coworkers work hard to ensure that the quality and integrity of services delivered through technology are comparable to services provided face to face.

Glenora Farm provides these planning services as needed, and does not provide any other support through technology. For example, Glenora Farm does not offer a day program through information and communication technologies.

PROCEDURE

Provision of services using information and communication technologies ("technology") will only be done with Companion consent. The potential use of technology to conduct ISP's or conversations related to the Companion's support planning will be discussed at Companion admission and as needed throughout services.

If there is a desire to have an audio or video recording, it will be done with consent. Audio or video recordings will only be saved on Glenora Farm's secure server and will not be saved on the internet. Companions sign a Website and Media Release Form which outlines their preferences for photographs.

In advance of services being offered through technology, Glenora Farm Coworkers ensure that all necessary technology/equipment is available at the required location and functions properly. Glenora Farm Coworkers maintain equipment in accordance with manufacturer recommendations.

At the beginning of each session, Glenora Farm Coworkers verify the identity of the Companion, the service provider, any other individuals in the session, and the physical location of the Companion.

Glenora Farm maintains privacy by providing the session in a private area and asks that anyone else attending the session remotely ensures they are in a private area (ie. people attending the session should be in a private area, and if that is not possible, they should wear headphones and refrain from stating information that could identify the Companion).

Should there be a disruption to the technology that impacts the delivery of service, Glenora Farm Coworkers will reschedule the meeting to the next time available for all parties.

Coworkers who deliver services through technology receive competency based training on how to deliver services effectively, including human factors, crisis response procedures, assessment of risk factors in the environment of the Companion or other attendees. Coworkers should also receive training regarding the hardware and software, including features, setup, use, maintenance, safety considerations, infection control, and trouble shooting.

Human factors

Just like an in-person meeting, one must be aware of interpersonal communication. Coworkers should communicate as they would in-person, ensuring that all attendees can hear them. Coworkers should show an understanding of nonverbal communication and understand when someone may feel uncomfortable. To ensure communication is clear, Coworkers should ensure

that there is adequate lighting, that the background is not distracting, and that all attendees are visible in the field of view.

Crisis response procedures

Coworkers should utilize their Mandt training to identify a crisis situation and respond appropriately. Coworker should report any crisis to the Facility Manager or Quality Assurance Coordinator so that appropriate debriefing and follow up can occur.

Assessment of risk in the environment

Coworkers should be aware of risks in the environment on both sides of the Zoom or phone call. Risks could include, but are not limited to:

- Unsafe behaviours exhibited by a participant
- Tripping hazards
- Items that could serve as weapons
- Medications that are not stored properly
- Lack of supervision for a Companion who requires supervision

Hardware and software

Glenora Farm Coworkers are able to use Microsoft Teams, Zoom, or telephone calls to provide services to Companions. Before the service is to be provided, Coworkers should familiarize themselves with the features, setup, and appropriate use of the hardware and software. Coworkers should understand what maintenance is needed (ie. charging the device, keeping it clean, updates) and be aware of any safety considerations (i.e. phishing links, not sharing the hardware with strangers). Glenora Farm Coworkers should also follow infection control protocols and ensure the iPad is kept clean and free of bodily fluids and germs. Coworkers should wash their hands before handling hardware and shield coughs or sneezes. If Coworkers have any challenges, they should troubleshoot with a member of the administration team.

Responsibility of: All Coworkers and all Companions

Monitored by: Facility Manager, Quality Assurance Coordinator

The Ita Wegman Association
of British Columbia

EMPLOYEE AND COWORKER POLICIES(ECP)

ECP1: CONFIDENTIALITY OF INFORMATION

Associated standard 1.E.1 (c) and 1.E.3 (a)

POLICY

All personal information about any Glenora Farm Coworkers will be held confidential. Information will only be released if verbal or written approval is received from the Coworker or upon receipt of a legal request.

PROCEDURES - CONFIDENTIAL INFORMATION

COWORKER RECORDS

Glenora Farm maintains a Coworker filing/record system that ensures all individual information is kept confidential. The Administration Coworkers create a physical and digital file for each Coworker at Glenora Farm.

PERSONAL CONTACT INFORMATION

Glenora Farm will, under no circumstances, release personal information to any person without the expressed permission of the Coworker involved. If a request is made to share personal information, the person receiving the request will follow the steps below:

- State politely but firmly that it is against association policy to provide personal contact information. If provided with a message, every effort will be made to forward it to the Coworker.
- If the caller suggests that it is an emergency or some type of urgent situation, the person receiving the request will offer to pass along a message immediately while explaining that there is no guarantee the party can be reached immediately.
- If the caller persists and is dissatisfied, the person receiving the request can direct the caller to the Executive Director or Facility Manager for further attention.

Responsibility of: All Coworkers

Monitored by: Administration & Accreditation Coordinator, Human Resources and Relations Group

ECP2: CONFIDENTIALITY AGREEMENT

Associated standard 1.J.1 a, 1.E.1, 1.E.3 (a-e), and 1.A.9.a (2) (d)

I, _____ acknowledge, confirm and agree that

(print name)

any documents (including copies and extracts), other writings, and confidential information which may come into my possession or may be made available to me by virtue of my employment/volunteerism/visit with Glenora Farm are the confidential information and property of Glenora Farm and shall be returned to Glenora Farm as required.

I further agree not to use or disclose to any other person or cause, or permit any other person to use such information, except to complete my duties and responsibilities to Glenora Farm.

Date: _____

Signature of Coworker: _____

Position within The Ita Wegman Association: _____

The Ita Wegman Association
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ECP3: ORIENTATION POLICY AND PROCEDURE

Associated standard 1.I.6 a (1-8) b, c, d, e

POLICY

All Coworkers must participate in an orientation of the policies and procedures of The Ita Wegman Association. The orientation occurs at:

1. Commencement of employment with the Association,
2. At the commencement of any new position within the Association,
3. When a Coworker is returning to a workplace where the hazards in that workplace have changed during the worker's absence,
4. Where a Coworker is affected by a change in the hazards of a workplace, or
5. Where a Coworker has been relocated to a new workplace if the hazards in that workplace are different from the hazards in the worker's previous workplace.

PROCEDURES

The orientation includes, but is not limited to:

- An overview of the Association, including its mission, culture, person-centered philosophy, Performance Measurement and Management Plan, Risk Management Plan, Strategic Plan, organizational planning efforts, and workforce policies and procedures.
- A review of all relevant policies and procedures, including training on health and safety policies/procedures, emergency procedures, emergency contacts, telephone numbers, and in cases where medication management is necessary, training is included on all medication policies, procedures, and protocols.
- Review of all schedules, job duties, responsibilities, and competencies.
- On-the-job training is designed to facilitate learning of the required competencies.
- A review of all instructions regarding program rules, daily routines, Companion supervision, and a professional approach to working collaboratively with Companions.

- Review and training include report writing, record keeping, database entries, file management, supervision structure, training efforts, and external regulation standards as outlined in organizational policies.
- Review of information management systems, including computer use (database).
- Introduction to The Ita Wegman Association Coworkers and Companions.
- Introduction to channels of communication, including but not limited to: appropriate communication in-person, email use, and security regarding information sharing.

PROCESS

The Human Resources and Development Coordinator is responsible for ensuring that new Coworkers receive all of their policy and procedure-based training, including competency-based questions in the areas of health and safety.

Designated Coworkers, determined by the Facility Manager, are responsible for conducting new Coworkers on-the-job training.

PERFORMANCE EVALUATIONS AND CHECK-INS

Long Term Coworkers orientation is initiated at the commencement of duties and is ongoing with a 3-week check-in, 5-week check-in, and 3-month probationary review, followed by a performance evaluation 1 year after that, and then moving to every 2 years or on an as-needed basis. During this review, competencies associated with their employment contract will be assessed, feedback will be collected and shared with the Coworker by the direct supervisor or HRR representative, and measurable goals will be determined and/or reviewed as part of the evaluation process. Development opportunities will be reviewed, identified, and documented. Competencies that Coworkers are being appraised on are listed in the job description and associated performance evaluation.

Short Term Coworkers will have a 2-week check-in (informally), a 5-week check-in, and a probationary review around the 4th/5th month of their placement. During this review, competencies associated with their employment contract will be assessed, feedback will be collected and shared with the Coworker by the direct supervisor or HRR representative, and measurable goals will be determined and/or reviewed as part of the evaluation process. Development opportunities will be reviewed, identified, and documented. Competencies that Coworkers are being appraised on are listed in the job description and associated performance evaluation.

Incoming Short-Term Coworkers should be provided with regular check-ins with their House Manager(s) and at least 2 meetings with their Support Person within the first month.

After policy training, all Coworkers must sign a "Declaration of Training" form and a competency-based quiz acknowledging that the training has been completed and that all policies and procedures are understood. The "Declaration of Training" form and the competency-based quiz are retained in the Coworker's confidential file.

Practicum students will be governed by their 'learning agreement' as created by their learning institution. The timeframe for meeting goals and learning objectives is determined by the student and their academic institution. Feedback is provided by Coworkers working with the practicum students to the Human Resources and Development Coordinator.

DOCUMENTATION

All performance evaluations are documented and held confidentially and securely in Coworker files.

INDIVIDUAL SUPERVISION

All Coworkers have a direct supervisor who is responsible for ensuring the quality of the Coworker's work and ensuring that the Coworker is delivering support consistent with Glenora Farm policies and procedures.

HEALTH AND SAFETY ORIENTATION

Incoming Coworkers will receive training in emergency and safety policies/procedures before their 3-month probationary review. Coworkers working with Glenora Farm Companions will receive training in First Aid/CPR (e.g. St. John's Ambulance) and The Mandt System.

Responsibility of: House Managers, Workshop Leaders, Facility Manager, Human Resources and Development Coordinator

Monitored by: Human Resources and Relations Group

The Ita Wegman Association
of British Columbia

ECP4: COWORKER ORIENTATION AND TRAINING SPREADSHEET			
For the Coworker to complete:			
Coworker name:		Date training completed:	
By writing your name above, you agree that you understand all content in the training.			
For the Supervisor to complete:			
Supervisor name:			

Standard	Training Requirement	Provided To	Document Name	Compentency Based	Frequency
1.A. LEADERSHIP					
1.A.6.c.	Education on ethical codes of conduct	Personnel and other stakeholders	OP15	NO	At Hire, Annually
1.A.7.d.	Training on corporate compliance	Personnel	OP3	NO	At Hire
1.A.8.	Education to stay current in the field	Personnel	Mandt training, professional development requests, virtual trainings, information sessions	NO	None specified
1.A.9.b.	Training related to fundraising written	Appropriate Personnel	OP27, OP28	NO	At Hire, Ongoing

	procedures, if applicable				
1.F. FINANCIAL PLANNING AND MANAGEMENT					
1.F.5.b.	Training related to fiscal policies and written procedures	Appropriate Personnel	FP9, FP11, FP19, FP21, FP24, FP27	NO	At Hire, Annually
1.H. HEALTH AND SAFETY					
CARF, Island Health, CLBC	Explain the role of CARF, Island Health, and CLBC	Personnel	In-person conversation	NO	At Hire
1.H.4.	Health and safety training that addresses all areas listed in the standard (Health and safety practices, identification of unsafe environmental factors, emergency procedures, evacuation procedures, identification of critical incidents, reporting of critical incidents, medication management, reducing physical	Personnel	EP1, EP2, EP6, HSP8, HSP11-19,	YES (Quiz)	At Hire, Annually

	risks, workplace violence)				
1.H.4.	Health and safety training that addresses all areas listed in the standard (Health and safety practices, identification of unsafe environmental factors, emergency procedures, evacuation procedures, identification of critical incidents, reporting of critical incidents, medication management, reducing physical risks, workplace violence)	Personnel	First Aid	YES (In-person training)	At Hire, Biennially
1.H.11.b.(7)	Education and training based on analysis of critical incidents	Personnel	HSP8	NO	At Hire
1.H.12.b.	Training on procedures regarding infections	Personnel	HSP27	NO	At Hire, Annually

	and communicable diseases				
1.H.13.g.	If the program provides transportation for persons served, training regarding the organization's transportation procedures and unique needs of persons served	Drivers who provide transportation for persons served	ECP15, HSP28	NO	At Hire, As Needed
1.H.13.g.	If the program provides transportation for persons served, training regarding the organization's transportation procedures and unique needs of persons served	Drivers who provide transportation for persons served	Companion Care Plans	NO	At Hire, As Needed
Island Health	Safe handling and storage of food	Personnel	Food Safety for Vulnerable Populations	NO	At Hire
Island Health	Safe handling and storage of food	Personnel	Safe Cooking Temperatures	NO	At Hire
Island Health	Safe handling and storage of food	Personnel	Storing Leftovers	NO	At Hire
1.I. WORKFORCE DEVELOPMENT AND MANAGEMENT					

1.I.6.a.	Orientation addresses mission, culture, person-centered philosophy, Risk management Plan, Strategic Plan, organizational planning efforts	Personnel	OP10, CP1	NO	At Hire
1.I.6.a.	Orientation addresses mission, culture, person-centered philosophy, Risk management Plan, Strategic Plan, organizational planning efforts	Personnel	Risk Management Plan, Strategic Plan	NO	At Hire
1.I.6.b.	On the job training including Companion's individual support needs	Personnel	On the Job Training List	NO	At Hire
1.I.8.f.	Education and training included in workforce development activities	Personnel	Review job description	NO	At Hire, As Needed
1.I.8.f.	Education and training included in workforce	Personnel	ECP39	NO	At Hire, As Needed

	development activities				
1.I.13.a. and b.	Training on cybersecurity and technology used to perform job duties	Personnel	CLBC Privacy and Information Management Training Laptops and computers, Passphrases, Passwords, and PINs, Multi-factor authentication	NO	At Hire
To access the CLBC training above, follow the link and complete the training. Upon completion, a certificate will pop-up. Insert your name and the date, save the document, and send to ajackstel@glenorafarm.org to put in your Coworker file.					
1.I.13.a. and b.	Training on cybersecurity and technology used to perform job duties	Personnel	Introduction to email, introduction to database, intoduction to laptops	NO	At Hire
1.L. PERFORMANCE MEASUREMENT AND MANAGEMENT					
1.L.10.	Education and training in accordance with roles and responsibilities for performance	Personnel	Performance Measurement and Management Plan and Analysis	NO	At Hire

	measurement and management				
1.L.10.	Education and training in accordance with roles and responsibilities for performance measurement and management	Personnel	SMART goal tracking on the database	NO	At Hire
2.A. PROGRAM / SERVICE STRUCTURE					
2.A.14. (this also meets 2.E.5.a standard)	Training in **age-related decline and dementia**, positive intervention, suicide prevention, and trauma-informed approach	Personnel	Geriatric Essentials Learning (Depression module, Cognition module, Incontinence module, and Exercise module)	YES (online quiz and certificate)	At Hire, Annually
To access the modules above, follow the link, create a free account, and complete the modules above. Download the certificates and send them to ajackstel@glenorafarm.org.					
2.A.14. (this also meets 2.E.5.a standard)	Training in age-related decline and dementia, **positive intervention,** suicide prevention, and trauma-informed approach	Personnel	PBS Summary Handout	YES (Quiz)	At Hire, Annually

2.A.14. (this also meets 2.E.5.a standard)	Training in age-related decline and dementia, positive intervention, **suicide prevention,** and trauma-informed approach	Personnel	Public Health Approach to Suicide Prevention	YES (Quiz)	At Hire, Annually
2.A.14. (this also meets 2.E.5.a standard)	Training in age-related decline and dementia, positive intervention, suicide prevention, and **trauma-informed approach**	Personnel	Trauma-informed Intro for Caregivers and Service Providers	YES (Quiz)	At Hire, Annually
2.A.18.c.(2)	Training in the use of restrictive procedures (if restrictions are placed on the rights of a person served)	Personnel	Companion Care Plans	NO	At Hire
2.E. Community Services Principle Standards					
2.E.5.a.	Education and training in the early signs indicating possible dementia and aging-related decline	Personnel	See above in 2.A.14	See above in 2.A.14	At Hire, Annually
2.F. SERVICE DELIVERY USING INFORMATION AND COMMUNICATION TECHNOLOGIES					
2.F.2.	Training on how to deliver services effectively via information and	Personnel who deliver services via information and	Instructions on how to use Zoom and iPad	YES (Quiz)	As needed

	communication technologies and the equipment used	communication technologies			
2.F.2.	Training on how to deliver services effectively via information and communication technologies and the equipment used	Personnel who deliver services via information and communication technologies	CP27	YES (Quiz)	As needed

ECP4.1: COWORKER ORIENTATION AND TRAINING

Associated standard 1.I.6 a (1-8) b,c,d,e

POLICY

All Coworkers must be trained in specified areas at orientation, annually, and as needed. The specific areas are determined by Glenora Farm, CARF, Island Health, CLBC, and other external regulatory bodies.

Different Coworker Cohorts receive different levels of training. The Cohorts include:

- Residential Care Worker and Community Support Worker
- Administration
- Short-Term Coworkers

Each Coworker cohort package is outlined in **ECP4 Coworker Orientation and Training Spreadsheet** and saved on Glenora Farm's internal server.

PROCEDURES

ORIENTATION TRAINING

Each Coworker must complete the “At Hire” module upon commencement of employment and complete the competency-based quiz on Google Forms.

ANNUAL TRAINING

Each Coworker must complete the “Annual” module upon commencement of employment and complete the competency-based quiz on Google Forms.

Responsibility of: Human Resources and Development Coordinator

Monitored by: Quality Assurance Coordinator, Facility Manager

ECP5: SUBPOENAS, SEARCH WARRANTS, INVESTIGATIONS, AND OTHER LEGAL ACTION

Associated standard 1.E.2 (a, b, c, d)

POLICY

All Coworkers with The Ita Wegman Association should be aware of their responsibilities as citizens/permanent and temporary residents regarding: testifying in court, when required, and for dealing with subpoenas, search warrants, investigations, and any other legal action. Information that is the property of The Ita Wegman Association should not be utilized in a court of law without The Ita Wegman Association’s knowledge and permission, and that information should not be used in a manner that is not in the best interests of the people working with or supported by The Ita Wegman Association.

This policy is to make all Coworkers aware that:

- They must respond to a subpoena and have the legal right to exercise this with respect to testifying in court.
- They must disclose any request or summons to testify to the Ita Wegman Association Facility Manager and Executive Director, *well before* any scheduled court date.
- The overarching purpose of The Ita Wegman Association is to act in the best interest of The Ita Wegman Association Coworkers and Companions.

SUBPOENAS

PURPOSE

The purpose of this policy is to ensure that all Coworkers are aware of their responsibilities as citizens/ permanent and temporary residents, to testify when required, and to tell the truth. A Coworker of The Ita Wegman Association has a duty, both during and after work hours, to act in a manner consistent with the best interests of The Ita Wegman Association and Companions.

The purpose, wherever legally possible is for Coworkers of The Ita Wegman Association to:

- Not consent to testify in court regarding any question that might, in any way, compromise The Ita Wegman Association's purpose;
- Ensure any information that is the property of The Ita Wegman Association is not utilized in a court without The Ita Wegman Association's permission or knowledge.

PROCEDURES

A "court" is a judicial body, such as the BC Supreme Court. For the purpose of this policy, the word "court" also includes administrative tribunals or an arbitrator whose position is governed by law. It also refers to any proceeding or activity in a court, including proceedings or activities other than trials.

Any Coworker of The Ita Wegman Association may be "compelled" (legally required under law, regardless of their own wishes) to appear and testify in court. The documents requiring such appearance and testimony are called "Summons" or "Subpoena."

Alternatively, a Coworker may *volunteer* to appear and testify in court. One example of voluntary testimony is of an expert witness who is hired to assist the court by providing special knowledge or judgment. Another is of a person who has information about an accident, a crime, or business dealing and feels obliged to testify in court. A Coworker of The Ita Wegman Association may be compelled to act as a witness or an expert witness to provide information considered to belong to The Ita Wegman Association or to be confidential under the terms of the Coworker's employment.

COMPELLED WITNESS

When a Coworker of The Ita Wegman Association is compelled, under the law, to testify in court, they do not have a choice about attendance or on how much they will say. They must testify according to their legal obligations and they must tell the truth. The evidence that they give may or may not be in the best interests of The Ita Wegman Association or of an Ita Wegman Association Companion. However, depending on the circumstances and within the law, people (including Ita Wegman Association Coworkers) have a right to ask to not testify or ask to not answer some questions or parts of some questions. These rights are part of the Law of Evidence under our system of law.

VOLUNTARY WITNESSES

When a Coworker of The Ita Wegman Association is asked to *voluntarily* act as witnesses or expert witnesses in a court, their testimony may or may not be in the best interest of The Ita Wegman Association or Ita Wegman Association Companions. The Ita Wegman Association may decide to require the Coworker to not testify under those circumstances.

Similarly, when a Coworker is asked to *voluntarily* provide information to the police or some person or organization, which is not a court, doing so may or may not be in the best interest of The Ita Wegman Association or an Ita Wegman Association Companion. The Ita Wegman Association may decide to not permit the Coworker to provide such information again, under these circumstances it is legal to do so.

RECEIPT OF A SUBPOENA

A Coworker of The Ita Wegman Association who receives a summons or a subpoena has a public legal duty to the court. However, when that happens, a Coworker who is requested to provide information, or requested or required to testify in court, in any matter related to or arising out of their employment or to the business or purposes of The Ita Wegman Association, ***must notify the*** Facility Manager and Business Administrator.

Coworkers may not agree to act voluntarily as a witness or as an expert witness in any court proceeding which might affect, directly or indirectly, the best interests of The Ita Wegman Association Companion unless they:

- First notify the Facility Manager and Business Administrator in writing, of their intention;
- Receive their prior permission, in writing, to do so.

Coworkers of The Ita Wegman Association, who become aware that information has been subpoenaed or otherwise compelled from The Ita Wegman Association as evidence in court or by the police, must inform the Facility Manager and Business Administrator immediately. Only the Facility Manager and Business Administrator may provide such information or delegate the provision thereof.

If a Coworker of The Ita Wegman Association does not notify the Business Administrator of a receipt of a subpoena, disciplinary actions may follow depending on the situation and intent.

SEARCH WARRANTS, INVESTIGATIONS, AND ANY OTHER LEGAL ACTION

POLICY

It is the aspiration of The Ita Wegman Association as a corporate citizen to adhere to and comply with all provincial and federal laws pertaining to criminal investigations/legal actions. All Coworkers are required to assist investigators when served a search warrant or when participating in an investigation or other legal action and are expected to follow the procedures listed below. The Facility Manager and Business Administrator must be notified when a search warrant, investigation, or other legal action has been initiated.

When investigating concerns, The Ita Wegman Association will do a risk assessment with Island Health Licensing and CLBC to ensure that while investigations are taking place, any risk to individuals is mitigated.

The Ita Wegman Association
of British Columbia

The IWA must work with Island Health Licensing and CLBC **as soon as** The Ita Wegman Association has been notified of a search warrant, investigation, or any other legal action.

The Coworker that has been named must abstain from their duties until a risk assessment is complete.

The risk assessment will indicate whether or not the Coworker is able to safely complete their duties and if there will be any changes to the role / responsibilities of the Coworker that has been named.

The nature of the concern will determine whether the individual named will need to leave the premises for the duration of the investigation.

Definition: A "**search warrant**" is a written court order entitling law enforcement to search a defined area and seize property, which constitutes evidence of commission of the alleged crime described in the warrant. A search warrant is available only in criminal actions.

PROCEDURE

1. All law enforcement officers should be escorted to a private office.
2. Immediately contact the Facility Manager and Business Administrator or designate. The Facility Manager and Business Administrator or designate will designate on-site personnel to implement the procedures.
3. Identify the officer in charge of executing the warrant. Ask for a business card or record the name, title, police detachment, and telephone number of the officer.
4. Ask for a copy of the warrant and any affidavit submitted to the court to obtain the warrant. Have the officer identify the prosecutor by name and phone number, if that person is not indicated on the document (the officer is acting at the direction of the prosecutor).
5. Inform the officer in charge that you have contacted the Facility Manager and Business Administrator or designate and that they are on their way. Request the officer in charge not to proceed until the Facility Manager and Business Administrator or designate has arrived.

If the officer <u>will not wait</u>, take the following steps to monitor the search:

1. Carefully read the warrant.
2. Make sure a judge or magistrate has signed the warrant. If there is any discrepancy, notify the officer in charge.
3. Determine the scope of the warrant: the area to be searched and the type of evidence to be seized. A search warrant permits the designated officer to search and seize property.
4. If there is any discrepancy between the scope of the search document and the search actually conducted by the officer, notify the officer in charge. Attempt to assist the officer in retrieving the items that are the subject of the search.
5. Identify those essential Coworkers or Contractors that are knowledgeable and can assist in retrieving the documents, computer information, etc. Notify the officer in charge that key Coworkers are here to ease the search with minimal disruption of the program or office and that others are permitted to leave.
6. Advise all Coworkers that persons executing the warrant may ask questions to them. Advise Coworkers that it is their choice whether or not they want to speak with an officer; they are not required to do so.
7. Monitor the search, but do not impede or obstruct it.
8. Complete an incident report.
9. The Facility Manager and Business Administrator or designate will determine a course of action as follow up and to ensure all demonstrated actions run in accordance with The Ita Wegman Association policies and procedures, and all Provincial and Federal regulations.

Responsibility of: All Coworkers/Contractors

Monitored by: Facility Manager and Executive Director

The Ita Wegman Association
of British Columbia

ECP6: TECHNOLOGY AND COMPUTER USE

Associated standard and 1.G.4 (a, b, c, d (1, 2, 3, 4, 5, 6, 7), and 1.C.1 I 1(a,b) 2(a-d)

POLICY

Computers owned by The Ita Wegman Association must be maintained, assessed regularly for security, and be in working order to conform to accreditation standards and Provincial/Federal privacy/confidentiality regulations.

Coworkers using a computer owned by the Ita Wegman Association must adhere to all terms and conditions as stated in this policy. Additionally, to support security and emergency preparedness efforts, the Ita Wegman Association will adhere to all Provincial and Federal guidelines regarding backing up and securing data in the event of an emergency.

DEFINITIONS

Information Technology (IT) Resources: Refers to all hardware, software, networks, and data owned by or licensed to, and operated by the Ita Wegman Association.

ACCEPTABLE USE

Ita Wegman Association hardware and software are to be used in a manner that is consistent with The Ita Wegman Association's Code of Ethics, Confidentiality Agreement, and Conditions for Computer Use policies.

Coworkers working remotely with Ita Wegman Association hardware or software are expected to do so in a manner that is consistent with the Code of Ethics, Confidentiality, and Conditions for Computer Use policies

Acceptable use of The Ita Wegman Association's IT resources is directly related to the mission and business of the Association and not for personal use, unless approved by the Facility Manager or Executive Director.

UNACCEPTABLE USE

If a Coworker violates any of the acceptable use provisions, applicable provincial and federal laws, or written policies, they will violate their contract or terms of employment, and termination of their contract or corrective action may ensue.

If violations constitute a criminal offence, legal action may result.

The following are selected examples of *unacceptable* uses of IT resources. They are not meant to comprise a complete or exhaustive list and may be amended at any time without notice.

The following conduct will be considered unacceptable use and will result in disciplinary action.

Ita Wegman Association Office IT resources must not be used for:

- Personal or recreational use.
- Violation of computer integrity.
- Unauthorized tampering with computer hardware or software.
- A purpose inconsistent with the Ita Wegman Association's mission, ethics, and goals.
- Distribution of threatening or obscene material.
- Distribution of material protected by confidentiality, copyright, or trademark.
- Use of sounds or visuals, which might be disruptive to others.
- Use of an Internet workstation for illegal or unethical activity or acts.
- Solicitation, other than approved requests for resources on behalf of the Ita Wegman Association.
- To perpetrate any form of harassment.
- Viewing or transmitting unacceptable material, including material of a pornographic, violent, or hateful nature.
- Use for any illegal purposes.
- Intentionally disrupting or "hacking" the IT systems of this or any other organization or individual.
- To perform work for other employers.
- Any action deemed unacceptable by the Facility Manager or Executive Director.

EXPECTATION OF PRIVACY

All data transmitted, whether sent or received, including any stored data, is considered the exclusive property of The Ita Wegman Association.

INTEGRITY

Data Backup

All files on The Ita Wegman Association servers are to be backed up each week, with a partial backup of all the changes daily. When a full backup is completed, the previous week's full backup may be deleted. All policies and related information of the Ita Wegman Association follow its data regardless of which computer system or storage media the data actually resides. All Ita Wegman Association documents must be saved to ensure that information is properly backed up and secured.

Business Continuity and Disaster Recovery

All data collected and information networks and systems follow provincial and federal security, confidentiality, and emergency preparedness practices.

Virus Protection

Virus protection is employed and maintained on all Ita Wegman Association computers. All IWA Coworkers are responsible for ensuring that networks utilized and information collected are not corrupted or damaged.

Security

No IT services shall be provided to external organizations or individuals. This includes file sharing, Web services, and Internet access.

Passwords that grant any access to the Ita Wegman Association IT resources from outside the agency will be at least eight (8) characters in length and contain a combination of letters in upper and lower case, and numbers.

All security, including but not limited to access management, audit capabilities, data export and transfer capabilities, decommissioning of physical hardware and data deconstruction, protection from malicious activity, remote access, and reports as well as updates, configuration management, and change control, is managed through an external technology contractor in partnership with the Executive Director.

DATA EXPORT AND TRANSFER

Exporting data to USB flash drives and external storage permitted uses:

The use of USB flash drives or external storage devices is discouraged and should only occur when there is no practical alternative. Only Company-issued or Company-approved encrypted storage devices may be used.

Exporting data to USB flash drives and external storage - prohibited and permitted uses:

The following are prohibited:

- Personal USB flash drives.
- Unencrypted removable storage devices.
- Borrowed or shared storage devices.
- Unknown or found USB devices.
- USB devices containing unauthorized software.

Permitted data:

The following may be copied to an approved encrypted USB drive when required for business:

- Public information
- Internal business documents
- Confidential information with management approval
- Client information must be protected by encryption and is only permitted where required for business operations. All client information sharing must be approved by the Facility Manager, Quality Assurance Coordinator, or Executive Director

Restricted data:

The following must not be stored on removable media unless specifically authorized by 2 of the following 3 individuals: the Executive Director AND Facility Manager, or the Quality Assurance Coordinator. Restricted data must be protected using Company-approved encryption:

- Employee personal information
- Payroll files

- Banking information
- Password databases
- Multi-factor authentication recovery codes
- Encryption keys
- Medical information
- Legal investigations
- Security logs
- Information classified as Restricted

Security Requirements

When removable media is approved:

- Devices must use Association-approved encryption.
- Devices must be password-protected.
- Data must be deleted immediately after business use.
- Lost or stolen devices must be reported immediately.
- USB devices must not be left unattended.

EXPORTING DATA BY EMAIL

Approved Email Methods:

Association information may only be sent using Association-approved email accounts.

Business and programming records must not be sent using personal email accounts.

Public Information:

May be sent without additional approval.

Internal Information:

May be emailed internally. External sharing requires a legitimate business or programming purpose.

Confidential Information:

May only be emailed externally when:

- Required for business purposes.
- Approved by the appropriate manager.
- Sent only to authorized recipients.
- Protected using encryption or secure file-sharing where available.

Restricted Information

Restricted information must not be sent through email unless:

- No secure alternative exists.
- Executive approval has been obtained.
- Encryption is used.
- The recipient is authorized.
- The minimum necessary information is included.

Whenever possible, secure file-sharing platforms should be used instead of email attachments.

PERSONAL DEVICES

General Rule:

Association data should remain on Association-managed devices whenever possible.

Permitted Use

- Personal devices may only access Association information when:
- Approved by the Association (ED, FM, or QAC).
- Protected with passwords or biometrics.
- Running current operating system updates.
- Protected by anti-malware software where applicable.

Prohibited Activities

Users must not:

- Store Association files permanently on personal devices.
- Copy Association data into personal cloud storage.
- Synchronize Association files with personal backup services.
- Share Association information through personal messaging applications.
- Circumvent Association security controls.

Temporary Storage

Temporary storage on an approved personal device is permitted only when:

- Required for business or programming.
- The data is removed immediately after use.
- Security controls remain in place.

TRANSFERRING DATA BETWEEN PERSONAL AND ASSOCIATION DEVICES

Personal to Association:

Association business and programming files created on an approved personal device may be transferred to Association systems only when:

- The files are business or programming related.
- The device is free from known malware.
- The transfer uses an approved method.
- The files are scanned by the Association's security software before use.

Personal files should not be transferred onto any Association device unless necessary for business or programming operations.

Association to Personal:

Association data may only be transferred to a personal device when:

- Specifically authorized by ED, FM, or QAC.
- Required for business or programming.

- Appropriate security controls are maintained.
- The data is removed when no longer needed.

Restricted information must never be transferred to personal devices unless expressly authorized by the ED, FM, or QAC and protected.

APPROVED TRANSFER METHODS

Approved methods include:

- Association-managed cloud storage
- Secure file-sharing platforms
- Encrypted Association email
- Secure VPN connections
- Approved encrypted removable media

Unapproved methods include:

- Personal cloud storage
- Consumer file-sharing services not approved by the Association
- Personal email accounts
- Personal messaging applications
- Social media platforms

MONITORING AND AUDITING

The Association reserves the right to monitor, log, and audit data transfers involving Association information to ensure compliance with this policy and all applicable laws.

REPORTING

Coworkers must immediately report:

- Lost or stolen USB drives.
- Misdirected emails containing Association information.
- Unauthorized exports of data.

- Suspected malware.
- Any accidental disclosure of confidential information.

BASIC GUIDELINES FOR DAY-TO-DAY USE

ALL COWORKERS WILL FOLLOW INTERNET AND E-MAIL GUIDELINES:

- Be polite
- Do not use vulgar or obscene language
- Use caution when revealing your address or phone number (and do not reveal the address or phone number of others without their explicit permission).
- Respond to messages or requests within 48 business hours.
- Do not mark every message as urgent.
- Abide by the generally accepted rules of network etiquette.
- Ensure that the headers of e-mail messages that are sent to groups of Companions or Coworkers do not reveal the private email addresses of the individual recipients.
- On computers owned by the Ita Wegman Association it is expected that people will only use software and hardware that is provided and/or approved by the Executive Director.
- Adhere to all software license guidelines.
- Never transfer the Association’s data to a computer that is not owned by the Association unless authorized to do so by the Executive Director.
- Adhere to copyright restrictions on all materials obtained from outside of the Ita Wegman Association.
- Safeguard the Association's intellectual property, including, but not limited to, publications and Websites.
- Requests for repairs and maintenance to a computer system must first be approved by the Executive Director or designate.
- Use only their own identity while using the Association's IT resources.

- If a Coworker identifies a security problem, it is to be communicated to all who may be affected and the Executive Director immediately.
- Do not show or identify a security problem to others outside the Ita Wegman Association unless directed to do so by the Executive Director.
- Avoid unnecessary subscriptions even if they are free. Subscriptions should be confirmed by the Executive Director.
- E-mail attachments from unknown sources are to be deleted and reported as spam without being opened.
- Software downloads or downloads from unknown sources need prior approval from the Executive Director or designate.

INTERNET AND E-MAIL ACCESS

Internet access is expected within the Ita Wegman Association office and a variety of program locations.

Approved personal use must not interfere with business activities or work schedules, must not involve solicitation, must not be associated with any outside business activity, and must not potentially embarrass The Ita Wegman Association, its Coworkers or Companions.

Internet communications generated from Ita Wegman Association computers are considered the property of The Ita Wegman Association; users shall not have the expectation that their communications are private.

The Ita Wegman Association will ensure that Coworkers being employed will have access to IT resources, given through accounts and passwords. When someone's employment ends, the Ita Wegman Association will ensure that devices used by said Coworkers are given back and that all used accounts will be deactivated.

REMOTE WORK ACCESS AND SUPPORT

At times, Coworkers may be required or request permission to work remotely. Below are established requirements for Coworkers who work remotely to ensure secure access to Association systems, information, and technology resources, maintain business and programming continuity, and protect confidential information.

Scope

This applies to:

- All Coworkers, contractors, consultants, volunteers, and temporary staff who are authorized to work remotely.
- All Association-owned computers and approved personal devices used for Association business.
- All remote connections to Association networks, applications, and data.

Statement of understanding

Remote work is a privilege that may be approved for qualified Coworkers when it supports operational requirements and can be performed securely. Coworkers working remotely are expected to maintain the same level of productivity, professionalism, confidentiality, and security as when working from an Association office.

Eligibility for Remote Work

Remote work may be approved when:

- The Coworkers' duties can be effectively performed outside the office.
- The HRR and/or EG Groups have approved the remote work arrangement.
- Appropriate technology and security controls are available.
- The Coworker has completed any required security awareness training.

The Association reserves the right to approve, modify, or revoke remote work arrangements based on operational needs or security concerns.

Approved Work Environment

Coworkers working remotely must:

- Work from a secure and private location whenever possible.

- Prevent unauthorized individuals from viewing confidential information.
- Lock their computer whenever it is unattended.
- Store paper records containing confidential information in a secure location.
- Protect Association equipment from theft, damage, or unauthorized access.

Public computers or shared devices must not be used to access Association systems.

Remote Access to Association Systems

Remote access shall only be provided using Association-approved methods.

Approved remote access methods may include:

- Secure Virtual Private Network (VPN).
- Remote Desktop services configured by the Association.
- Other secure remote access solutions approved by the IT Administrator.

Coworkers must not:

- Create their own remote access methods.
- Install remote control software without authorization.
- Circumvent Association security controls.
- Allow family members or other individuals to use Association devices.

Accessing an Office Desktop Remotely

Where authorized, employees may remotely access their assigned office computer using an Association-approved remote desktop solution.

Requirements include:

- The office computer must remain managed by the Association.
- Multi-factor authentication (MFA) must be used where available.
- Remote sessions must use encrypted connections.
- Only authorized users may connect to their assigned workstation.
- Files should remain on Association systems whenever possible rather than being copied to local devices.
- Remote sessions must be disconnected when work is complete.

Coworkers must not configure personal remote access software or expose office computers directly to the internet.

Equipment Requirements

Coworkers should use Association-issued equipment whenever possible.

Association-issued devices shall:

- Be protected with strong passwords or biometric authentication.
- Have current operating system and security updates installed.
- Run Association-approved antivirus or endpoint protection software.
- Use full-disk encryption where supported.

Personal devices may only be used if specifically approved by the ED, FM, or QAC and must meet the Association's security requirements.

Internet and Network Security

Coworkers working remotely should:

- Use secure home Wi-Fi protected with strong passwords and modern encryption.

- Change default passwords on home networking equipment.
- Avoid using public Wi-Fi unless connected through the Association's approved VPN.
- Report suspected network security issues immediately.

Data Protection

Coworkers working remotely must:

Access only the information necessary to perform their duties.

- Store Association files on approved network drives or cloud services.
- Avoid saving confidential information to personal devices.
- Secure printed documents and dispose of them appropriately.
- Follow the Association's Data Export and Transfer Policy.

Technical Support

The Association will provide reasonable technical support for Association-issued equipment and approved remote access software.

The support includes:

- Assistance connecting to remote access services.
- Password resets.
- Software updates.
- Security incident response.
- Troubleshooting Association-managed devices.

The Association is not responsible for repairing or supporting personal computers, home internet service, personal printers, or other personal equipment unless otherwise agreed.

Coworker Responsibilities

Coworkers working remotely are responsible for:

- Maintaining a reliable internet connection suitable for their work duties.
- Protecting Association equipment from loss or theft.
- Immediately reporting lost or stolen devices.
- Reporting suspected cybersecurity incidents without delay.
- Complying with all Association policies regarding confidentiality and information security.

Monitoring

The Association reserves the right to monitor remote connections, network activity, system access logs, and Association-owned devices to protect Association information, ensure compliance with applicable policies, and investigate security incidents, in accordance with applicable privacy laws.

Security Incidents

Coworkers must immediately report:

- Lost or stolen equipment.
- Unauthorized access to Association systems.
- Suspicious emails or phishing attempts.
- Malware or ransomware incidents.
- Accidental disclosure of confidential information.
- Any suspected compromise of a remote work device.

DECOMMISSIONING AND END OF LIFE

When technology assets have reached end of life (EOL), and are no longer required for business and programming operations or no longer meet operational, security, or compliance requirements, the following process will be completed by the Association and External Information Technology Contractor.

This applies but is not limited to:

- Servers (physical and virtual)
- Desktop and laptop computers
- Mobile devices
- Network infrastructure
- Storage devices
- Software applications
- Cloud services
- Peripherals and related technology equipment

End-of-Life Determination

Technology assets may be designated as end of life based on one or more of the following:

- Manufacturer support has expired or is scheduled to expire.
- Software or hardware can no longer receive security updates.
- The asset no longer meets operational or performance requirements.
- The asset presents an unacceptable cybersecurity risk.
- Replacement has been approved by the Association.
- Regulatory or contractual requirements necessitate replacement.

Final approval to designate an asset as EOL rests with the Executive Director or their authorized representative.

Responsibilities

- Approve technology assets for decommissioning.
- Identify business requirements for data retention.
- Approve disposal or resale methods where applicable.
- Maintain records of approvals.

The External Technology Provider shall

- Plan and execute the decommissioning process.
- Protect Association data throughout the process.
- Ensure continuity of business operations.
- Maintain documentation of all decommissioning activities.
- Dispose of technology in accordance with applicable environmental and privacy regulations.

Decommissioning Procedure

Before removing any technology from service, the Technology Provider shall complete the following steps:

Assessment

- Verify the Association's approval to decommission the asset.
- Confirm replacement technology is operational, where applicable.
- Identify dependencies with other systems or applications.
- Review software licensing implications.

- Create a decommissioning plan and implementation schedule.

Data Review

- Identify all data residing on the asset.
- Confirm retention requirements.
- Determine whether data must be:
- migrated,
- archived,
- retained, or
- securely destroyed.

No production data shall be destroyed without Association approval.

Backup

Before decommissioning, the Technology Provider shall:

- perform a verified backup of required data;
- test restoration capability where appropriate;
- document backup location and retention period.

Migration

Where replacement technology is being implemented:

- migrate required data;
- migrate user accounts and permissions;
- migrate applications and configurations;
- validate successful operation of the replacement environment.

Confirm successful migration before production systems are retired.

Removal from Service

The Technology Provider shall:

- disconnect the asset from the production environment;
- remove network connectivity;
- disable authentication and administrative access;
- remove monitoring agents;
- remove backup jobs;
- remove scheduled tasks;
- update infrastructure documentation.

License Management

The Technology Provider shall:

- recover reusable software licenses;
- terminate subscriptions where appropriate;
- remove assigned user licenses;
- update software asset inventories.

Secure Data Sanitization

Before disposal or reassignment, all storage media shall be sanitized using industry-recognized methods appropriate to the classification of the information stored.

Methods may include:

- cryptographic erase;
- secure overwrite;
- degaussing (where appropriate);
- physical destruction of storage media.

The Technology Provider shall maintain records confirming sanitization.

Asset Disposal

Technology assets shall be disposed of using one of the following approved methods:

- certified electronics recycling;
- manufacturer take-back programs;
- approved asset resale;
- donation after approved data sanitization;
- physical destruction.

Where third-party disposal vendors are used, the Technology Provider shall ensure they maintain appropriate certifications and provide certificates of destruction or recycling upon request.

Documentation

The Technology Provider shall document:

- asset identification;
- serial number;
- location;
- decommission date;
- approval records;
- backup confirmation;

- migration completion;
- sanitization method used;
- disposal method;
- certificate of destruction (if applicable);
- responsible personnel.

Inventory Update

Following completion, the Technology Provider shall update:

- asset inventory;
- configuration management database (CMDB), if applicable;
- warranty records;
- maintenance contracts;
- support documentation;
- network diagrams;
- disaster recovery documentation.

Security Requirements

- During decommissioning, the Technology Provider shall:
- maintain confidentiality of Association information;
- prevent unauthorized access to data;
- ensure all credentials associated with the asset are revoked;
- remove certificates and encryption keys where applicable;
- document any security exceptions.

Verification

The decommissioning process shall not be considered complete until:

- all required data has been migrated or archived;
- all data sanitization has been completed;
- all documentation has been updated;
- inventory records have been revised;
- disposal documentation has been received, where applicable;
- the Association has been notified of completion.

Exceptions

Any deviation from this process must be documented, include a risk assessment, and receive written approval from the Association before implementation.

VIOLATIONS

Failure to comply with any part of this policy may result in:

- Revocation of access privileges.
- Mandatory retraining.
- Disciplinary action up to and including termination of employment.
- Civil or criminal action where applicable.

EXCEPTIONS

Exceptions to this policy require documented approval from the Executive Director, Facility Manager, Quality Assurance Coordinator, or the designated information security authority and must include appropriate compensating security controls.

Responsibility of: All Coworkers

Monitored by: Executive Director

The Ita Wegman Association
of British Columbia

ECP7: CONDITIONS FOR USE OF COMPUTERS FORM

Associated standard 1.C.1 I 1(a,b) 2(a-d)

*Please note: this policy applies to Ita Wegman Association computers, laptops, and tablets.

As a condition for the use of the Ita Wegman Association data, I agree not to:

- Permit anyone to use my USER ID;
- Share, divulge, or compromise any password assigned to me;
- Use programs or create situations that adversely impact computer usage for others;
- Make unauthorized copies of data or software;
- Enable a user to access data belonging to a third party without consent;
- Use the computer, laptop, or tablet for activities different from those for which access was granted;
- Take any action which might reasonably be construed as injurious or detrimental to the interests of any other user of the facility;
- Visit restricted websites;
- Clear Internet history files.

Conditions for use of Ita Wegman Association computers, laptops, and tablets:

1. I understand that I am responsible for all actions performed under my USER ID.
2. I will take full advantage of the system's built-in security mechanisms.
3. I will adhere to all policies, procedures, standards, and regulations pertaining to confidentiality, data security, and good data processing by The Ita Wegman Association.
4. I agree to advise an Administration Coworker for computer usage of any circumstances, incidents or events that may impact, or are related to the privacy and availability of security of the computers, applications or data.

5. I understand that designated Ita Wegman Association Coworkers will carry out monitoring of my usage on the computers periodically without warning. This is to ensure adherence to the Ita Wegman Association standards, policies, and guidelines.
6. I understand that anyone wanting to test the security of the computers must have permission from the Executive Director or designate.
7. For clarification on policy contained in this document, I will contact the Executive Director or designate.

I have read or been explained and understand the conditions for use of computers and will adhere to all expectations listed.

NAME: _____

POSITION: _____

SIGNATURE: _____

DATE: _____

ECP8: EQUAL OPPORTUNITY AND NON-DISCRIMINATION HIRING

Associated standard 1.I.4 a-g

POLICY

The Ita Wegman Association is an equal opportunity employer. This policy prohibits unlawful discrimination based on race, sex, religion, marital status, age, national origin or ancestry, citizenship, physical or mental disability, medical condition, sexual orientation, political belief, status as a veteran, or any other consideration made unlawful by provincial, federal, or local laws.

The Ita Wegman Association is committed to complying with all applicable laws providing equal employment opportunities**.** This commitment applies to all persons involved in the operations of The Ita Wegman Association and prohibits unlawful discrimination by any Coworker of the Ita Wegman Association.

The Ita Wegman Association will ensure that people being hired and the existing workforce are committed to the Ita Wegman Association's mission and philosophy. The Organization will ensure that onboarding, training, and orientation for new Coworkers.

This policy pertains not only to selection in hiring, but also to all employment decisions and human resource actions such as promotions, transfers, training, compensation, benefits, and other related conditions of employment, including freedom from sexual harassment.

To comply with applicable laws ensuring equal employment opportunities to qualified individuals with a disability, The Ita Wegman Association will make reasonable accommodations for the known physical or mental limitations of an otherwise qualified individual with a disability who is an applicant or Coworker unless undue hardship would result.

GUIDELINES FOR HIRING A COWORKER

The hiring process of a Coworker must be documented and completed in accordance with the following protocol:

- Standard interview questions will be posed, requesting information on experience, skill, training, education, and level of expertise available to meet job expectations.
- Documentation of the interview process is conducted and minimally includes: a signed job description or contract expectations, reference checks, and a criminal record check.
- A complete and current resume is received and a copy is held at the main office prior to the Coworker commencing work.

- When applicable, the process of a criminal record check must be initiated before a Coworker can commence work, and every Coworker must have the understanding that if they do not have a “clean” record or if the record contradicts anything they stated during the interview, it is reason to terminate employment immediately.

- A confirmation statement indicating information provided regarding skills, training, previous experience, and schooling is factual i.e., official transcript from an academic setting, certification/licensing documentation
- The ***Coworker Orientation and Training Spreadsheet (ECP4)*** is to be completed within three months of the start date.
- Upon hire, the Coworker must review and sign the Code of Ethics, Confidentiality Agreement, Media Release Form, and the Emergency Contact form. Signed documents will be kept in the Coworker’s personnel file in the administration office. Coworkers are responsible for letting an Administration Coworker know if any changes should be made to the forms.
- If a Coworker will be providing transportation in an association or personal vehicle, the Administration office must have a copy of the Coworker’s Driver’s License, driving record, and vehicle insurance (personal vehicle only).
- All reference checks must be completed and documentation of reference checks included in the confidential file prior to the initial start date.

Responsibility of: Human Resources and Relations Group and Human Resources and Development Coordinator

Monitored by: Facility Manager, Quality Assurance Coordinator, and Executive Director

The Ita Wegman Association
of British Columbia

ECP9: SUITABILITY REVIEW

Associated standard 1.I.5.a. 1 (a-f), 2 (a-b), 3 b (1-3), c (1-2)

Greetings from Glenora Farm,

I am writing to you to request a letter of reference, or at least your views in an email, on _____ and their suitability for a position with our organization. The Ita Wegman Association is a licensed and accredited health care facility, registered charity, and member of the Camphill Association of the Americas.

The Association operates Glenora Farm, www.glenorafarm.org, a residential community for adults with diverse abilities (Companions), located on a 100-acre farm in the Cowichan Valley on Vancouver Island. In their application, _____ permitted us to approach you for a reference.

Glenora Farm provides support to people with diverse abilities in extended-family-type houses. _____ has applied for a _____ position. The position involves supporting all aspects of the daily management of a licensed care home, including but not limited to supervision, engagement, and personal care support to adults with diverse abilities in all aspects of their daily lives. Overseeing volunteers and other employees working in the same residence. And/or participation in the Day Program, by way of providing activity support in one of the care homes, craft workshops, in the garden, or on the farm.

I am asking you to give me some idea of your knowledge of _____, and your opinion of their aptitude for this type of work. Please also include in what capacity you have known and experienced _____.

I am very grateful to you for taking the time to respond to this email.

Kind regards,

*Email signature

The Ita Wegman Association
of British Columbia

ECP10: VOLUNTEERS AND PRACTICUM STUDENTS

Associated standard 1.I.3 (a, b, c, d, e, f,), and 1.I.4 (a-g)

POLICY

The Ita Wegman Association accepts day volunteers and practicum students. All volunteers and practicum students will:

1) Complete an orientation which is specific to the Ita Wegman Association and their position,

2) Review and adhere to all relevant Ita Wegman Association policies and procedures,

3) Be trained on emergency and health/safety policies and procedures, and

5) Participate in scheduled performance reviews.

PROCEDURE

- All prospective volunteers and practicum students must submit a letter of interest to the Human Resources and Development Coordinator, Facility Manager, or Human Resources and Relations Group.
- The Human Resources and Development Coordinator or Human Resources and Relations Group will review the application and bring a suggestion to the Facility Manager and Quality Assurance Coordinator for a final decision.

Responsibility of: Human Resources and Development Coordinator, Facility Manager

Monitored by: Human Resources and Relations Group

ECP11: JOB DESCRIPTIONS

Associated standard 1.I.3 (a, b, c, d, e, f,) and 1.I.4 (a-g)

POLICY

Each position with the Ita Wegman Association will have a written job description. The criteria for Coworker qualifications will be based on the scope and activity of the Association's programs, accreditation standards, and external regulations.

Changes to job descriptions must be approved by the Human Resources Relations and Executive Groups. A copy of the associated job description will be given to each Coworker upon hiring, and will be reviewed at annual performance appraisals and when changes to the job descriptions are approved.

PROCEDURES - COWORKER CLASSIFICATIONS

CONTENT OF JOB/POSITION DESCRIPTION

JOB DESCRIPTIONS

The written job descriptions will include, but not be limited to:

- The position title,
- The purpose of the position,
- Reporting relationships and accountability,
- Responsibilities and competencies,
- Qualifications and skills required.

POSITION CRITERIA

The written criteria for each position regarding the qualifications required of a Coworker to perform the respective duties and responsibilities of the assigned position will include, but not be limited to:

- The minimum preferred educational requirements,
- The minimum preferred related work or volunteer experience and
- Any combination or substitution thereof.

CHANGES TO JOB DESCRIPTIONS

Any Coworker may suggest improvements to their job description. All suggestions should be discussed with the Human Resources and Relations Group. After review, the Executive Group

may approve any changes and, if approved, ensure that all relevant job descriptions are reclassified and shared with the relevant Coworkers.

JOB RECLASSIFICATION

At least annually, consideration will be given to any reclassification of jobs that may be required. The Human Resources and Relations and Executive Groups will consider positions for which responsibilities have changed significantly and consider the necessity for a reclassification of the position.

Responsibility of: Human Resources and Relations Group

Monitored by: Executive Group

ECP12: CORRECTIVE ACTION

Associated standard 1.I.7 (a-d), 1.I.8 (a-f), and 1.I.9 (a-h)

POLICY

The Ita Wegman Association adheres to the principles of informed, progressive corrective action whenever corrective action is being taken. This approach provides Coworkers with opportunities and incentives to improve their performance and rectify behaviour through feedback and, where necessary, increasingly serious repercussions.

In circumstances where the safety of a Companion is at risk, the Ita Wegman Association acts to protect the safety of the Companion as the priority. Progressive corrective action is only raised after the Companion's safety is assured.

Note - The Ita Wegman Association reserves the right to terminate a Coworker with or without cause, depending on the seriousness of the situation, without employing corrective action.

PROCEDURE

FORMS OF CORRECTIVE ACTION

The seriousness of the behaviour dictates the seriousness of the response. Different situations require different, corresponding corrective actions that may include, but are not limited to:

- Formal conversation with the Coworker's direct supervisor, with the content of the conversation being filed in *Supervisor Notes*
- Formal conversation with the HRR or members of the HRR Group and the Coworker's direct supervisor, with the content of the conversation being filed in the *Supervisor Notes*
- Formal conversation with the Executive Group or member(s) of the Executive Group and the Coworker's direct supervisor, with the content of the conversation being filed in the *Supervisor Notes*
- Written warning given to the Coworker, with a copy placed in the Coworker's personnel file
- A second written warning given to the Coworker and placed in the Coworker's personnel file
- Written warning notice (as above) and suspension for one (1) day, with pay
- Written warning notice (as above) and suspension for a predetermined period, without pay.
- Written warning notice (copied as above) and termination.

CONSIDERATIONS IN DETERMINING CORRECTIVE ACTION

Corrective action must be tailored to meet the circumstances of the specific situation. In determining the appropriate course of action, the following factors are considered:

- Seriousness - does the behaviour and/or situation warrant corrective action? How serious is the situation, and should corrective action include termination?

- Reason for behaviour - has the behaviour been triggered by some unusual, mitigating circumstances?
- Premeditation - was the behaviour willful and planned?
- Discipline history - has the Coworker had a history of disciplinary problems?

CORRECTIVE ACTION PROCESS

- The Coworker's direct supervisor meets with the Coworker to discuss the situation and the associated corrective action.
- The Human Resources and Relations Group, with support from the Coworker's direct supervisor, will conduct an initial review and or investigation of the unacceptable behavior.
- The Human Resources and Relations Group reviews the behaviour of the Coworker with the Coworker to understand if support can be provided to the Coworker to facilitate a change or improvement in the Coworker's behaviour or actions.

It is essential that discussions are timely and noted in the Coworker's File and/or Supervisor Notes. The Human Resources and Relations Group identifies a course of action that is outlined for and must be adhered to by the Coworker. A timeframe for review of the incident and the Coworker's subsequent conduct is determined based on the nature of the unacceptable behavior.

After one month, the direct supervisor and Human Resources and Relations Group will review the situation and the Coworker's adherence to the previously agreed-upon course of action. Failure by the Coworker to correct the unacceptable behavior and/or an expressed unwillingness to follow the established course of action will result in further corrective action up to and including termination/dismissal.

As part of the process, the Coworker / Contractor must be informed of their rights and internal and external grievance policies.

FOLLOW-UP REVIEW IF THE BEHAVIOR DOES NOT CHANGE FOR THE BETTER

- The Human Resources and Relations Group must decide on an outcome, with support from the Executive Group as requested
- A timeframe for reviewing the new corrective procedures and the Coworker's subsequent conduct is determined based on the nature of the unacceptable behaviour and the Coworker's response to the initial corrective procedure. Typically, the initial review would be scheduled after one week.
- The Coworker must be informed of their rights and the grievance policy.

SUSPENSION AND/OR TERMINATION

- Depending upon the seriousness of the circumstances (i.e., insubordination, intent to harm another person, theft, abuse, harassment), the Ita Wegman Association may initiate a suspension or termination without prior notification or without progressive corrective action.
- If a suspension is considered or agreed upon, the Coworker, Human Resources and Relations Group, and Executive Group will review the circumstances and determine appropriate corrective action and outcome.
- Termination can occur following discussion of the situation and circumstances between the Coworker, Human Resources and Relations Group, and Executive Group.
- When termination is decided upon, the Human Resources and Relations Group and Executive Group must meet within one week to review the decision.

Responsibility of: All Coworkers, Human Resources and Relations Group

Monitored by: Executive Group

The Ita Wegman Association
of British Columbia

ECP13: EMPLOYMENT OUTSIDE THE ASSOCIATION

Associated standard 1.A.6 a(4, 7), c (1, 2)

POLICY

Coworkers of The Ita Wegman Association may undertake employment outside of The Ita Wegman Association, if secondary employment does not interfere with standing duties, responsibilities, and performance, and is not considered a conflict of interest by The Ita Wegman Association Executive Group.

PROCEDURES

CONFLICT OF INTEREST

A Coworker will notify the Executive Director or Facility Manager of their desire to accept employment outside of their work with The Ita Wegman Association. The request will be reviewed by the Executive Group to determine approval.
If approval is not granted, the Coworker will have to choose between The Ita Wegman Association or outside employment.

COWORKER'S WORK AFFECTED BY OUTSIDE EMPLOYMENT

If any other Coworker believes a Coworker's outside employment is adversely affecting their work with The Ita Wegman Association:

- The issue will be raised in the Executive Group
- The Coworker will be given the chance to rectify the situation (i.e. change schedule, reduce hours)
- If the Coworker's work continues to be adversely affected despite supervision and action planning efforts, the Coworker will have to either resign from The Ita Wegman Association or their outside employment
- If the situation continues to be unresolved and remains a detriment to the Coworker's performance, corrective action will be initiated by The Ita Wegman Association.
- Please note: The Ita Wegman Association is responsible for the safety and security of all Coworkers and Companions as per Worksafe BC regulations. Based on such The Ita

Wegman Association reserves the right to reduce or eliminate hours/shift schedule to limit any risk of Coworker impairment.

Responsibility of: Executive Group

Monitored by: Executive Director and Facility Manager

ECP14: HIRING, RECRUITING, POSTING AND PROMOTIONS

Associated standard 1.I.5. a (1(a-f)) (2 (a,b)) (3) b (1-3) c (1-2) and 1.I.7 d (1(a-h))

POLICY

The Ita Wegman Association is an equal opportunity employer, committed to fostering a multicultural and diverse team. All hiring by The Ita Wegman Association is conducted in a manner consistent with fair hiring practices while ensuring that the best candidate is selected for the job. All hiring is conducted in a manner consistent with the letter and intent of Canadian Human Rights legislation.

Candidates for employment are subject to a criminal record check. The Ita Wegman Association will request a Criminal Record Check, and the new Coworker will be supervised until a clear criminal record check has been received. All potential candidates are also subject to credential verification (i.e. academic, certification and licensing) prior to being hired, and ongoing while employed with The Ita Wegman Association.

All Ita Wegman Association of BC Coworkers are subject to a 3-month probationary period, whether they are a new Coworker or a Coworker moving into a different role within the Association.

PROCEDURES

The decision to recruit Coworkers rests with the Executive Group, while the Human Resources and Relations Group is responsible for engaging in the posting, recruiting, and hiring

process. Any verbal offer of a job or role extended to internal or external applicants will be confirmed in writing.

JOB POSTINGS

PERMANENT POSTINGS

- When a permanent job vacancy occurs, the position is posted internally for fourteen consecutive days, wherever possible as time constraints allow, and/or distributed to all worksites. At the same time, the position may be posted externally.
- The job posting contains a brief description of the position including required qualifications and competencies, knowledge, education, and skills required, salary and benefits, contact person and a closing date for application, if applicable.

ADVERTISING, INTERVIEWING AND REFERENCE CHECKS

- The Human Resources and Relations Group is responsible for all advertising, posting, and recruitment efforts. This may include utilizing local news outlets, hiring websites, Glenora Farm's website, and the Camphill network of connections.
- The Human Resources and Relations Group members conduct initial interviews for open positions. A decision to proceed with checking references is made following the initial interview.
- A minimum of three reference checks and verification of credentials through original source contact are preferred and conducted prior to hire.
- All verification of credentials and the completion of a background check must be completed with **positive (**i.e. approved/passed) returned results for the offer of employment or contract to remain open.
- Coworkers are not permitted to provide professional references without permission from the Facility Manager. The Facility Manager must approve all references. Coworkers can provide personal references but are not able to mention their work at Glenora Farm.

HIRING, DOCUMENTATION, ORIENTATION, PROMOTIONS

- The administration office ensures a Coworker file is initiated**.**
- All applicants, where appropriate to the requirements of the job, may be subject to the completion of a medical examination.

- The administration office ensures new Coworkers complete an orientation to program and agency policies and procedures.
- Training will be conducted and include a review of The Ita Wegman Association policies/ procedures, job description, program description, emergency protocols and health and safety plans and drills.
- All new Coworkers will be required to successfully complete a 3-month probation period.
- At any point in time, The Ita Wegman Association will have the right to terminate employment or the contract if credentials, the criminal record check or performance expectations are not met.

Promotions: Promotions to a different role within the Association are determined and reviewed by the Executive Group, Human Resources and Relations Group and the Finance Group on a case-by-case basis and in accordance with performance reviews, available funding, and suitability.

- All promotions follow new hiring protocols listed in this policy.

Responsibility: Executive Director, Facility Manager, Human Resources and Relations Group, Finance Group

Monitored by: Executive Group

ECP15: MILEAGE, DRIVERS LICENSE, TRANSPORTATION AUTHORIZATION FORM

MILEAGE

Associated standard 1.H. 13 a, b, c (1, 2), d, e, f, g (1, 2), h, i, j, k, l

POLICY

The Ita Wegman Association does not ask Coworkers to use their vehicles for Ita Wegman Association business, unless with prior approval from the Executive Director or Finance Group.

Coworkers using personal vehicles for Association business are required to complete a Mileage Reimbursement Form, which can be obtained in the administration office.

Responsibility of: All Coworkers

Monitored by: Executive Director, Finance Group

DRIVERS LICENSE PROFILE/ABSTRACT

Associated standard 1.H. 13 a, b, c (1, 2), d, e, f, g (1, 2), h, i, j, k, l

POLICY

The Ita Wegman Association is committed to the safety and well-being of Companions and Coworkers. Every Coworker (where applicable) who is approved to provide transportation to Companions, before hire and commencement of work, is to submit a recent copy of their Driver's License Profile/Abstract and Driver's License number to the Facility Manager, Quality Assurance Coordinator, or Executive Director. This information is to be updated when a change is made to licensing information, with copies of reports/forms provided to the Facility Manager, Quality Assurance Coordinator, or Executive Director.

It is the Coworker's responsibility to ensure that any driving infractions that occur in the course of their duties or changes to the status of their License are immediately communicated to the Facility Manager, Quality Assurance Coordinator, and Executive Director.

PROCEDURE

Before hire and commencement of employment, the Facility Manager, Quality Assurance Coordinator, or Executive Director must receive a copy of the Coworker's current Driver's License Profile and Driver's License to be included in their personnel file. This information is attached to the ***Transportation Authorization Form*.**

Coworker will give drivers abstract at hire, if there is a change in record or biannual at their Performance Evaluation.. The Facility Manager or Executive Director must review all recent infractions noted on the Profile with the Coworker and place the documentation of the review in the Coworker's personnel file, along with the updated Driver's License Profile. Each Coworker approved to provide transportation for Companions will review annually all vehicle-related policies and procedures and safe driving habits as determined by the Motor Vehicles Branch.

Failure to submit current and accurate Driver's License information will result in the suspension of the Coworker's driving privileges with the Ita Wegman Association.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, and Executive Director

TRANSPORTATION AUTHORIZATION FORM

Associated standard 1.H. 13 a, b, c (1, 2), d, e, f, g (1, 2), h, i, j, k, l

NEW □ **CHANGE** □ **RENEWAL** □

Name: Date:

□ Copy of Class 4 or Class 5 Driver's License

□ Copy of Driver's License Profile / Abstract

□ Copy of current Driver's personal vehicle Insurance (where applicable)

CHANGE OF STATUS

It is the responsibility of the Coworker to notify The Ita Wegman Association of any changes in their Driver's License status or insurance coverage. Driver's License and vehicle insurance renewals must be immediately forwarded to the Facility Manager, Quality Assurance Coordinator, or Executive Director.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator & Executive Director

The Ita Wegman Association
of British Columbia

ECP16: COWORKER RECORDS

Associated standards 1.E.1 (a, b, c, d, e, f, g, h, i, j, k, l) and 1.E.3 (a, b, c, d, e, f)

POLICY

The Ita Wegman Association will maintain a centrally filed Coworker record system with an up-to-date, individual, confidential file for each Coworker. Coworkers will have access to their file on request.

PROCEDURES ESTABLISHMENT/RETENTION/REMOVAL

Each file will:

- Be established by the Coworkers' date of employment or commencement of work
- Be continuously maintained throughout the employment or work period
- Be retained by The Ita Wegman Association for a minimum of seven years after termination
- Contain a "File Checklist" to ensure information is complete
- Contain reprimands and/or warnings for a maximum of twenty-four months, if there has been no other disciplinary action of a similar nature
- Contain records of termination or resignation

CONTENTS

Each file will contain all pertinent documentation relating to the Coworker's status and job performance, including:

- Identifying information
- Medical certification (if applicable)
- Name(s) of next of kin or person(s) to notify in the case of emergencies
- Job description(s) or contract expectations
- Performance evaluations

- All documents pertaining to complaints, including the results of investigations and disciplinary action taken (if any)
- Application for employment and resumes (including previous experience, credentials, and acquired training)
- Verification of educational and employment requirements
- Personal and employment references
- Results of the employment interview and reasons for hiring
- Verification of a criminal records check, driver's license abstract, and any Coworker Medical Form (including immunization records)
- Copy of a valid first aid certificate (if applicable)
- Copy of a valid Mandt training certificate (if applicable)
- Written acknowledgment of personnel orientation signed, dated, and indicating the Coworker has read and understood all Association policies/procedures
- Current federal TD1 and TD1BC form
- Dates of commencement and termination or resignation of employment
- Other material of a personal nature relating to the Coworker
- Training and professional development log

NOTE: Time and attendance records, travel, leave accrual and usage, and documents relating to pay will be maintained in the digital accounting files.

CONFIDENTIALITY

The Quality Assurance Coordinator, Facility Manager, and Executive Director will ensure that:

- All personnel files are maintained in a locked cabinet to secure against loss, destruction, or unauthorized access
- Only management or approved administrative Coworkers have access to the personnel records filing cabinet
- Information of a personal nature is in a sealed envelope in the personnel file and

- The confidentiality of a third party who has given information pertaining to a Coworker is maintained.

COWORKER ACCESS TO INFORMATION

Coworkers wishing to review their file may do so by asking the Quality Assurance Coordinator, Facility Manager, or Executive Director. The review will be conducted in the presence of the Quality Assurance Coordinator, Facility Manager, or Executive Director.

UPDATING FILES

The Quality Assurance Coordinator or Facility Manager will be responsible for ensuring all personnel files are completed and updated as required.

Responsibility of: Quality Assurance Coordinator, Facility Manager, and Executive Director

Monitored by: HRR Group and Executive Group

	ECP17: COWORKER FILE CHECKLIST			
Name:				
	Reviewer:			
	Title:	Open	Closed Date	
	Signature:			
	Date:			
	REQUIRED DOCUMENTATION	N/A	YES	NO
1	Emergency Contact (updated annually)			
2	Bank Deposit Information and CRA Tax Forms			

3	Criminal Reference Check (Exp. Date:)			
	Foreign Criminal Reference Check			
4	Drivers License (Photocopy) + Transportation Authorization Form			
	Drivers Abstract (Annual)			
5	Website and Media Release Form (annually)			
6	Health Benefits Enrollment/Correspondence/ PHN info			
	Immunization Record and TB test			
7	Orientation Checklist			
8	Coworker Performance Review - Probationary / annually			
9	Training Certificates (when applicable)			
	Relias Training Summary print out (Annually)			
10	WorksafeBC Correspondence			
11	Resume and/or Application, Interview Notes			
	Completed Reference Checks and Consent Form			
	Credential / Certificate(s) & Original Sourcing			
	Employment/ Volunteer Agreement or Contract			
15	At Exit: Feedback / Exit Interview/ ROE			

ECP18: COWORKER EXIT INTERVIEW AND SATISFACTION SURVEYS

Associated standard 1.I.7. d (1 (a,b,f))

The Ita Wegman Association
of British Columbia

POLICY

Coworkers leaving The Ita Wegman Association as a result of resignation, retirement, new employment, layoff or termination have the opportunity to complete an exit interview. Participation in the interview process is voluntary, with information collected by the Human Resource and Relations Group (HRR Group) and forwarded to the Executive Group for review. Information is handled in a strictly confidential manner and used to evaluate services, practices, and procedures to improve Coworker recruitment and retention efforts, as well as support delivery.

PROCEDURES

Upon receipt of a resignation/notice the Facility Manager contacts the Coworker to enquire about their interest in participating in an exit interview. That can either be done in-person or digitally by the Facility Manager or a member of the HRR Group. If conducted, the exit interview is completed entirely at the discretion of the Coworker.

If digitally, the Coworker will receive the exit interview form through email, fill it out and send it back to the HRR Group.

- The HRR Group representative completes the ***Internal Exit Interview Form*** with the Coworker at their discretion.
- The completed exit interview is considered confidential and filed in the Coworker personnel file in the administration office.
- Completed exit interviews are collected and reviewed by the HRR Group and used to present recommendations to the Executive Group that support ongoing program, recruitment, and retention, and operational planning efforts.

Responsibility: Facility Manager

Monitored by: HRR Group

The Ita Wegman Association
of British Columbia

SATISFACTION SURVEYS

Associated standards

1.I.7. d (1 (a,b))

POLICY

The Ita Wegman Association is committed to collecting feedback from all Coworkers during and at the end of their working relationship with The Ita Wegman Association. All information collected is held confidential and used to support quality improvement efforts. Coworkers will not be identified in quality assurance efforts.

PROCEDURE

On an ongoing basis, Coworkers are requested to complete a satisfaction survey using Google Forms or a similar program. Coworkers have the choice to complete the survey anonymously or not.

Both completed satisfaction surveys and exit interviews are collected and reviewed by The Ita Wegman Association Human Resource and Relations and Executive Groups and used to support future program and operations planning efforts.

Responsibility: Quality Assurance Coordinator, Facility Manager, Executive Director

Monitored by: Human Resource and Relations Group and Executive Group

ECP19: PERMISSION TO CONTACT EMPLOYMENT REFERENCES FORM

Associated standard 1.I.4 (a, b, c, d, e, f, g), 1.I.5 a(1(a, b, c, d, e, f), 2(a, b),3), b(1, 2, 3), c(1, 2)

POLICY

When hiring new Coworkers Glenora Farm requests contact information for a minimum of 2 employment references. When the potential Coworker provides contact information for their references, this is considered consent to reach out to the reference. Glenora Farm Coworkers use the following verbiage when requesting reference checks and save documentation in the Coworker's personnel file on FileShare.

PROCEDURE

Greetings from Glenora Farm,

I am writing to you to request a letter of reference, or at least your views in an email, on **INSERT COWORKER NAME** and their suitability for a position with our organization. The Ita Wegman Association is a non-profit organization, part of the worldwide Camphill Movement and a member of the Camphill Association of North America. We own and operate Glenora Farm, www.glenorafarm.org, a residential community for adults with diverse abilities (Companions), located on a 100-acre farm in the Cowichan Valley on Vancouver Island. In their application, **Leonie Lensing** gave us permission to approach you for a recommendation.

We are staffed by a mix of short-term volunteers and long term coworkers who live in extended-family type houses together with our companions with special needs. **INSERT COWORKER NAME** has applied for a **INSERT COWORKER POSITION**. This is a challenging position to fill, sometimes exhausting but also very rewarding and full of potential for self-development. It involves supporting Residential Care Workers – House Managers with the daily management of a licensed care home, supervision, and care for adults with diverse abilities in all aspects of their daily lives, overseeing volunteers and other employees working in the same residence. It also may involve participating in the Day Program, providing support in activities based in one of the care homes, craft workshops, in the garden, or on the farm.

Everyone here contributes what they are capable of, and in turn (hopefully) receives what they need, whether it be one of our volunteers or one of the Companions in care. This way of working has existed in all Camphill Communities for over 80 years and creates a unique opportunity to give each individual the possibility of living a productive and meaningful life.

It is very important that we know as much as possible about the people whom we invite into our homes to work with vulnerable Companions. It is for this reason that I am asking you to give me some idea of your knowledge of **INSERT COWORKER NAME,** and your opinion of their aptitude for this type of work. Please also include in what capacity you have known and experienced **INSERT COWORKER NAME.**

I am very grateful to you for taking the time to respond to this email.

Kind regards,

INSERT HUMAN RESOURCE AND DEVELOPMENT COORDINATOR NAME

Responsibility of: Human Resources and Development Coordinator

Monitored by: Facility Manager and HRR Group

ECP20: PROBATIONARY PERIOD

Associated standard 1.I.6 a1, 2, 3, 4, 5, 6, 7, 8),b, c, d, e or 1.I.7 d (1(a,b))

POLICY

All persons accepting employment with the Ita Wegman Association must complete a three-month probationary period. At the end of the three-month probation period, a performance check-in will occur. The first Performance Evaluation is conducted one year after the 3-month probationary review. Following Performance Evaluations are held at least bi-annualy or as needed.

PROCEDURES

Coworkers on probation are required to maintain a clear criminal record following a search, have or obtain a current Level One First Aid Certificate, and attend all in-house training provided.

NOTE: A Coworker entering a new position will always be subject to a probationary review, even if they previously held a position with the Association. The probation period can be extended for up to an additional three months at the discretion of the supervisor, designate, or the HRR Group. Glenora Farm provides supervision to new Coworkers during their 3-month probationary period to ensure the values and beliefs of The Ita Wegman Association are implemented.

PERFORMANCE EVALUATION WHILE ON PROBATION

EVALUATION

During the probation period, a Coworker's performance will be evaluated to determine if they are meeting the requirements as outlined in their job description.

If the Coworker's performance during the period of probation meets the requirements of their job description, and the required program funding is in place, the Coworker will continue to be employed within the Association.

If the Coworker's performance during the period of probation is **not** meeting the requirements of their job description, their employment can be terminated, or the probationary period will be extended for up to three more months with clear expectations outlined.

TERMINATION OF EMPLOYMENT DURING PROBATION

If, at any time during probation, the Supervisor determines that a Coworker's performance falls below the acceptable standard, as determined by the job description or outlined expectations and competencies, the Coworker can be terminated.
The Ita Wegman Association will notify the Coworker, in writing, of the decision to terminate the employment at the earliest opportunity.

Responsibility of: All Coworkers, and all Supervisors

Monitored by: HRR and Executive Groups

The Ita Wegman Association
of British Columbia

ECP21: COMPLAINT, GRIEVANCE AND CONFLICT RESOLUTION

Associated standard 1.I.7 d (1(a,b,e,f))

POLICY

The Ita Wegman Association will address any complaints or grievances promptly and effectively, following the procedure outlined below. Compassion and principles of openness, honesty, and fairness will characterise how The Ita Wegman Association deals with complaints and grievances.

PROCEDURE

The Ita Wegman Association is committed to the maintenance of high standards, but from time to time, Coworkers may wish to express concerns or dissatisfaction regarding situations, attitudes, or practices they are faced with. The Ita Wegman Association recognises that most people who make a complaint or grievance want to be:

- Listened to and taken seriously,
- Offered a solution,
- Offered an apology where appropriate,
- Reassured that all concerned will work towards the situation not recurring.

The Ita Wegman Association regards complaints and grievances as an important indication of the quality of human relationships, communication, and support delivered at Glenora Farm. At any time, reporting matters of serious concern about the support provided by The Ita Wegman Association to an external body, for example, the police, or an advocate is available to all Coworkers and Companions.

Minor Complaints and Grievances

It is expected that, for a variety of reasons, minor disagreements may occur. These day-to-day complaints can very often be resolved relatively quickly and amicably by simply talking these things through at the time. (Refer to ***OP13 Coworker Issue Management***) Once resolved, no further action should be needed.

FORMAL COMPLAINTS AND GRIEVANCES

If a Coworker feels the complaint, issue or problem is of a formal nature which is defined as "any situation where a Coworker or Companion notifies Glenora Farm's Facility Manager (Kristine Millere), Quality Assurance Coordinator (Olivia Jackson) or the Human Resources and Relations (HRR) Group of the issue, complaint or grievance", the Coworker must talk to the Facility Manager, Quality Assurance Coordinator, or Human Resources and Relations (HRR) Group.

The Facility Manager or designate will deal with the complaint or grievance and undertake the following actions:

- Acknowledge receipt of the letter of complaint or grievance within 5 business days.
- Advise the complainant in writing of the action(s) that will be taken to investigate and resolve the complaint or grievance.
- Investigate the matters surrounding the complaint or grievance and present a satisfactory solution, which will be delivered in writing to the complainant within 5 business days.
- Unless specifically requested otherwise, record the details of the complaint or grievance and the proposed solution.

Every effort is made to conduct any investigation into a complaint promptly (refer to ***OP26 Investigation Procedures***).

The outcome of the investigation will be presented to the complainant in writing within 14 days. This notification will inform the complainant whether the complaint or grievance is upheld, partly upheld, or not upheld, and whether any remedial action is to occur. The letter will also explain the right and process of appeal if the complainant is not satisfied either with the outcome of their complaint or grievance, or how their complaint or grievance was handled.

Note - In certain circumstances, the Ita Wegman Association complaint or grievance procedure may need to be suspended if the matters raised in the complaint or grievance need to be referred to another agency, such as the police, to investigate.

Any complaint or grievance reported or filed will not result in any form of retaliation. Furthermore, every effort will be made to ensure advocates or other support are made available upon request.

ANONYMOUS COMPLAINTS OR GRIEVANCES

Anonymous complaints or grievances will be investigated with equal seriousness as any other complaint/grievance; however, the arrangements for reporting matters back to the complainant must invariably be different from those cases where the complainant has openly identified themselves.

The Ita Wegman Association considers it the duty of any Coworker, volunteer, or practicum student who has concerns/suspicions about the health or well-being of a Companion, or has witnessed abuse, or has received an allegation or disclosure of abuse, neglect, theft, or sexual harassment, to inform their Supervisor, a senior Coworker, or the Facility Manager immediately.

RIGHT OF APPEAL

If a complainant chooses to exercise their right of appeal, the appeal will be addressed to the Executive Group. The Executive Group will, within 14 days, advise the complainant in writing of the outcome of the complainant's appeal.

If the complainant is not satisfied with the Executive Group's determination, the Executive Group will advise the complainant of their right to raise their complaint with the Board of Directors.

If the complainant is not satisfied with the Board of Directors' determination, the Board of Directors will advise the complainant of their right to raise their complaint to an appropriate external body.

Responsibility of: All Coworkers, volunteers, practicum students

Monitored by: Facility Manager, HRR Group, Executive Group

The Ita Wegman Association
of British Columbia

ECP22: NON-SOLICITATION

Associated standard 1.I.7. d (1(f))

POLICY

All Coworkers are expected to adhere to the Ita Wegman Association's non-solicitation protocols. These protocols have been developed to limit any act of misrepresentation or persuasion, ensuring all Coworkers adhere to ethical business and Companion support practices. Failure to do so will result in corrective action, up to and including termination of employment.

Definition: Non-solicitation prohibits Coworkers from encouraging and asking other employees to leave their employment with the Ita Wegmans Association or trying to interfere with the relationship between the Ita Wegmans Association and the employees. This is valid throughout their own employment and up until 2 years after their employment.

All Coworkers, during their employment and for a period of two (2) years after employment or term, will not in any way, directly or indirectly:

- Induce or attempt to induce a Companion receiving support from The Ita Wegman Association to hire/contract the Coworker for services/support;
- Induce or attempt to induce any Coworker of The Ita Wegman Association to quit their employment, agreement, or length of contract or retainer with The Ita Wegman Association;
- Interfere with or disrupt the Ita Wegman Association's relationship with its Coworkers;
- Solicit, entice, or hire away any Coworker of the Ita Wegman Association for employment or a contract opportunity that competes with The Ita Wegman Association; or
- During employment or active agreement length, and for two (2) years thereafter, will not divert or attempt to divert from the Ita Wegman Association any business the Ita Wegman Association had enjoyed, solicited, or attempted to solicit, from its Companions, before termination or expiration, as the case may be, of employment or agreement with the Ita Wegman Association.

The Ita Wegman Association
of British Columbia

Responsibility of: All Coworkers

Monitored by: Executive Group

ECP23: FORMAL COMPLAINT FORM

Associated standard 1.I.7 d (1(a,b,e,f))
(For internal use only)

FOR COMPLAINANT TO FILL OUT:

Name	**Date**			**Signature**	
Enter brief details of complaint below					
If complaint has been referred by us to either the police or other governing agency, please enter required details below					

Agency to whom referred	Date referred	Name of person to whom matter was referred	Signed	Date

FOR FACILITY MANAGER OR DESIGNATE TO FILL OUT:

Complaint made by whom:	**Date complaint received**	**Investigation Outcome** **- Complaint is:** **☐ Substantiated** **☐ Partly Substantiated** **☐ Not Substantiated**	**Date outcome notified to complainant**	**Signature and Date**

ECP24: SUPERVISION

Associated standard 1.I.6 a (1-8) b,c,d,e or 1.I.7 d (a,b)

INTRODUCTION

The Ita Wegman Association believes that supervision is a learning process within the overall framework of professional development.

Supervision is affected by the values and beliefs of The Ita Wegman Association and is, therefore, an interactive process conducted with caring and respect for the individuals involved and is differentiated according to the needs of those individuals.

It is the responsibility of the Supervisor to provide the opportunity for the Coworker being supervised to benefit from the supervisory relationship. It is the responsibility of the person being supervised to take advantage of this opportunity. Both responsibilities are of equal importance.

POLICY

All Coworkers of The Ita Wegman Association have the right to expect regular supervision as a support to maintaining and improving the quality of their work. In addition, supervision is conducted to ensure all Ita Wegman Association policies and procedures and external regulations are understood and followed. Supervision is based upon the principle of "mutual determination", where both the Coworker being supervised and the supervisor are responsible for the process and the outcome.

Supervision occurs through a House Coordinator, Workshop Leader, Facility Manager, Executive Director, Executive Group, support planning meetings, Coworker or house meetings, side-by-side sessions with the Companion supported, or one-to-one meetings between Coworkers. Supervision is an ongoing process during employment at The Ita Wegman Association. Supervision occurs during working hours and every effort is made to ensure supervision is conducted in a respectful and sensitive manner.

PROCEDURES

Supervision occurs in an ongoing way as Coworkers move through their daily tasks and assignments. Elements that are incorporated include roles and responsibilities as outlined in job descriptions and the attainment of goals that have been established. To the best of their abilities, the supervisor will ensure that you are able to fulfill your responsibilities and duties. The supervisor will ensure that you are fit for work in the areas of emotional, physical, and mental health.

1. **ROLE OF THE SUPERVISOR** (where defined/designated)

- Supervisors are determined according to the Organizational Chart (OP8 - Organization and Leadership Flow Chart)
- The supervisor reviews in detail the job tasks outlined in Coworker job descriptions and the level of performance expected from a Coworker in completing tasks identified.
- The Accreditation Group annually reviews the Ita Wegman Association supervision policy (Supervision) to ensure protocols are current, sensitive, and respectful to Coworkers.

2. PROGRAM REQUIREMENTS

The Supervisor or designate will ensure all Coworkers follow program and administrative guidelines by:

- Directly observing and working with all Coworkers, or collecting feedback from other Coworkers
- Reading all appropriate documentation,
- Being available and accessible to Coworkers,
- Providing guidance on Coworker performance and ensuring corrective action is taken, if necessary,
- Meeting individually with Coworkers,
- Discussing with Coworkers their strengths, weaknesses and areas where skills can be improved or enhanced,
- Examining with Coworkers their progress towards established performance goals based upon measurable indicators,

3. SUPERVISOR AND COWORKER ACCOUNTABILITY

All Supervisors and Coworkers are responsible for remaining aware of current developments in their field in order to make continual improvements in standards of care. The continual upgrading of current knowledge and skills is essential to the provision of a high quality, effective program.

All Supervisors and Coworkers should understand the limits within which they may make decisions in special situations and know when the decisions should be referred to their supervisor or the Executive Group.

If a Coworker is having a problem with a Supervisor, the Coworker should bring the point to the HRR Group. If a supervisor is having a problem with the Coworker, the Supervisor should bring the point to the Executive Group.

Responsibility of: All Coworkers

Monitored by: Executive Group

The Ita Wegman Association
of British Columbia

ECP25: CULTURAL DIVERSITY

Associated standard 1.I.3 b

POLICY

The Ita Wegman Association promotes the understanding, acceptance, and respect of cultural differences. People who are reflective of the diverse groups in the community are included in the development of policies, support and programs that are appropriate and relevant to them.

Our principles of cultural competency incorporate inclusiveness and reflect the diversity of the community we support. We incorporate and adopt best practice principles that demonstrate our commitment to valuing cultural differences, employment equity, and service equity.

PROCEDURES

1. We do continuous self-assessment, expand cultural knowledge through education and resources, and adapt our support model to accommodate needs.
2. We consult with ethno-cultural communities and are committed to hiring culturally competent Coworkers.
3. The Accessibility Plan includes Diversity as an element and is reviewed annually, to ensure that the Ita Wegman Association is able to incorporate Cultural Diversity through its workforce and people served.

- Current Coworker ethno-cultural and racial diversity
- Policy, procedure and practices
- Personnel Practices
- Skills and Training
- Organizational composition and climate
- Support – review of program specific cultural competencies that are detailed in program descriptions
- Community consultation and communication
- Reviews determine what measures require attention and work that can be developed to support ongoing cultural diversity training.

The Ita Wegman Association
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Responsibility: All Coworkers

Monitored by: Executive Group

ECP26: ATTENDANCE AND ABSENCES

Associated standard 1.I.6 a (1-8) b,c,d,e

POLICY

All Coworkers will attend work in a consistent and timely manner and be expected to minimize absences.

PROCEDURES - ATTENDANCE

- IWA Coworker attendance at work will be monitored and recorded as follows: Attendance records via time sheets or monthly invoices will be kept so as to assist the Executive Director and Facility Manager to monitor attendance and keep payroll records accurate.
- Coworkers are accountable to the Facility Manager and Executive Director for reliability and attendance in workshops and other Glenora Farm program responsibilities.

ABSENCE DUE TO ILLNESS/INJURY

NOTIFICATION

Coworkers who have serious symptoms of a communicable disease should stay at home. If the symptoms are mild and the illness is not contagious - the need to wear a mask.

Coworkers are required to notify their direct supervisor who will notify the Facility Manager and/ or Scheduler as soon as possible, and ideally twelve hours before their inability to attend, latest by 7 am of the morning of the day when they will be absent for their shift.

The Coworker will inform the Facility Manager and/ or Scheduler of:

- The nature of the illness or injury

- The expected return to work date
- Any subsequent changes in the stated return to work date
- At least one day notice of their intent to return to work
- The Coworker will submit a Doctor's Certificate or note from their physician after an absence of six or more consecutive or consecutive scheduled days of work.
- After an absence of six or more consecutive days of work, the Coworker must submit a Doctor's Certificate prior to returning to work, in order to certify that the Coworker is capable of assuming the full duties of the position.
- For extended absences and upon receipt of a Doctor's letter, the Executive Group will submit a Record of Employment-to-Employment Canada (Service BC) for paid medical benefits. Upon cessation of Employment Canada paid benefits a permanent full-time Coworker may be eligible for long term disability benefits through The Ita Wegman Association Extended Health benefits package.

In the event of a continuing absence of more than 12 weeks, refer to Employment Standards BC Leave of Absence

If sick leave benefits have been terminated:

- Benefits may be reinstated retroactively if it can be shown that there is a satisfactory reason for the certificate being late or
- Benefits will recommence on the date the Doctor's Certificate is provided (without retroactive payment of benefits)

TARDINESS

All Coworkers are required to contact the Facility Manager or Scheduler or designate if they are unable to get to work on time. A replacement may be called if a Coworker is one hour late without notification. If a replacement is called, the late Coworker will be sent home, without pay. Continued tardiness will be subject to progressive corrective action.

SWITCHING SCHEDULED DAYS OF WORK

There are situations when a Coworker may need to shift a scheduled day of work. In such cases, a Coworker must:

1) notify their direct supervisor who will notify the Scheduler

2) The Scheduler will work with the Coworker to secure a replacement Coworker of similar skill / experience.

Please note approval is discretionary and will be based on continuity of support delivery, program and Coworker needs.

Responsibility of: All Coworkers

Monitored by: Facility Manager & Executive Director

ECP27: RESEARCH AND PROFESSIONAL SUPPORT

Associated standard 1.I.8 d, f

POLICY

The Ita Wegman Association advocates for quality support that promotes the well-being of Companions and participates in cooperative efforts to enhance the well-being of Companion's engagement in the community.

RESEARCH AND PRACTICE

The Ita Wegman Association will ensure that Coworkers have access to training and/or courses to gain further knowledge in the areas of their job responsibilities. Financial support and time off to attend courses or conferences may be approved by the Executive Director and the Finance Group.

PROFESSIONAL SUPPORT

Coworkers of The Ita Wegman Association will be expected to take an active role in research, awareness campaigns, training opportunities, fundraising activities, community capacity building, etc. as requested. In addition, The Ita Wegman Association will support organizations, associations, and groups that promote the interests of the Camphill Movement.

Responsibility of: All Coworkers, Facility Manager, Quality Assurance Coordinator

Monitored by: Executive Director

ECP28: ALCOHOL AND DRUG USE (LEGAL AND ILLEGAL)

Associated standard 1.H.2.a, b, 1.H.4.a (1), b(1)

POLICY

Illegal drugs are not permitted at the Ita Wegman Association. Legal or prescription drugs may be used as prescribed but must be monitored, controlled, and safely stored.

While on duty (for all Coworkers), alcohol and cannabis use is prohibited in both community inclusion and community housing programs.

While off duty (for Coworkers living at Glenora Farm) the moderate consumption of alcohol and cannabis during social occasions is permitted. Please ensure that the noise level is kept down and that all bottles, glasses, and cannabis materials are removed and safely stored afterward. Coworkers are expected to be physically well and mentally alert for work when on duty.

Smoking and vaping is only to occur in designated smoking areas on the property. The smoking area must be free of flammable materials. There are ashtrays available. Smoking areas must be cleaned/maintained daily and have a fire extinguisher easily accessible in case of emergency.

If you require medicinal cannabis, a prescription and/or doctor's note must be presented to the Facility Manager and/or Executive Director.This is so we can support you and be aware of potential situations and ensure the necessary resources are available to provide assistance.

If you are suffering with a substance use disorder, The Ita Wegman Association encourages you to speak with a medical professional and seek support.

We do not tolerate a Coworker working with Companions while under the influence of alcohol or drugs.

PROCEDURE

Coworkers found to be under the influence of alcohol or non-prescribed drugs while on duty, or found to be in the possession of illegal drugs while conducting Ita Wegman Association business will be asked to meet with the Human Resources and Relations Group to determine the facts and determine a course of action which could include dismissal depending on the circumstances.

You must be 19 years or older to buy, use, possess, or grow non-medical cannabis in B.C.

From the Government of British Columbia Website re: Tobacco use.

- It is illegal to sell, offer to sell, distribute, advertise or promote the use of tobacco to individuals under 19 years of age.

As per the Government of British Columbia, *you cannot smoke or vape within six metres of the doorways, open windows or air intakes that are connected to common areas. Some examples of common areas are the lobby, laundry area or hallways. Your property may have a non-smoking policy or a lease agreement that further restricts smoking or vaping.*

Responsibility of: All Coworkers

Monitored by: Executive Group, Human Resources and Relations Group

The Ita Wegman Association
of British Columbia

ECP29: BULLYING, GOSSIPING AND HARASSMENT

Associated standard **1.A.6** a 7, 8, b (1, 2 (- a, b,)), c (1, 2), **1.H.2.**a,b, 1.I.6.a(2,8),e, **1.I.6** a, b, c (1, 2, 3), d (1 - a, b, c, d, e, f, g, h)

POLICY

The Ita Wegman Association is committed to promoting a work environment in which all persons employed or volunteering with the Ita Wegman Association are treated with dignity and respect and are free from bullying, gossiping and harassment in the workplace. Therefore, behaviour that comes under the definition of bullying, gossiping and harassment will not be tolerated.

Bullying, gossiping and personal harassment includes, but is not limited to:

- Unwanted actions, derogatory or demeaning comments, jokes or slurs;
- Derogatory or demeaning posters, pictures, cartoons, graffiti or drawings;
- Inappropriate jokes, teasing, or excluding a Coworker;
- Threats, intimidation, bullying, gossiping, coercion;
- Malicious gestures or actions.

DEFINITION

BULLYING

Bullying is a repeated, health-harming mistreatment of one or more persons. It is abusive behavior that can be: threatening, humiliating, intimidating, and destructive.

"Bullying is when you keep picking on someone to make yourself feel that you're cooler, smarter, stronger or better than them, and to make the other person feel smaller."

GOSSIPING

Gossip is a form of communication among people that is focused on the private, personal and sensitive affairs of others. It occurs when a person communicates information about another person with the desire to hurt, or harm the other. The same is true of a person who spreads stories about another person's personal life that are untrue (rumor).

"If it's not your story to tell, do not tell it. Words can hurt."

The Ita Wegman Association
of British Columbia

HARASSMENT

Harassment is unwanted and hurtful behavior, comments, or actions directed towards another person that continue even after a person has told you it hurts and has asked you to stop. Harassment is ongoing bullying and gossiping.

"If someone asks you to stop bullying them, or gossiping about them and you don't, that is called harassment."

SEXUAL HARASSMENT

Any comment or conduct of a sexual nature that is uninvited and is known or ought reasonably to be known to be unwelcome and objectionable to the recipient; or that may lead to adverse job-related consequences for the victim of harassment; or that detrimentally affects the work environment.

PERSONAL HARASSMENT

Personal harassment means verbal or physical behaviour that is discriminatory in nature, based upon another person's individual personality or behaviour traits, race, colour, ancestry, place of origin, political beliefs, religion, marital status, physical or mental disability, sex, age or sexual orientation.

PROCEDURE

Bullying, gossiping or harassment of any kind is not tolerated. The following steps must be taken when bullying, gossiping, or harassment occurs:

- A Coworker who feels that they are being bullied, gossiped about or harassed is encouraged to tell the person doing it to stop.
- If the person does not stop, or if the Coworker is not able to talk to the person doing it, the Coworker should talk to their supervisor or Support Person as soon as possible.
- The Supervisor or Support Person will help you work through the situation with the other person.
- If the situation cannot be worked out between you, your supervisor/Support Person and the other person, the Human Resources and Relations Group can be included.

- The Human Resources and Relations Group will designate two Coworkers who will meet with the Coworker to discuss the specifics of the complaint and explain the complaint resolution process.

INVESTIGATION PROCEDURE

- The two designated Coworkers will advise the Coworker accused of engaging in bullying, malicious gossiping or harassment behavior (respondent) that there has been a complaint, that the matter is being investigated as part of the complaint resolution process, and that no threats or reprisal against the complainant will be tolerated.
- Both the complainant and the respondent shall be given the option of having representation present at any meeting held pursuant to the above process.
- Pending the request of the complainant or respondent, the two designated Coworkers may take interim measures to separate the Coworkers concerned if deemed necessary.
- The two designated Coworkers will investigate the complaint without undue delay upon receiving it in writing, by interviewing the complainant, the respondent, and any potential witnesses. During the investigation, every effort will be made to treat the matter with the utmost confidentiality. The two designated Coworkers will carefully document the results of the investigation and forward such to the Human Resources and Relations Group for review and determination.
- Where the alleged harasser is the Coworker's immediate supervisor, the Coworker will provide the written report to any member of the Executive Group. The Executive Group will delegate two Executive Group members to undertake an investigation of the matter as set out above and ensure the Executive Group and Human Resources and Relations Group is kept informed of all information collected. Where the alleged harasser is the Executive Group (entire Group), the complaint shall be presented to The Ita Wegman Association Board of Directors.
- Corrective action taken against a harasser pursuant to this clause shall not form the basis of another complaint.

CORRECTIVE ACTION

- If the complaint is substantiated, appropriate corrective action will follow. This decision will be made within five (5) days of the completion of the investigation. Corrective action could include:

a. A corrective letter on the Coworker's file;
b. Additional training;
c. A change to employment;
d. A suspension without pays; or
e. Termination of the harasser's employment or contract with The Ita Wegman Association.

- If the complaint is not substantiated, and it is determined that the complainant deliberately made a false accusation or acted in a provoking manner, corrective action will be taken against the complainant.
- All parties consulted will treat the matter in confidence. The Executive Group or Human Resources and Relations Group will determine a course of action and an identified outcome. All parties consulted will treat the matter in confidence.
- No documentation of unsubstantiated bullying, malicious gossiping or personal harassment will be maintained in a Coworker file. Proven allegations of bullying, malicious gossiping or personal harassment, including corrective action taken, shall be documented and form part of the harasser's permanent record.
- In the event of bullying, malicious gossiping or personal harassment on the job, perpetrated by a person outside of The Ita Wegman Association, The Ita Wegman Association will make every reasonable effort to maintain the safety and well being of the Coworker.

ADDITIONAL INFORMATION

Nothing in this policy shall restrict a Coworker's legal or civil rights to file a complaint with the B.C. Council of Human Rights or the police.

Bullying, malicious gossiping or personal harassment may consist of one incident or repeated incidents.

The name of the complainant or the circumstances of the complaint will not be disclosed to any person except where disclosure is necessary for the purpose of investigating the complaint.

Responsibility: All Coworkers

Monitored by: Human Resources and Relations Group, Executive Group

The Ita Wegman Association
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ECP30: ACCEPTANCE OF GIFTS

Associated standard 1.A.6 a (a - i, ii, iii), c (1, 2)

POLICY

The Ita Wegman Association recognizes that Companions and Coworkers work and live together in a family-like setting, and therefore gift-giving is a normal part of sharing life together. This applies to Companion family-members as well.
Gift-giving from a Companion (or Companion family member, or representative) to a Coworker of The Ita Wegman Association is permissible within cultural tradition (i.e. birthdays, holidays, goodbye parties, etc.).

Coworkers should not accept material gifts valued at more than $25.00 from Companions or Companion family members. If a Coworker is experiencing challenges with this or has any questions, they should contact the Facility Manager.

PROCEDURES

Companions wishing to give a cultural gift to a Coworker must use the following guidelines in determining gift acceptability:

ACCEPTABLE/APPROPRIATE - Small gifts, particularly to celebrate a cultural tradition or event.

NON-ACCEPTABLE - Cash gifts, expensive gifts or gifts beyond the means of the Companion

When in doubt, ask the Facility Manager for assistance.

Responsibility of: All Companions and Coworkers

Monitored by: Facility Manager

ECP31: CONFLICT OF INTEREST

Associated standard 1.A.6 a(4, 7), c (1, 2)

POLICY

All Ita Wegman Association Coworkers shall not allow their private interests (personal, financial, religious, etc.) to conflict or appear to conflict with their professional duties and responsibilities. Coworkers must avoid any conduct that would lead a person to conclude that they might be biased or motivated by personal interest in the performance of their duties.

PROCEDURE

The Ita Wegman Association recognizes the right of Coworkers to be involved in activities as citizens of the community. However, Coworkers must keep their roles as private citizens separate and distinct from their responsibilities as Coworkers of The Ita Wegman Association.

Conflicts of interest include, but are not limited to:

- Activities where a Coworker's private affairs or financial interests are in conflict with their work duties, responsibilities and obligations, or may result in a public perception that a conflict exists;
- Activities which could impair the Coworker's ability to act in the public interest; or,
- Activities where a Coworker's actions would compromise or undermine the trust that the public places in The Ita Wegman Association

Coworker should not place themselves in situations where they are under obligation to any person who might benefit from or seek to gain special consideration or favour. Coworkers must be honest and impartial.

Coworkers may engage in paid employment with another Employer, carry on a business, or receive payment from public funds for activities outside of their position, provided that:

- It does not interfere with the performance of their duties associated with The Ita Wegman Association;
- It does not bring The Ita Wegman Association into public scrutiny;
- It is not performed in such a way as to appear to be an official act or to represent The Ita Wegman Association's opinion or policies; or
- It does not involve the use of The Ita Wegman Association's premises, services, equipment, or supplies to which the Coworker has access by virtue of their employment.

Ita Wegman Association Coworkers should discuss past, current, and potential relationships with the Facility Manager and resolve them in a manner that avoids harming and/or exploiting affected persons.

Coworkers shall not accept compensation or rewards from individuals or agencies because of the position they occupy with The Ita Wegman Association. Please refer to **ECP33 Acceptance of Gifts**. Money offered should be firmly but kindly refused.

If a problem arises, Coworker must discuss it with their immediate supervisor. No Coworker is permitted to accept money or loans from a Companion receiving support or sell goods / services to a Companion receiving support.

If a situation arises where a potential conflict may exist, Coworkers must consult with the Facility Manager or Executive Director and take steps to eliminate any potential or real conflict.

Responsibility: All Coworkers

Monitored by: Facility Manager, Executive Director

ECP32: FIRST AID/CPR CERTIFICATE & MANDT TRAINING

Associated standard 1.H.4 a (1, 2, 3, 8, 9), b (1, 2)

POLICY

As per Island Health and CARF regulations, all Coworkers assigned to direct support positions shall possess and maintain a current Level One First Aid/CPR and Mandt training certificate. For scheduling purposes, Companions must always have access to a Coworker with a First Aid certificate.

PROCEDURE

Coworkers are expected to submit a copy of their valid Level One First Aid/CPR and Mandt certificates upon beginning work. The Ita Wegman Association will cover the cost for program enrollment and training hours are considered paid hours of work. If Coworkers do not have these certifications upon hire, the competency-based training will be offered within 6 months of hire.

RECERTIFICATION

First Aid/CPR and Mandt recertification is provided through The Ita Wegman Association training program. Mandt recertification is required annually and First Aid/CPR recertification is required every three years, unless otherwise directed by The Ita Wegman Association Facility Manager. If a Coworker is not able to attend one of the internal sessions, they will be required to attend the appropriate training course offered externally at their cost.

Should a Coworker fail to renew their First Aid/CPR or Mandatory Certification prior to its expiry, they should notify the Facility Manager and procure the training and certificate immediately. A copy of the certificate will need to be presented to the Human Resources and Development Coordinator for filing. The Human Resources and Development Coordinator should notify the Facility Manager when the proof of recertification has been received.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Human Resources and Development Coordinator

ECP33: HOURS OF WORK, TIME OFF, AND COMPENSATION

Associated standard 1.I.7 c (2, 3, 4)

POLICY

FAIRNESS/EQUITY

The Ita Wegman Association will not discriminate between genders when employing a person to work at a rate of pay that is less than the rate of pay at which a person of the other gender is employed for similar or substantially similar work. The Ita Wegman Association will endeavor to provide compensation competitive with similar agencies in similar circumstances to attract, retain, and motivate Coworkers within the bounds of pay market anomalies and cost considerations.

The Ita Wegman Association will endeavor to establish and maintain wage bands, which are internally equitable according to an established classification plan.

The Ita Wegman Association will endeavor to maintain proportionate differentials in wage range between jobs of differing responsibility within the Association. Wages are based on benchmark industry salaries for similar positions.

The Ita Wegman Association will recognize meaningful differentials in actual wages between Coworkers performing at different degrees of ability and contribution to the Association in jobs of the same relative value.

RATES OF PAY / WAGE SCALE

Coworkers will be paid following their employment agreements. All new hire (Coworkers) salaries will be determined following the associated Wage Bands and based on level of education, demonstrated skill(s), and years of experience. All new Coworkers will be advised of their wage within their employment agreement and contract.

PAY SCHEDULE

Coworkers will be paid bi-weekly following their timesheet submission.

CONFIDENTIALITY

Coworker payroll will be conducted in such a manner that the payroll information remains confidential.

PROCEDURES RESPONSIBILITIES

The Bookkeeper is responsible for:

- Administering the established pay plan
- Tracking and maintaining records related to Coworker payroll details

- Recommending revisions to the pay plan

The Finance Group, with the approval from the Executive Group, is responsible for and authorized to set individual Coworker wages.

PAY PLAN

The wage band document will include or reference the following:

- Job descriptions covering all positions with the Association
- Provision for evaluating the job descriptions in a consistent manner

A process which ensures:

- Jobs of relatively the same value will be assigned to a common wage range and
- Jobs of relatively differing values will be assigned to proportionately differing wage ranges
- Wage comparisons are made with several “benchmark” jobs within similar organizations or the social service sector
- Provisions for jobs created after the initial establishment of the wage bands are described and evaluated in a manner consistent with the initial evaluation, to maintain internal equity
- The adjustment of wage bands occurs annually or as needed, and is based upon factors such as anticipated changes in average wage rates within the industry and the Association’s financial resources
- Provision for new Coworkers, possessing the minimum qualifications outlined within job specifications for positions assigned to the wage band, to start at the minimum rate in the wage range, and
- Provision for current Coworkers to have their performance evaluated annually or biannually by their immediate supervisor, the Human Resources and Relations Group, and the Finance Group.

WAGE INCREASES

Wage increases are conditional (not guaranteed) and based on available funding and results of performance reviews. Wage increases typically follow identified levels of movement within the

wage band; however, the Finance Group, with the approval of the Executive Group, has the authority to increase wages beyond identified levels at its discretion. No increment can be implemented without written approval from the Finance Group

PAY DAYS

Coworkers will be paid bi-weekly by direct deposit on the Friday following the end of the pay period. Full-time, permanent, part-time, and backfill Coworkers will be paid following the Employment Standards Act.

The process for wage increase reviews is as follows:

- Wage increases are presented to the Chair of the Finance Group (FG).
- Conflicts of interest are identified, and where there is a potential conflict of interest, Coworkers will recuse themselves or ask to be recused from the discussion and decision-making process.
- The Chair of the FG acknowledges receipt of the request within 2 working days and informs the Coworker requesting the increase of their review process and timeline (including the timeline for review and the next FG meeting date).
- The Chair of the FG adds the wage increase request to the next FG agenda.
- The Chair of the FG emails the Coworker's direct supervisor and the HRR Group, providing the following information and requesting performance-based feedback.
- Feedback provided to the direct supervisor and HRR Group should include:

1. The Coworker's current wage and weekly hours of work,
2. The Coworker's wage increase history,
3. The requested increase (information to be provided as a dollar value and a percentage increase),
4. Whether the increase is within the current wage band, and
5. Other financial information to consider (ie: professional development support, other financial support, reasonable accommodation, etc.).

- The Chair of the FG will share the feedback from the direct supervisor and the HRR Group members.

- The FG will review, discuss, and decide on the request at the soonest possible FG meeting. The FG will discuss and decide on the date the wage increase will come into effect (wage increases will not be implemented mid-pay period). The decision will be based on both performance and the available budget/financial standing of the Association.
- The FG will inform the Coworker of the decision within 15 working days. If there is a delay, the Chair of the FG will inform the Coworker of the delay and the reason for the delay.
- If the wage increase is approved, the Chair of the FG will inform the Executive Director and the Bookkeeper.

WAGE PAYMENTS

The distribution of wage payments will be managed to ensure that the details of the payment will be kept confidential. The Bookkeeper will prepare the payroll so that payment is available on the appropriate days.

Wage payment will be deposited directly to the Coworker's bank account. The paystub will be available to the Coworker through the payroll provider.

Payroll deductions are overseen by the Executive Director and Bookkeeper. Questions regarding time off can be addressed as they arise with the Facility Manager or Human Resource and Relations Group.

VACATION DAYS NEED TO BE USED BY MARCH 31ST OF THE YEAR FOLLOWING THEIR ACCRUAL.

BIRTHDAYS AND SICK DAYS EXPIRE ANNUALLY ON DECEMBER 31ST.

VACATION PAY

Refer to ***Coworker Time off and Holiday/Vacation Time*** and ***Vacation Pay***.

STATUTORY HOLIDAYS - SEE ECP 44

TERMINATION OF EMPLOYMENT (All Coworkers)

A Coworker who is terminated with due cause is ineligible for compensation. When a Coworker is terminated without due cause, in accordance with Employment Standards they may be eligible for the following:

- After 3 consecutive months of employment - 1 weeks notice and/ or pay
- After 12 consecutive months of employment - 2 weeks notice and/or pay
- After 3 consecutive years – 3 weeks notice and/or pay, plus 1 week of notice/ pay for each additional year of employment to a maximum of 8 weeks

TERMINATION OF CONTRACT

Contract termination is identified in each contract. Contractors are expected to adhere to termination guidelines as written in their contract.

PAYROLL PROCESS

Coworkers will complete their electronic timesheets by 10:00 am on the Saturday following the Friday cut-off.

The Bookkeeper will work with the Facility Manager and the Executive Director to review submitted timesheets for accuracy.

The Bookkeeper, or designate, will transfer all of the information provided onto the payroll program to calculate the payroll entitlements.

The Bookkeeper, or designate, will transfer all holiday, vacation, special leave and sick time information onto the vacation/statutory holiday and sick time entitlement record. The Bookkeeper will maintain separate records of vacation time, sick time, bereavement days, and absences.

SCHEDULING LIEU DAYS (for full-time and part-time Coworkers)

Both the Association and the Coworker will mutually agree upon scheduling lieu days. If agreement cannot be reached, the decision will lay with the Association.

ENQUIRIES

In the event of questions arising from payroll, the Coworker will ask the Executive Director or Facility Manager. The Executive Director or Facility Manager will contact the Bookkeeper to acquire the necessary information/clarification.

Responsibility of: All Coworkers, Bookkeeper, Facility Manager, Executive Director

Monitored by: Executive Director, Facility Manager, Bookkeeper, Finance Group

COWORKER HOURS OF WORK / BREAKS

Associated standard 1.I.7 c (2, 3, 4)

POLICY

The Ita Wegman Association will ensure there are enough Coworkers to meet all program and administrative needs.

PROCEDURES

Coworker ratio is established in line with CLBC funding and adequately meets the needs of the program(s), Coworker and Companion safety, while achieving the objectives of each Companion's support plan.

REGULAR HOURS OF WORK

Each Coworker will have unique duties and unique working hours depending on their role and responsibilities.
House schedules vary depending on residence and care needs.
Day program schedules vary depending on program availability, Companion preference, Coworker availability, and Companion care needs.

Schedules are created to ensure adequate coverage is provided.

BREAKS

The Association adheres to all Employment Standards of BC Regulations regarding breaks.

32. (1) An employer must ensure

(a) that no employee works more than 5 consecutive hours without a meal break, and

(b) that each meal break lasts at least 1/2 hour.

(2) An employer who requires an employee to work or be available for work during a meal break must count the meal break as time worked by the employee.

Responsibility of: All Coworkers

Monitored by: Scheduler, Facility Manager, Bookkeeper, Executive Director

VACATION PAY

Associated standard 1.F.5 a, b (1, 2)

POLICY

All applicable government regulations are to be applied and administered in payroll documentation and processing. In British Columbia, an employer is required to give employees an annual vacation or pay it out on each paycheque. Paid Coworkers have a vacation pay percentage added to their bi-weekly paychecks. All Partially Paid Coworkers (STCWs) will receive their stipend payment while they are on vacation.

PROCEDURE

GLENORA FARM RATES OF VACATION PAY

• All Coworkers are entitled to Vacation Pay after 5 calendar days of employment.

• A Coworker is entitled to be paid 6% of their total wages each pay period for the first 5 years.

• After 5 years of employment and up to 10 years of employment, a Coworker is entitled to be paid 8% of their total wages each pay period.

• After 10 years of employment, a Coworker is entitled to be paid 10% of their total wages each pay period.

SCHEDULING VACATION TIME

HOLIDAY / VACATION TIME REQUEST:

- If accruing vacation pay, check the vacation pay accrued on your bi-weekly payroll stub. Most Coworkers are paid their vacation pay on each bi-weekly payroll. If you need assistance, check with the Executive Director or the Bookkeeper.
- STCW's submit their proposed dates to their House Coordinator first, then to the Facility Manager for approval. Vacations need to be requested minimally 4 weeks before requested time off (to avoid scheduling conflicts). Please note that approval is subject to program and staffing needs. Please do not book vacations until you have received approval from the Facility Manager / Executive Director, as vacation requests may not be able to be accommodated.
- All other direct-support Coworkers should arrange their vacation time at least 3 months in advance with their supervisor; this request needs to be approved by the Facility Manager. The maximum consecutive time off for vacation is three weeks. In extraordinary circumstances, requests for time off that are longer than 3 consecutive weeks (or 21 days) can be reviewed and negotiated. Requests must be presented to the Human Resources and Relations Group at a minimum of 6 months in advance of their intended departure date. Coworkers may request in writing vacation time that is less than one week.
- Coworkers who have worked with Glenora Farm for 0-5 years are eligible for up to 3 weeks of vacation time.
- Coworkers who have worked with Glenora Farm for 5-10 years are eligible for up to 4 weeks of vacation time.
- Coworkers who have worked with Glenora Farm for 10+ years are eligible for up to 5 weeks of vacation time.
- If the Coworker has already used the number of holidays they are entitled to, they need to request approval from their direct supervisor, who will bring the request to the Facility Manager and Scheduler.

- Banked days off (see statutory holidays policy) are not considered vacation days. Coworkers can not add banked days off to a holiday that will exceed any consecutive 3-week holiday without prior approval.

Additional information is available from the Province of BC website:

Reference: https://www2.gov.bc.ca/gov/content/employment-business/employment-standards advice/employment-standards/time-off/vacation

Responsibility of: Facility Manager, Executive Director, Bookkeeper, and Finance Group
Monitored by: Facility Manager, Executive Director, Scheduler, Finance Group, Executive Group, and Board of Directors

COWORKER TIME OFF AND HOLIDAY/ VACATION TIME

Associated standard 1.I.7 c (2, 3, 4)

POLICY

Time Off

Coworkers working full-time receive 2 consecutive days off per 7 day cycle. Days off are determined through discussion with the Facility Manager. Coworkers working in the administration office and in maintenance generally receive weekend days off. If a Coworker requires more time off than scheduled, the Coworker must request such from the Facility Manager in writing. Approval of additional time off will be determined or based on program and personnel needs.

STCWs during a full-time volunteer placement receive a minimum of 2 days off per 7 day cycle. Days off are determined through discussion with the House Managers, Scheduler and Facility Manager. If a Coworker requires more time off than scheduled, the Coworker must request such from the Facility Manager in writing. Approval of additional time off will be determined or based on program and personnel needs.

A maximum of two Coworkers will be approved for vacation at the same time (this includes Coworkers and STCWs). This requirement can be reviewed at the discretion of the Facility Manager.

Blackout Periods - Due to the support and training needs of the organization, the IWA implements 'blackout periods' during the first two weeks of September (Labour Day is not considered a blackout period), and the first two weeks of April each calendar year (Easter is not included in the blackout period). No time off/vacations will be approved during these times.

For Partially Paid Volunteers (STCWs):

• All Partially Paid Volunteers are entitled to take vacation time after a successful 3-month review.

• All Partially Paid Volunteers who will be placed at Glenora Farm for less than one year are entitled to a prorated period of vacation.

• All Partially Paid Volunteers are not eligible to take any vacation days from July 15th to September 1st.

• All Partially Paid Volunteers will receive their stipend payment while they are on vacation.

Responsibility of: All Coworkers

Monitored by: House Managers, Facility Manager, Human Resource and Relations Group

The Ita Wegman Association
of British Columbia

ECP34: HOLIDAY VACATION REQUEST FORM

CARF Standard 1.I.6.a(8)

Coworker name:		Date submitted:	
Requested first day of holidays:		Requested first day back to work:	
# of vacation days being claimed:		# of vacation days you believe you have left:	
Do you have enough vacation days to go on your requested vacation?		Yes / No	

Please note that flights and accommodations should not be booked until you have received a confirmation of vacation request approval from the Scheduler or Facility Manager. If you book flights and accommodations and your vacation request is not approved, you will be required to attend your shifts.

I confirm that I will not book flights and accommodations until I have received approval of my vacation request being confirmed.

I confirm that I must submit this Holiday Vacation Request Form to the Scheduler and Facility Manager 3 months in advance at a minimum.

Coworker signature: _____ Date: _____

ECP35: WAGE GARNISHMENT

Associated standard 1.I.6 a (8)

DEFINITION

A wage garnishment is a court order or official notice directing an employer to collect funds from an employee to fulfill certain financial obligations or debts, such as child support, student loans, tax levies, etc. (Source: www.adp.com)

POLICY

The Ita Wegman Association will not become involved in the personal financial affairs of its Coworkers unless legally obliged.

PROCEDURES

ASSOCIATION'S RESPONSIBILITY

The Ita Wegman Association has an obligation to deduct the amount of money as specified in the garnishee summons from the wages of the Coworker. The Ita Wegman Association must honour a garnishee or be liable for contempt in addition to accepting responsibility for the amount specified in the garnishee summons.

WITHDRAWAL OF GARNISHEE

In the event of a Coworker successfully getting the creditor to withdraw the garnishee, The Ita Wegman Association will not act upon the garnishee upon receipt of a letter of release from the creditor.

PUNITIVE ACTION

The employer, by law, may not take any form of action which would in any way jeopardize a Coworker's employment solely on the grounds of a garnishee.

Responsibility of: Bookkeeper & Executive Director

Monitored by: Finance Group, Executive Group

ECP36: TERMINATION

Associated standard 1.I.7.d(1(f))

The Ita Wegman Association
of British Columbia

POLICY

The Ita Wegman Association adheres to all provincial and federal regulations regarding termination of a Coworker.

PROCEDURE

NOTICE OF TERMINATION

Coworkers will receive notification of their termination as per the British Columbia Employment Standards Act. The Ita Wegman Association shall give notice of termination in accordance with the Employment Standard, notwithstanding corrective action.

JUST CAUSE

“Just cause” means that a Coworker did something seriously wrong, such as stealing from the Ita Wegman Association, Companion neglect, or abuse. The Ita Wegman Association may terminate a Coworker without notice or payment in lieu for just cause.

FALSIFYING DOCUMENTS

The Ita Wegman Association will immediately terminate a Coworker if any hiring documents are found to be fraudulent or falsified i.e. credentials, certificates, or licensures. The same procedure will occur if it is found that any Coworker has falsified or written fraudulent information specific to agency reporting and documentation requirements.

ACCURACY AND HONESTY IN MEDICAL DISCLOSURE

The Ita Wegman Association may require medical information to assess the Coworker's ability to perform the job and to ensure that the Coworker is not posing a risk to themselves or others. If a Coworker fails to provide the necessary medical information, it may be interpreted as a lack of fitness for the job or a potential health risk, which could result in termination. It is crucial for Coworkers to be transparent about their health conditions and to provide any required medical documentation to avoid such consequences.

REORGANIZATION

The Association follows all Employment Standards BC regulations regarding termination. In the event of a reduction in the workforce due to reduced funding, program changes, organizational restructuring, or other changes, the Coworker agreement may be altered.

The Ita Wegman Association is not required to give notice to a Coworker if:

- The Coworker was hired for a specific term or task that is a prearranged period of time or a specified unit of work that does not exceed 12 months.
- The Coworker is only “temporarily laid off” as per the Employment Standards Act.
- A Coworker is being terminated for just cause.
- The work agreement is not possible due to an unforeseeable event or circumstance, such as a natural disaster, but not insolvency or bankruptcy.
- A Coworker has refused a reasonable alternative work.

COWORKER GIVING NOTICE

It is expected that Coworkers giving notice of leaving their position at The Ita Wegman Association will do so in accordance with the Employment Standards Act. Notice of leaving their position must be provided in writing to the Facility Manager.

- Between hiring and 1 year of employment, a minimum of 2 weeks' notice is requested
- Between 1 and 3 years of employment, 4 weeks' notice is requested
- After 3 years of employment: 3 - 8 weeks' notice, as much notice as possible is requested

The period of notice must include time to be worked and, when possible, vacation time with the agreement of the Executive Director and/or Executive Group.

Responsibility of: HRR Group, Facility Manager, Executive Director

Monitored by: Executive Group, Board of Directors

The Ita Wegman Association
of British Columbia

ECP37: ELECTRONIC RECORDS MANAGEMENT

Associated standard 1.E.3 (a, b, c, d, e, f)

POLICY

Documentation produced or stored electronically must meet all applicable legislation guidelines. The Ita Wegman Association establishes and maintains a records management system, which complies with the guidelines of all applicable provincial and federal legislation. Electronic and physical files and records are held securely and confidentially, except with respect to authorized access through policy or by statutory authority.

All pertinent Companion/Coworker files are stored electronically for a specified period of time (minimum of 7 years). Confidential electronic records of Companions/Coworkers are backed up on the network and stored off-site (server backed up to a 'cloud'). Creation, access, removal, or destruction of records or files adheres to established policies and procedures.

PROCEDURES

ARCHIVING

Archived physical files are held in a separate area from current Coworker/Companion files. Files are organized according to date so that files can be easily destroyed after the 7-year time period.

Archived digital files are saved in "Former Companions" or "Aged Coworkers" folders on FileShare, the internal server.

DESTRUCTION OR DISPOSAL OF FILES

Material deemed to be ready for destruction is deleted from the system. Only whole files older than 7 years may be deleted. If a 7+ year old document is in the file of a current Companion and is still relevant to have on file, it will not be deleted or destroyed. For example, if a current Companion has a psychoeducational assessment on file that was done 15 years ago, the document should remain in the Companion file.

LOCATION OF FILES

Digital and physical Companion files are kept in a secure location. Access is controlled through permission rights. Physical and digital Coworker, volunteer, and practicum student files are kept in a secure location. Files are backed up on The Ita Wegman Association data system.

REVIEW

Electronic records are reviewed as needed by authorized personnel. Archival of removed material follows established guidelines to ensure the security and safety of all confidential information.

SECURITY

Electronic files are only accessible through a permission-based internal server. Designated Coworkers must access the internal server by signing into their computer with their unique password. The Executive Director manages all file access and ensures files are regularly backed up. All hardware (i.e., USB sticks used to access material) is secure and complies with statutory requirements. All Coworkers in leadership roles are responsible for the opening, maintenance, closure, and disposal of files related to the operation of programs; Companion reporting, site maintenance and incident reports. Removal of records from programs, without adherence to established policies, is strictly forbidden. Refer to **OP5 Working File – Record Removal Form**.

STORAGE

Material is catalogued and indexed according to date of file closure and maintained in a separate area from current Coworker/Companion files. Files are organized according to date so that files can be easily destroyed after the 7-year time period.

Responsibility: All Coworkers

Monitored by: Executive Director, Facility Manager, Quality Assurance Coordinator

DESIGNATES IN CHARGE OF FILES

Associated standard 1.E.3 (a, b, c, d, e, f)

The Ita Wegman Association
of British Columbia

POLICY

The following chart indicates who is responsible for controlling, safeguarding, and implementing policies and procedures pertaining to agency files and records. This applies to both electronically and manually generated documents, including copies and electronic mail.

ADMINISTRATIVE/PROGRAM FILES

- Primarily Responsible: Facility Manager
- Also responsible: Administration and Accreditation Coordinator, Bookkeeper, Executive Director, Human Resources and Development Coordinator, Quality Assurance Coordinator

COWORKER FILES

- Primarily Responsible: Human Resources and Development Coordinator
- Also responsible: Administration and Accreditation Coordinator, Facility Manager

COMPANION FILES

- Primarily Responsible: Administration and Accreditation Coordinator
- Also responsible: Facility Manager, Quality Assurance Coordinator

Responsibility: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Administrative and Accreditation Coordinator, Executive Director

The Ita Wegman Association
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ECP38: CRIMINAL RECORD CHECK/ IMMUNIZATION/ FINGERPRINTING/ DRUG TESTING / VERIFICATION OF CREDENTIALS

Associated standard 1.I.5. a (1 (a-f), 2(a,b), 3(b(1,2,3) c(1,2))

POLICY

The Ita Wegman Association requires criminal record checks (for vulnerable populations - Section E) for all prospective Coworkers, Volunteers, WWOOFers, practicum students, and overnight visitors in licensed care homes. In addition to criminal record checks, all Coworkers are subject to background screening which includes reference checks, verification of credentials with primary sources, immunization records and TB testing, and driving records. Fingerprinting may be required at the discretion of the Criminal Records Review Program. Drug testing is not required.

For international applicants, clear Vulnerable Population Criminal Record Checks are required from their home country and any other country of residence. It is the responsibility of the candidate to provide these checks officially translated into English.

Criminal Records Checks are conducted by provincial government authorities and required upon hire and every five years thereafter.

The Facility Manager, Quality Assurance Coordinator, Human Resources and Development Coordinator, Administration and Accreditation Coordinator, Executive Director, or designate, are the only Coworkers authorized to review information/results forwarded from government authorities and ensure said information is held securely and in confidence.

If Criminal Record Checks, reference checks, or vaccination records are not able to be obtained, or have a negative result, The Ita Wegman Association will not be able to move forward with offering the Coworker employment.

During the hiring process, the Human Resources and Development Coordinator or designate verifies credentials and ensures a copy of all credentials is held in the Coworker's file. It is the responsibility of the Coworker to ensure all certification, licensure, credentialing, or

membership fees required for employment or Coworker duty are held in good standing and are valid/current.

PROCEDURES

- During the hiring process, the new Coworker must be able to provide a minimum of 3 references. At least 1 reference must be from a support-type job.
- New Coworkers must provide proof of a negative TB test before beginning their first shift.
- New Coworkers must complete and sign the Vaccination Record upon hire as required by Island Health. Any changes to vaccination status must be reported to the Human Resources and Development Coordinator, and updated vaccinations must be included in the Coworker's Vaccination Record.
- The Human Resources and Development Coordinator will submit a Criminal Record Check for the new Coworker upon hire. Employment may begin prior to the Ita Wegman Association receiving a 'clear' Criminal Record Check result; however, the Coworker must not provide direct support or personal care support without supervision.
- The Criminal Record Review Security Programs Division emails the result of the Criminal Record Check to the Executive Director of the Ita Wegman Association. The release and use of this information comply with the Criminal Records Review Act and the Freedom of Information and Protection of Privacy Act.
- Employment or contract with the Ita Wegman Association is dependent upon the results of the Criminal Record Check.
- If something changes that affects a Coworker's Criminal Records Check results, they must disclose this information to the Facility Manager. Failure to do so could result in corrective action, including termination.
- If something changes that affects a Coworker's Criminal Records Check results, the Facility Manager will bring the topic to the Executive Group for decision.
- Any fees or costs associated with maintaining professional or occupational certification and licenses are the sole responsibility of the Coworker. It is the responsibility of the

Coworker to submit a copy of their re-certification to the Human Resources and Development Coordinator for filing.

- Costs of certification/memberships that are “discretionary” may be paid by The Ita Wegman Association or cost-shared with the Coworker when the certification/membership is in the interest of both the Coworker and The Ita Wegman Association. Payment of all or a portion of a “discretionary” membership fee on behalf of a Coworker is considered a taxable benefit by Revenue Canada, and the deduction of tax on the amount paid is at source.
- Failure to maintain the required certification and/or licenses may result in the termination of the Coworker.

Responsibility: Human Resources and Development Coordinator, Executive Director

Monitored by: Executive Group

ECP39: PERFORMANCE EVALUATION

Associated standard 1.I.8.a-f, 1.I.9.a-h

POLICY

The Ita Wegman Association ensures all Coworkers participate in a regularly scheduled performance review process at the following intervals: 2/3 weeks, 5 weeks, probationary (3 months), first annual performance evaluation, every two years, and/or as required.

PROCEDURES

Long Term Coworkers orientation is initiated at the commencement of duties and is ongoing with a 3-week check-in, 5-week check-in, and 3-month probationary review, followed by a performance evaluation 1 year after that, and then moving to every 2 years or on an as-needed basis. During this review, competencies associated with their employment contract will be assessed, and feedback will be collected and shared with the Coworker by the direct supervisor or HRR representative.

Short Term Coworkers will have a 2-week check-in (informally), a 5-week check-in, and a performance evaluation around the 4th/5th month of their placement. During this review, competencies associated with their employment contract will be assessed, and feedback will be collected by the direct supervisor or HRR representative.

Incoming Short-Term Coworkers should be provided with regular check-ins with their House Manager(s) and at least 2 meetings with their Support Person within the first month.

After policy training, all Coworkers must sign a "Declaration of Training" form and a competency-based quiz acknowledging that the training has been completed and that all policies and procedures are understood. The "Declaration of Training" form and the competency-based quiz are retained in the Coworker's confidential file.

Practicum students will be governed by their 'learning agreement' as created by their learning institution. The timeframe for meeting goals and learning objectives is determined by the student and their academic institution. Performance feedback is provided by Coworkers working with the practicum students to the Human Resources and Development Coordinator to be shared with the practicum student and their learning institution.

The Coworker, their supervisor, and a Human Resources and Relations Group member examine work completed and determine strengths, areas of improvement, and successes. Goals are developed to support identified needs, ongoing learning efforts, and professional development requests. These goals are then minimally reviewed biennially at each performance evaluation to determine completion or need for renewal.

Performance Evaluations are open and inclusive by nature, engaging the Coworker in reviewing their contributions, strengths, and growth areas. If any concerns or issues arise from a performance evaluation, a resolution will be sought. Every effort is made to ensure each Coworker's performance evaluation is completed promptly and inclusive of Coworker participation.

PERFORMANCE EVALUATION

With the awareness of the Coworker's supervisor, the Human Resources and Relations Group member will:

- Arrange with the Coworker a mutually agreeable time and location to conduct the performance review,

The Coworker's supervisor is responsible for:

- Reviewing the Coworker's self-evaluation,
- Reviewing the Coworker's job description/contract if required,
- Ensuring the Coworker understands the training delivered, as well as policies and procedures,
- Set time-bound short- and long-term performance goals in cooperation with the Coworker,
- Reviewing the tasks, duties, and objectives of the position and whether the Coworker is meeting the expectations of the role.
- Work out mutually acceptable indicators that will signify whether or not the Coworker's goals have been reached,
- Provide a copy of the written performance evaluation/contract review to the Coworker and place a copy in the Coworker's file.
- Inform the Coworker of their right to appeal a performance evaluation, informing the Coworker of the appeal process.

RIGHT OF APPEAL

If a Coworker chooses to exercise their right of appeal, any such appeal should be addressed to the Executive Group. The Executive Group will review the performance evaluation findings with all applicable individuals within 14 days of receiving the appeal and advise the Coworker in writing of the appeal outcome. The Executive Group's letter outlining the appeal outcome will conclude the appeal process. If the Coworker is still not satisfied with the result, the Executive Group will advise the Coworker of their right to raise their appeal with an appropriate external body.

Responsibility: All Coworkers

Monitored by: Executive Group

The Ita Wegman Association
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ECP40: PROFESSIONAL DEVELOPMENT AND COMPETENCY-BASED TRAINING

Associated standard 1.H.3, 1.H.4 a (1, 2, 3, 8, 9), b (1, 2, 3) and 1.I.8.f

POLICY

The Ita Wegman Association is committed to supporting Coworkers in maintaining and increasing their expertise and knowledge of all areas relevant to their work. All Coworkers will receive competency-based review/training, including health and safety and emergency policies/procedures upon hire and at regular points during their employment. This is the joint responsibility of the Coworker and the Ita Wegman Association.
Refer to "***ECP4 Coworker Orientation and Training Spreadsheet"***

PROCEDURES

Coworker development and competency-based training are carried out through in-house, online, and facilitated training sessions. The Human Resources and Development Coordinator, Facility Manager and Quality Assurance Coordinator identify and oversee all training sessions in accordance with training outlined in ECP 4.

In addition, Coworkers may take external training at their own request or at the request of the Ita Wegman Association. When individual training occurs at the request of The Ita Wegman Association, and there is a cost in time and money (above the funds available in the budget), the Executive Director must be consulted to review suitability and approval.

IN-HOUSE TRAINING

The Human Resources and Development Coordinator monitors and records all training completed. In-house training could include:

- Comprehensive orientation for new Coworkers, ***"ECP4 Coworker Orientation and Training Spreadsheet",*** or Coworkers moving into new positions;
- Training sessions designed to educate, develop, and improve professional knowledge and skills.

QUALIFIED TRAINING PERSONS

Only persons qualified on the subject matter to be presented shall conduct training sessions. The Ita Wegman Association will maintain documentation of the qualifications of all persons

conducting training sessions, which includes, but may not be limited to, the certification of the trainer.

HEALTH AND SAFETY

All Coworkers are required to receive training related to all health and safety practices during their orientation and then annually as required. Training will include:

1. Identification of unsafe environment factors,
2. Emergency procedures,
3. Evacuation procedures,
4. Identification of critical incidents,
5. Reporting of critical incidents,
6. Medication management,
7. Reducing physical risks, and
8. Workplace violence.

Coworkers will indicate they have completed and understood the training provided by way of policy review, external training, and competency-based tests.

FIRST AID AND MANDT CERTIFICATION

All direct support Coworkers are required to have a valid First Aid/CPR.
All Coworkers working directly with Companions or in a supervisory or supportive role are required to have a valid MANDT training (non-violent communication).
The Ita Wegman Association will cover the cost for certification and recertification for all Coworkers.

PROFESSIONAL DEVELOPMENT

All additional training requests must be submitted on a "Request for Professional Development Form ***"ECP41 Professional Development Form"***. All completed training will be recorded in the Coworker file. It is the responsibility of the Coworker to provide the proof of training to the Facility Manager, who will ask the Human Resources and Development Coordinator to file it in the Coworker's file.

EXTERNAL TRAINING

If a member of the Executive Group requests a Coworker to participate in training, or if the Coworker requests training related to their job responsibilities, the Executive Director must approve the training. If approved, the Ita Wegman Association will cover specified costs associated with the training or bear the full cost of training, these costs could include tuition fees, entrance or registration fees, course required books, travel costs, meals, accommodation, parking, and other legitimate expenses where applicable and agreed upon in advance with the Executive Director.

The Coworker must submit approved bills/receipts to the Executive Director within 30 days of training completion. Please note, if a Coworker does not complete or pass training or coursework, a review will be conducted to determine corrective action planning and may include the Coworker retaking training at their own expense. Outcomes will be determined on a case-by-case basis.

COWORKER INITIATED UNRELATED EXTERNAL TRAINING

If a Coworker requests to participate in training unrelated to their job responsibilities with The Ita Wegman Association, the Coworker can request time off work to complete training. However, time off from scheduled workdays will not be paid, and all costs associated with the training will be the responsibility of the Coworker.

Coworkers must attain written approval from their supervisor to be excused from work if time off work is required. If a Coworker does not have approval from their supervisor and calls in sick or simply does not show up for a scheduled day of work to attend training, the Ita Wegman Association will follow corrective action up to and including dismissal.

Responsibility: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director, Finance Group, Executive Group

The Ita Wegman Association
of British Columbia

ECP41: PROFESSIONAL DEVELOPMENT REQUEST FORM

Associated standard 1.I.8.f

NAME:
POSITION TITLE:
DATE OF REQUEST:
TYPE OF REQUEST: ACADEMIC ☐ PROFESSIONAL DEVELOPMENT ☐ PERSONAL ☐
START AND FINISH DATE OF TRAINING:
EMPLOYER INITIATED ☐ OR COWORKER INITIATED ☐
AMOUNT OF TIME OFF REQUESTED:
AMOUNT OF FINANCIAL SUPPORT REQUESTED:
PER DIEM DETAILS: Breakfast: $15, Lunch $20, Dinner $30 per person per meal. Gratuity (tips) should not exceed 15%. Reimbursement for alcoholic beverages can be discussed on a case-by-case basis.
COWORKER SIGNATURE:
Executive Director REVIEWED REQUEST: YES ☐ NO ☐
Executive Director APPROVAL: YES ☐ NO ☐
DATE OF APPROVAL:
Executive Director SIGNATURE:

The Ita Wegman Association
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ECP42: NEPOTISM

Associated standard 1.I.4.d, e

POLICY

The Ita Wegman Association supports a life-sharing approach to support delivery within our residential program. As such, there will inevitably be family members (spouses, children, parents, siblings, etc.) living and working together. However, any family members applying for employment at Glenora Farm are considered as individual applicants.

In cases where a family member of an existing Coworker of the Ita Wegman Association applies for a position or paid work contract with the Ita Wegman Association, the applicant's merits must be considered in direct relation to other applicants, and they must not be given special treatment due to the family relationship with the current Coworker.

A new Coworker will not be given a role for the purpose of specifically providing support to a relative, or where a conflict of interest could occur.

DEFINITION

RELATIVE - For this policy, *relatives* shall include husband, wife, common-law spouse or partner, son, daughter, mother, father, sister, brother, mother-in-law, father-in-law, grandparent, grandchild, aunt, uncle, niece, nephew, or any step-relationship.

PROCEDURE

As a part of the selection process and before making an employment offer, the Human Resources and Relations and Executive Group shall determine whether the applicant is related to a present Coworker or a Companion receiving support. If a relative of a current Coworker applies for a role, the Human Resources and Relations and Executive Group or designate making the decision must consider the applicant's merits in direct relation to other applicants.

Responsibility of: All Coworkers,

Monitored by: Human Resources and Relations and Executive Group

The Ita Wegman Association
of British Columbia

ECP43: COWORKER SUPPORT PROGRAM

PURPOSE

The purpose of the Glenora Farm Support Program is to allow for new Coworkers to be directly supported by an experienced Coworker and for experienced Coworkers to be supported by one of their colleagues. This support program is meant to facilitate connection, allow new Coworkers to be supported by their support person, create an opportunity for knowledge sharing, and encourage an open and safe space for all Coworkers. All new and existing Coworkers are highly encouraged to use this valuable resource. Schedules and responsibilities could be adjusted to support Coworkers to participate in the Coworker support program.

PARAMETERS

- The content of support meetings is confidential with few exceptions mentioned below
- If a support person or Coworker expresses intentions of harming oneself or others, or witnesses the action of neglect, abuse or illegal action, confidentiality agreement may be broken. The Facility Manager and appropriate support/emergency services must be informed. If the confidentiality agreement has to be broken, the person involved will be informed and further steps will be decided on.
- The Coworker giving support and the Coworker receiving support must keep documentation of meetings that have occurred. This log must include the date, individuals present, any resulting tasks, and date action was taken. At the end of the month, an HRR member will reach out to request the dates of when the support meetings were held.
- Adjustment requests for scheduled meetings can be discussed between the Coworker and support person
- The support person or person being supported can request a change at any point. After 3 months, an HRR member is supposed to check in with the people being supported, to see if they need a change and if they would like someone else as support person.
- **Short Term Coworkers:** 1 hour biweekly confidential meetings for the first 2 months of service. After the first 2 months, 1-hour confidential meetings/check-ins biweekly or as-needed.

- **House Coordinators and Workshop Leaders:** 1 hour biweekly confidential meetings for the first 3 months of service. After the first 3 months, 1-hour confidential meetings/check-ins biweekly or as-needed.
- **Admin and Maintenance:** 1 hour biweekly confidential meetings for the first 3 months of service. After the first 3 months, 1-hour confidential meetings/check-ins biweekly or as-needed.
- **Backfill:** Backfill Coworkers are asked if they feel the need of a support person. If so, an HRR-member will follow up.
- **Practicum Students:** Practicum students will be supervised by a House Coordinator and/or Workshop Leaders. If they need additional support, they can reach out to the HRR Chair.
- **Day Volunteers:** Day volunteers are encouraged to go to the Workshop Leader that they volunteer with if they require support. The Workshop Leader will inform the HRR Group if a support person is needed.

WHO WILL BE MY SUPPORT PERSON?

Coworkers will be assigned a support person upon arrival. However, you have the option to request an alternative support person. Any new or experienced Coworker can be the one receiving support. If the opportunity for support was not offered to an experienced Coworker, they may request a support person. The HRR Group is responsible for assigning support people.

It is the responsibility of all the senior Coworkers of the farm to be willing to be a support person.

EXPECTATIONS OF A SUPPORT PERSON

- Available to commit to 1 hour biweekly confidential meetings for the first 2 - 3 months of service and biweekly or as-needed going forward
- Is accountable to the expectations and policy that informs the Coworker Support program
- Keeps track of meetings that have occurred

- Follows all IWA, CLBC and Island Health policies & procedures. Support Coworkers must be familiar with and adhere to all internal and external regulations and policies.
- Helps new Short-Term Coworker settle into the community during the transitionary period
- Supports new Coworkers in finding connections, opportunities, or projects on and off Farm.
- Support Coworker provides information regarding resources that supports a person's well-being.
- Let's Coworkers know who they should go to for various questions and makes it clear to Coworkers that they may request a new support person at any time without fear of reprisal through the responsible HRR member.
- Be aware of and check-in with the person being supported.
- Be conscious of the comfort level of the person being supported

EXPECTATIONS OF A COWORKER BEING SUPPORTED

- Available to commit to 1 hour biweekly confidential meetings for the first 2-3 months of service and biweekly or as needed going forward
- Fully engages in the support program
- Is proactive and holds oneself accountable
- Requests a new support person if the original support person is not the right fit
- Keeps track of meetings that have occurred

IDEAS AS TO HOW TO HOLD A SUPPORT MEETING

- First meeting could be an introduction to get to know someone to gain basic knowledge and build trust
- Going through the support program outline if you support a new Coworker to make sure they understand everything

- Basic Structure:
- How are you doing in general?
- How are things in the house? How is it with the Companions in your house? How is it with the team in your house?
- How are things in the workshop?
- Do you have any questions about how things work? Or general questions?
- Inquire if they understand the structure of the organization and how things work?
- Are there any challenges at the moment? Do you need extra support moving through them?
- Is there anything that you need, please reach out to me! (Show that you are available as support)

Responsibility of: All Coworkers

Monitored by: Human Resources and Development Coordinator, Human Resources and Relations Group

ECP44: STATUTORY HOLIDAYS

"An employer, with the agreement of an employee, or the majority of the employees, as the case may be, may substitute another day off for a statutory holiday. An agreement between an employer and one employee is permissible.

Example
Melissa asks her employer, Geoff, to substitute June 30, a Monday, for July 1, a Tuesday. Geoff agrees. Melissa takes June 30 off and is paid statutory holiday pay for the day, in accordance with s.45(1). Melissa works July 1 and is paid their regular wage for all hours worked.

This arrangement meets the intent of s.48 of the Act. Both the employer and the employee

agree to the substituted day, and the employee is granted the same rights under the Act as if the substituted day were a statutory holiday.

https://www2.gov.bc.ca/gov/content/employment-business/employment-standards-advice/employment-standards/forms-resources/igm/esa-part-5-section-48

In the case of more than one employee, the majority of the affected employees must agree to the substitution. A majority means more than 50% of those employees affected. Employees' wishes must be determined by democratic means, and a written record must be kept of the decision-making process for the required 4 years pursuant to s.48(3). When scheduling another day off for a statutory holiday, an employer must not unduly influence employees' wishes."

Full-time Coworkers:

Eligible full-time Coworkers **not working** on the statutory holiday will be paid the statutory holiday pay at a standardized rate of 8 hours.

Eligible full-time Coworkers **working** on the statutory holiday will receive straight wages (no overtime) for their hours of work on the statutory holiday. In addition, Coworkers working on the statutory holiday will receive 'banked statutory holiday pay' at a standardized rate of 8 hours.

Part-time Coworkers:

Eligible part-time Coworkers **not working** on the statutory holiday will be paid an average daily pay (average of the 30 days before the Statutory holiday) for the statutory holiday pay.

Eligible part-time Coworkers **working** on the statutory holiday will receive time and a half (1.5 times their hourly rate) for their hours of work on the statutory holiday.

BANKED STATUTORY HOLIDAYS

All banked statutory holidays must be used within 18 months of being banked.

From BC Employment Standards Act: Employees should be paid statutory holiday pay (an average day's pay) for a regular or scheduled day off that fall on a statutory holiday.

It is the responsibility of the Coworker to request a change to this agreement with the Executive Director.

- If I am scheduled to work on a statutory holiday, I agree to work on the statutory holiday with straight pay and bank statutory holiday pay for use later. Banked days off will be used in the calendar year that they are earned.

Coworker name: _____

Coworker signature: _____

Witness name: _____

Witness signature: _____

Date: _____

Responsibility Of: All Coworkers

Monitored By: Human Resource and Relations Group, Business Administrator, Facility Manager, Bookkeeper

EMERGENCY POLICIES(EP)

EP1: GENERAL PROCEDURES

Associated standard 1.H.1

To meet emergency preparedness needs and accreditation standards, all Ita Wegman Association Coworkers working directly with Companions are required to have a current Standard First Aid / Cardiopulmonary Resuscitation and Crisis Prevention Intervention / Non Violent Crisis Intervention Certification. In addition, all Ita Wegman Association residences and day program locations will maintain an up to date emergency preparedness plan and the following:

- Emergency box with supplies
- Bottled Water and / or water filters

Non-perishable food for up to 96 hours for a minimum of 8 people per residence

- First Aid Kit – with a list of what is in the kit
- Flashlight & extra batteries, light sticks, lantern
- Matches and lighter
- Portable radio & batteries

NOTE - A general first aid log is to be maintained at all Ita Wegman Association residences and day program locations that identifies what is in the kit, what has been used and items requiring replacement.

COMMUNITY OUTINGS / ACTIVITIES

When Coworkers take Companions out in the community to participate in activities such as going to the library, movies etc., Coworkers must follow emergency Ita Wegman Association

procedures as well as direction provided on site by staff responsible for the facility. Many if not all community locations are accessible and identify emergency procedures including exit routes, and have signs and posters placed in locations that are easily visible to assist in case of an emergency.

In the event of an off-site emergency, basic needs for Coworkers and Companions will be met by the emergency kits located in association vehicles or emergency kits available at the community location.

In the event of an emergency at a community location, Coworkers and Companions will follow the direction of emergency personnel employed at the community location. Any emergency will be reported immediately, or when safe to do so, to the Facility Manager, Executive Director, or Quality Assurance Coordinator.

In the event of an emergency at a community location, Coworkers will communicate directly with the Facility Manager, Executive Director, or Quality Assurance Coordinator to determine whether to continue or discontinue services in the community location.

Responsibility of: All Coworkers

Monitored by: Health and Safety Committee and Facility Manager

EP2: EVACUATION PLAN INFORMATION

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

EVACUATION PROCEDURES

Procedures to determine when an evacuation is appropriate are provided for each type of emergency (see emergency procedures by type of emergency). Each Coworker will have the responsibility of ensuring that an orderly evacuation of the site is followed and that evacuation

routes remain unobstructed and well lit. No evacuation procedure can be drafted to account for all consequences; therefore, common sense should prevail.

Once an evacuation is deemed appropriate, the following procedures apply.

COWORKER PROMPTING THE EVACUATION

The Facility Manager is the responsible Coworker for prompting an emergency evacuation and will ensure that all Coworkers on site are notified. The Facility Manager or designate will communicate the prompt with Coworkers via WhatsApp (Glenora Farm Residents Group) and telephone.

COWORKER RESPONSIBILITIES IN THE EVENT OF AN EVACUATION

As it is not possible to predict who will be on the site at any given time, all Coworkers must understand the evacuation procedures and the responsibilities that have been designated. Be prepared to assume full responsibility for whatever needs to be done in the moment, as described above. The safety of every person on the site is the priority.

EVACUATION PROCEDURE

During the Day Program Hours 9:00 am - 4:30pm:

Usually, there would be advance notice of an evacuation. If this is the case, House Managers or designates will ensure that the Companion go-bags, emergency kits, red emergency binder, Companion medications, Companion finances, and the house credit card are placed in the vehicle as soon as an evacuation notice is announced.

If there is no advance notice of an evacuation, then the House Managers, Workshop Leaders, or designates will ensure all individuals in their program are accounted for and direct individuals to the nearest exit. The House Managers on shift in the houses will take the Companions and STCW's (if applicable) who are with them into the vehicle (if available) and drive to the Evacuation Assembly Point (Big House Parking Lot).

If you need to leave the house immediately, prioritize directing individuals to the vehicle designated for your household.

If there is no vehicle available, walk quickly and safely to the Evacuation Assembly Point (Big House Parking lot). Workshop Leaders will bring the Companions and STCW's (if applicable) who are in the workshop with them to the Evacuation Assembly Point (Big House Parking Lot). At the

Evacuation Assembly Point, the Coworkers can ensure that everyone will have a seat in the vehicles available.

From there, everyone will drive to the back Vancouver Island University parking lot (on Duncan St., map in the red binders) for a second mustering.

From there, depending on the situation, the Facility Manager will instruct people to either remain in place or provide direction to an alternative emergency location. If you are instructed to go to a hotel, please use the association credit card to purchase rooms. Rooms can be shared by Companions/Coworkers; however, each Companion needs their own bed.

The Facility Manager or Executive Director will inform you if you are going to a hotel.

Continuation of Essential Services

During a shelter in place or evacuation emergency, Ita Wegman Association Coworkers will continue to provide the following supports to Companions

- Medical,
- Behavioural,
- Dietary,
- Transportation,
- Communication, and
- Community Services (where applicable and available).

In the event of an evacuation, the Association will continue to provide Community Housing support to Companions (see ***OP 1 Residential Program*** for all supports available in the Community Housing program). During an emergency evacuation, these supports will be provided by Coworkers to Companions 24 hours a day, 7 days a week.

Depending on the length of the evacuation and the location of the individuals supported, Community Integration (CI) support and activities may be available if they can be safely delivered in the wider community. The Facility Manager is responsible for determining whether CI supports can be safely delivered and designing and communicating approved CI supports and activities.

In the event of a shelter-in-place emergency, Companions will continue to receive Community Housing support (see ***OP 1 Residential Program***). During a shelter-in-place emergency, these supports will be provided by Coworkers to Companions 24 hours a day, 7 days a week.

Depending on the length and scope of the shelter-in-place emergency, Community Integration (CI) programming and activities may be available if they can be safely delivered at Glenora Farm program locations. The Facility Manager is responsible for determining whether CI supports can be safely delivered and designing and communicating approved CI supports and activities.

The Ita Wegman Association will liaise with the municipality (CVRD), CLBC and Island Health wherever necessary to provide external support and resources.

During the Residential Hours 4:30pm - 9:00am:

Usually, there would be advance notice of an evacuation. If this is the case, House Managers or designates will ensure that the Companion go-bags, emergency kits, red emergency binder, Companion medications, Companion finances, and the house credit card are placed in the vehicle as soon as an evacuation notice is announced.

If there is no advance notice of an evacuation, then the House Managers or designates will ensure all individuals in their program are accounted for and direct individuals to the nearest exit. The House Managers on shift in the houses will take the Companions and STCW's (if applicable) who are with them into the vehicle (if available) and drive to the Evacuation Assembly Point (Big House Parking Lot).

If you need to leave the house immediately, prioritize directing individuals to the vehicle designated for your household.

If there is no vehicle available, walk quickly and safely to the Evacuation Assembly Point (Big House Parking lot). At the Evacuation Assembly Point, the Coworkers can ensure that everyone will have a seat in the vehicles available.

From there, everyone will drive to the back Vancouver Island University parking lot (on Duncan St., map in the red binders) for a second mustering.

From there, depending on the situation, the Facility Manager will instruct people to either remain in place or provide direction to an alternative emergency location. If you are instructed to go to a hotel, please use the association credit card to purchase rooms. Rooms can be shared by Companions/Coworkers; however, each Companion needs their own bed.

VEHICLE USE

If there are not a sufficient number of vehicles or qualified drivers on the property during an emergency evacuation, the Facility Manager will communicate with the Executive Director, and additional vehicles will be procured (friends, family, emergency services, etc.)

SHELTER IN PLACE

If the Glenora Farm community must shelter in place, the following resources are available on an ongoing basis:

- Backup generators for each licensed household with additional fuel
- Potable water and water filtration
- Fresh and preserved food
- All items listed in the Emergency Kits

EVACUATION EXITS

Each site is to have a diagram of where to go during an evacuation. All Coworkers and Companions are to have training on this.

Evacuation should occur through the nearest or primary exits, whichever route is the safest. If access to the primary exits is prevented by an emergency, proceed to the secondary exit.

ASSEMBLY AFTER EVACUATION

The Evacuation Assembly Point for the whole property is the Big House Parking lot. From there, everyone will drive to the back Vancouver Island University parking lot (on Duncan St., map in the red binders) for a second mustering.

REPORTING

Any situation involving contact with emergency services or the evacuation of a Companion from their home will be documented using a Critical Incident Form immediately or as soon as possible.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Executive Director

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EMERGENCY EVACUATION INFORMATION

**If your emergency location is not available, please go to a hotel and use the association credit card to purchase rooms. Each Companion needs their own bed. Please inform the Facility Manager and Executive Director if you are going to a hotel.*

**Non-licensed houses are responsible for their own evacuation plan.*

**If the emergency is isolated to Glenora Farm, then please muster at the Glenora Hall. If it is unsafe to meet at the Glenora Hall, please meet at the VIU parking lot.*

Corwyn House

Vehicle 1: Chantal Wischniwsky or Backfill Coworker (driver), Adam Fairbank, Kelly Cotter, Matthew Carr, CH STCW 1, and CH STCW 2

Vehicle 1: Kelly Cotter, Matthew Carr- Fabian & Kaska House

Address: 8241 Bonsall Road. Westholme, BC. V0R3C0

Phone number: 250-732-9136

Vehicle 1: Chantal Wischniwsky Adam, CH STCW1, CH STCW 2 - Sylivia's House

Address: 1755 Wilmont Rd.

Phone number (cell): 250-701-8988

Email: slyglassblowing@proton.me

Helios House

Vehicle 1: Shani (driver), Chris Wendel, Layla Abdel-Malek, HH STCW 1

Vehicle 2: Sar (driver), Ellie, Arrian, Lisa Whitehead, Alicia Marsden, HH STCW 2

Vehicle 1: Shani Gross, Chris Wendel, Layla Abdel-Malek, HH STCW 1 - Jean's house

Address: 3371 Boyles Rd. Cobble Hill, BC.

Phone Number: 250-743-3199

Vehicle 2: Sar Gross (driver), Ellie Gross, Arrian Gross, HH STCW 2 - Bo and Kathie's house

Address: 424 Strang Drive, Ladysmith, BC.

Phone number: 250-732-0307

Vehicle 2: Lisa Whitehead, Alicia Marsden, Rhu (cat) - Dominica Dorazio-Shilito's house

Address: 931 Government St. Duncan, BC.

Phone number: 250-732-4078

Farmhouse/Deerholme

Vehicle 1: Katrin (driver), Samina, Jenny, Jana, FH STCW

Vehicle 2: Emilia (driver), Gary, Jamie, DH STCW

Vehicle 1 and 2 - Barb and Cam Foster's lake house

Address: 7221 Walton Rd. Honeymoon Bay, BC.

Phone number: 250-709-1358

*7 people with no shared beds

*8 people with someone sleeping on the couch.

Barb's place can accommodate 8 people. 9 with someone on the floor. Katrin, JC, JF, SQ, GW, JLA, STCW, STCW, Emilia/replacement would go in the FH van and Katrin's personal vehicle (9 people - pack camping pad and sleeping bag)

Big House

Vehicle 1: Gili Laxman-Rechels (driver), Yotam, Yuval, Charlotte, Frances-Mae Pagani, BH STCW (Paula Messmer), Adola McWilliams, Faith Sechley

Vehicle 2: Erez Laxman (driver), BH STCW (Kika Ertelt), Gavin Murray, Michael (Chris) Buckland, Matthew (Aiden) Fisher-Lange

Vehicle 1: Gili Laxman-Rechels (Driver), Yotam & Yuval Laxman, Charlotte Evans, Frances-Mae Pagani - Mary Noakes' House

Address: 2905 Shawnigan Lake Road

Phone number: 250-732-3957

Vehicle 2: Paula Messmer, Adola McWilliam, Faith Sechley - Grace Tan's house

Address: 1759 Wilmont Road. Cowichan Bay, BC.

Phone number:

Vehicle 2: Erez Laxman (driver), BH STCW (Kika Ertelt), Gavin Murray, Michael (Chris) Buckland, Matthew (Aiden) Fisher-Lange - Judy Hogg's house

Address: 5380 Crescent Dr. Duncan, BC. V9L6V5

Phone number: 250-710-3917

Extra STCW Housing

Olivia Jackson's house

Olivia can accommodate 1-2 STCW

467 Chesterfield Ave. Duncan, BC. V9L 3L9. 250-516-5789.

Tara Batho's house

Tara can accommodate 1-2 STCW

5-3101 Cliffs Rd. Duncan, BC. V9L 0C6. 604-828-9277

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EP3: EMERGENCY FIRE

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

POLICY

In order to support emergency preparedness and accreditation standards it is expected that all Ita Wegman Association residential and day program sites follow and adhere to all fire emergency procedures and evacuation protocols. This includes but is not limited to; ensuring every Companion has read or been explained and participated in fire drills, every residential and day program site maintain approved fire extinguishers and smoke detectors which are identified / labelled and in compliance with annual external inspections and in conformance with all provincial fire and safety standards (where applicable).

PROCEDURE

Actual or simulated Fire drills are to be completed on an annual basis. Documentation of completed drills will be maintained in the house files.

- House Coordinator, Workshop Leader, or designate will announce the fire drill.
- House Coordinator, Workshop Leader, or designate will assist any Companion requiring help to exit the building,
- All Companions, Coworkers etc. will exit the building via the safest exit,
- House Coordinator, Workshop Leader, or designate will ensure all doors are closed en route to exit(s),
- House Coordinator, Workshop Leader, or designate and Companions to meet at designated meeting place outside and away from hazardous situation,
- House Coordinator, Workshop Leader, or designate will conduct a head tally to assure all Companions and Coworkers (when applicable) are accounted for. Once count is complete, the House Coordinator or designate will announce drill is complete and it is safe to re-enter the site,
- The House Coordinator, Workshop Leader, or designate will assist those Companions in need of extra support back into the site,

- The House Coordinator, Workshop Leader, or designate will document the drill and ensure they complete the comments/experience section for improvement efforts. *It is important to continually focus on improving the drills over time*
- The House Coordinator, Workshop Leader, or designate completing documentation will sign off on all completed drills and initial any actions required and/or taken,
- Completed drills will be placed in the house, or workshop files for further reviewing and quality assurance efforts,
- Any follow up training required based on quality assurance reviews will be conducted in accordance with the organization Training Plan and Performance Reviews.

DISCOVERY OF FIRE

What to do if you discover fire:

- On discovery of a fire (if possible) attempt to use an available fire extinguisher to put out the fire.
- If you are not the only Coworker on shift, inform other Coworkers and Companions of the situation by yelling or getting their attention to explain the seriousness of the situation.
- Call 911 when it is safe to do so and indicate there is a fire and it is not containable.
- Exit the building following the emergency evacuation plan via the nearest safe exit, taking all Companions with you.
- Close all doors en route to exit.
- Ensure everyone meets at the designated safety area.
- If you are on your own, and once you have exited the building with all Companions and any other person in your charge at the time, complete a headcount to ensure everyone is accounted for.
- If you are on shift with another Coworker, have this person complete a headcount of all Companions and any other persons that were in the building under your charge to ensure all are accounted for and safe.
- Once everyone is accounted for and safe, contact the Facility Manager or designate.

- Inform the Business Administrator of the situation and any potential needs i.e. place for Companions to stay, ambulance etc. and wait for further instruction/direction.
- Ensure you provide clear and detailed information of the emergency to all Coworkers so that support required can be provided quickly and meet the identified needs.
- Do not re-enter the site until emergency officials indicate it is safe to do so.

REPORTING

Any situation involving the evacuation of a Companion from a residence, or day program site, or contact with emergency services will be documented using a Critical Incident Report immediately or within 24 hours. All reports are to be given to the Facility Manager who will review and identify any follow up required. Implementation of follow up will be managed by the Facility Manager or designate.

Responsibility of: all Coworkers

Monitored by: Facility Manager

EP4: EARTHQUAKE AND ERTHQUAKE KIT CHECKLIST

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

POLICY

Every Ita Wegman Association residence and day program site that provides program support is expected to follow the outlined earthquake procedure within this document.

EARTHQUAKE DRILL PROCEDURE

Earthquake drills are to be completed annually. Documentation of completed drills will be maintained in the house files.

- The House Coordinator, Workshop Leader, or designate will announce the earthquake drill,

- The House Coordinator, Workshop Leader, or designate will move themselves underneath a solid object, such as a desk, heavy counter, or doorway, in the room they are currently in and instruct Companions to do the same. For those Companions requiring assistance, the House Coordinator, Workshop Leader, or designate will ensure they are tended to first,
- Once the House Coordinator, Workshop Leader, or designate indicates the "all clear" Companions will be assisted to the nearest exit,
- The House Coordinator, Workshop Leader, or designate will direct all Companions to meet at the designated safety area and support those that require assistance,
- The House Coordinator, Workshop Leader, or designate will check all rooms for other Coworkers and Companions,
- The House Coordinator, Workshop Leader, or designate will conduct a head tally to assure all are Companions and other Coworkers (when applicable) are accounted for. Once count is complete, the House Coordinator, Workshop Leader, or designate will announce drill is complete and it is safe to re-enter the site,
- The House Coordinator, Workshop Leader or designate will assist those Companions in need of extra support back into the site,
- The House Coordinator, Workshop Leader, or designate will document the drill and ensure they complete the comments/experience section for improvement efforts.
- The House Coordinator, Workshop Leader, or designate completing documentation will sign off on all completed drills and initial any actions required and/or taken,
- Completed drills will be placed in the house files or workshop file, for further reviewing and quality assurance efforts,
- Any follow up training required based on quality assurance reviews will be conducted in accordance with the organization Training Plan and Performance Review(s).

ACTUAL EARTHQUAKE PROTOCOL

Every Coworker responsible for supporting a Companion will ensure all Companions are aware of Island Health Emergency Preparedness & Response Guidelines, and will take charge and follow through with these guidelines during an Earthquake or other disaster. These guidelines

are available at: https://www.islandhealth.ca/learn-about-health/emergency-preparedness/emergency-preparedness

- Cabinets and other tall furniture which could fall or slide during a tremor are anchored. Heavy objects are stored on a lower shelf rather than a higher shelf,
- The House Coordinator, Workshop Leader, or designate will shut off lights, gas, and water as necessary.
- There will be clearly designated front and rear exits as routes of evacuation,
- There are sufficient disaster supplies on site for a minimum of 3 days (72 hours)
- Companions will be cared for as needed,
- Fire extinguishers are kept on site and are kept in good working order and checked regularly by a licensed external contractor or designate,
- All Coworkers and Companions will be aware of where First Aid Kits and Disaster Supplies are stored. All Coworkers are to maintain up-to-date first aid training,
- All Coworkers are responsible for having a reunification plan for their own personal families in the event they are unable to return to their own homes immediately,
- During an earthquake, all Coworkers and Companions are advised to remain in the room they are in; to get under a table or desk; move to an inside wall; protect their neck and head; and to stay away from glass,
- No one will attempt to leave the building during an earthquake,
- Once the Coworker and Companion are given the “all clear”, they will be directed to the designated safety site,
- The Coworker will complete a head tally of all Companions and any other persons on the site under their supervision to ensure all are accounted for and safe.
- Once everyone is accounted for and safe, the Coworker will contact the Facility Manager or Business Administrator and inform of the situation and any potential needs i.e. place for Companions to stay, ambulance required etc. and wait for further instruction/direction.

- The Coworker must ensure they provide clear and detailed information of the emergency to the Facility Manager so that support required can be provided quickly and meet identified needs.
- Do not re-enter the building or home until emergency officials indicate it is safe to do so.

AFTER AN EARTHQUAKE

- The Coworker should immediately check for injuries among other Coworkers and Companions and give first aid as required. Seriously injured people should not be moved unless they are in danger of further injury. Phone 911 if possible. Check the entire area for persons with injuries.
- Prepare for aftershocks, which will occur and may cause more damage.
- In the event of fatalities, cover the bodies and notify the coroner when possible. If you must move a body, keep all personal effects and note the time and place of death.
- Check for fires and fire hazards, especially gas leaks or damaged electrical wiring. (Note: do not attempt to shut off gas valve unless you smell gas or hear a hissing indicative of a leak)
- Check for building damage and move everyone to a safe area if possible.
- Do not permit anyone to use equipment such as elevators or wander into the street. In most cases, evacuation will not be necessary. Evacuate if the site / residence is unsafe, moving to an outside safe area away from buildings and other potential hazards. If possible, secure the building before leaving.
- If light is needed, do not attempt to light a match or turn on a light switch; these could ignite leaking gas. Use flashlights instead.
- Attempt to clean up glass and rubble, but do not attempt to clean a chemical spill. Do not pull timber out of the wreckage as you could cause further collapse.
- Do not use telephones except in emergencies. Use battery powered radio for damage reports and information from local Emergency Disaster Management Agencies (CBC 690, 90.5 FM, CKNW 980)
- Try to ensure that all phones are on the hook so that system does not indicate a busy signal to incoming calls.

- Make appropriate arrangements for Companions to return to the site or go to the nearest Community Emergency Reception Centre. If leaving the building, leave a note attached to the outside door indicating the names of all who are leaving the building and their destination.
- If driving during an earthquake, pull over and remain inside the vehicle. Be aware of falling power lines.

REPORTING

Any situation involving the evacuation of a Companion or contact with emergency services will be documented using a Critical Incident Report immediately or within 24 hours. All reports are to be given to the Facility Manager for review and identification of any follow up required. Implementation of follow up identified will be managed by the Facility Manager, Business Administrator, or designate.

Responsibility of: All Coworkers

Monitored by: Facility Manager

EARTHQUAKE KIT CHECKLIST

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

Date Checked:	
Kit Checked By:	
Signature:	

# to be in the Earthquake kit	Description:	Actual # when checked	Expiry date	Amount needed
30	**Bottles of water**			

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3	**Alert whistle**			
36	**Emergency food**			
3	**N95 Particulate respirator mask**			
3	**Emergency Poncho**			
3	**Thermal emergency blanket**			
1	**First Aid kit**			
1	**Battery-operated AM-FM radio**			
1	**Battery-operated flashlight**			
4	**AA heavy duty batteries**			
1	**12-hour light stick**			
1	**Work/ safety gloves**			
2 Packs	**Pocket tissue**			
1	**2-gallon heavy duty water bag**			
2	**Biohazard/ waste bags**			
Supplies replenished:		**Yes ☐ No ☐**		

<u>Supplies Required</u>

Date supplies will be replenished by:	
By whom - title and name:	

Responsibility of: All Coworkers

Monitored by: Facility Manager

EP5: WEAPONS, BOMB THREATS, AND SUSPICIOUS PACKAGES

Associated standards 1.H.2 (a, b) - 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

All Ita Wegman Association program areas, residences, and site locations adhere to a "no weapons" policy with zero tolerance for policy breach. If any person is found to be wielding a potential weapon in a dangerous or threatening way, Coworkers will immediately contact their House Coordinator, Workshop Leader, and Facility Manager for further direction. The Coworker is expected to follow the guidelines associated with reporting a critical incident, ***HSP8 Critical Incidents***.

WEAPONS DEFINITION

Due to the presence of farm, forest, and garden equipment at the Ita Wegman Association property, a "weapon" is defined as:

Any **dangerous item wielded in such a way as to pose a threat to another person. Some possible examples include: any type of gun, knife, crowbar, axe, chain, etc.**

PROCEDURES

If a weapon is found by or handed in to a Coworker, the Facility Manager must be notified immediately to provide direction, including notifying police if appropriate.

All Coworkers are expected to ensure their safety, Coworkers' safety, and Companion safety. If a weapon is used in a threatening manner or to cause harm, Coworkers should utilize MANDT training techniques and, when it is safe to do so, contact 911 to access professional assistance.

If a Coworker suspects a weapon is in a residence, workshop area, or anywhere at Glenora Farm, the Coworker must notify the Facility Manager, Quality Assurance Coordinator, or Executive Director immediately. The Facility Manager, Quality Assurance Coordinator, or Executive Director will contact 911 to request emergency support.

REPORTING

Any situation involving a weapon or suspicion of a weapon will be documented in a Critical Incident Report and completed immediately or within 24 hours. All reports are to be given to the Facility Manager for review, identification of any follow-up required, and submission to Island Health and Community Living British Columbia. Implementation of the identified follow-up actions will be overseen by the Facility Manager or designate.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director

BOMB THREAT AND SUSPICIOUS PACKAGE

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

POLICY

In any situation of potential concern or suspicion regarding suspicious packages or bomb threats, Coworkers will remain calm: keep themselves, Coworkers, and Companions safe, and immediately contact the Facility Manager or Executive Director, or 911 for further direction.

PROCEDURES

If you receive a bomb threat, stay calm and try to get as much information as possible. Although this might be difficult, try to note any unique features about the voice and any background sounds you hear over the telephone.
Try to note the following:

- If the speaker is male or female,
- If the speaker has an accent,
- If the voice is disguised, muffled, or funny-sounding,
- If the voice is shrill or deep,
- Any background noises (traffic, bus passing, bell ringing, fax or printer sounds), and
- Any indoor vs. outdoor sounds, etc.
- When possible, call the police - 911 -
- Complete a Critical Incident Report (immediately or within 24 hours).

SUSPICIOUS PACKAGES

After you've been notified of a bomb threat, do not touch any suspicious packages. (Please see below regarding suspicious packages.) Leave the area where the suspicious package was found. Notify the police immediately.

Follow the fire evacuation procedure and ensure all Coworkers and Companions exit the site safely as needed. After evacuating the site, avoid standing in front of windows or other potentially hazardous areas. Do not block the sidewalk or street, which will need to be kept clear for emergency officials.

In the case of an explosion, get out of the site as quickly and calmly as possible. If items are falling off bookshelves or from the ceiling, get under a sturdy table or desk until the situation has stabilized enough for your safe passage.

Remember: ensure your safety before trying to help others.

Suspicious packages could be delivered to a residence or program location; therefore, it is good to be vigilant and know what to do. Look for mail and packages that are out of the ordinary. The following might help in identifying a suspicious package:

- No return address,

- Strange odour,
- Protruding wires,
- Excessive postage,
- Misspelled words,
- Addressed to a business title only (i.e. ED),
- Badly typed or written,
- Oily stains, discolouration, or crystallization on wrapping,
- Has noise coming from it, or
- Is leaking.

The contents of a letter or package may cause concern if:

- Powder or a liquid is present,
- It contains a threatening note, or
- It contains an object that you did not expect to receive or cannot identify.

If you are worried about a package or letter you have received:

- Do not open the letter or package.
- Leave the letter or package where it is.
- Get everyone out of the room and close the door.
- Call 911.
- Alert the Facility Manager or Executive Director
- Wait in a safe place until the police/fire arrive and give you further directions.

If you have opened a suspicious package:

- Leave the package where it is.
- Remove any clothing that has powder or liquid on it and seal the clothes in a plastic bag.

- Get everyone out of the room and close the door.
- Wash your hands or shower with soap and water.
- Call 911.
- When possible, alert the Facility Manager or Executive Director.
- Wait in a safe place until the police/fire arrive and give you further directions.

At the earliest opportunity, contact the Facility Manager, Executive Director, or designate to inform, update, and seek further direction.

REPORTING

Any situation involving a threat or suspicion of threat, contact with emergency services, or evacuation of Companions needs to be documented using a Critical Incident Form (immediately or within 24 hours). All reports will be submitted to the Facility Manager for review, identification of any follow-up required, and submission to Island Health and Community Living British Columbia. Implementation of any follow-up identified in the critical incident report will be overseen by the Facility Manager.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Executive Director

EP6: WORKPLACE SAFETY AND VIOLENCE IN THE WORKPLACE

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

POLICY

To ensure emergencies are managed safely and securely, all Coworkers will familiarize themselves with all Emergency Policies and Procedures (EP Policies). In all situations of potential volatility, Coworkers will remain calm, afford the individual an open exit, and will not engage in any form of physical altercation or containment, unless otherwise expected to do so as stated in

a Companion's Safety Plan. If feeling unsafe, contact the House Manager for support and direction. If unable to reach your House Manager, contact the Facility Manager, Quality Care Coordinator, or designate. If you feel there is an immediate safety risk or you are directed to contact an emergency professional, call 911 as soon as it is safe to do so.

Potential Violence: In a potentially volatile situation, quickly assess these factors:

- Safety of yourself
- Safety of Companion(s)
- Safety of others

Proceed with Caution:

- Keep open spaces so the person does not feel trapped
- Keep an open body posture
- Speak in a calm voice
- Listen to what the person is not saying - observe non-verbal body language
- If possible, separate the person from others. Go for a walk with them. Give some space. If there is a Safety Plan in place for the person, follow the safety plan.
- A "cooling off" or "chilling out" period is a good option. Unless indicated in a Companion's Safety Plan, ***DO NOT ATTEMPT TO RESTRAIN***
- If a person is endangering self/others continuously and/or willfully and/or continuously damaging property, contact 911.
- All crisis incidents and emergencies will be documented in a Critical Incident Report form.
- In cases that are volatile or particularly emotional/stressful, follow the diffusing and debriefing process outlined in ***EP9 Critical Incident Debriefing and Timeline***.
- In all cases, **when a weapon is involved, do not attempt to disarm.** Ensure the safety of all. Call 911.

When it is safe to do so and at the earliest opportunity, contact the Facility Manager, Quality Assurance Coordinator, Executive Director, or designate to inform, update, and seek further direction.

REPORTING

Any violent or threatening behaviour demonstrated by a person will be documented using a Critical Incident Report immediately or within 24 hours. All reports are to be given to the Facility Manager for review, identification of any follow-up required, and submission to Island Health and Community Living British Columbia. Implementation of the identified follow-up will be overseen by the Facility Manager.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director

WORKPLACE SAFETY AND VIOLENCE IN THE WORKPLACE

Associated standard 1.H.2 (a, b)

POLICY

The Ita Wegman Association is committed to maintaining a safe work environment for all Companions and Coworkers, which includes eliminating or minimizing the risk of violence in the workplace. The Ita Wegman Association adheres to all WorkSafe BC protocols to minimize risk and maintain a safe work environment.

Definition from WorkSafe BC:

Violence -"*violence*" means the attempted or actual exercise by a person, other than a worker, of any physical force to cause injury to a worker, and includes any threatening statement or behaviour which gives a worker reasonable cause to believe that the worker is at risk of injury. The Ita Wegman Association will ensure that all Coworkers are informed of any potential workplace violence and instructed on what to do if such occurs by:

1. Informing Coworkers how to recognize the potential for violence.

2. Directing Coworkers to the policies, procedures, and work environment arrangements that have been developed to minimize or effectively control the risk to Coworkers from violence.
3. The appropriate response to incidents of violence, including how to obtain assistance.
4. The procedures for reporting, investigating, and documenting incidents of violence.

PROCEDURE

It is the responsibility of the Facility Manager, Quality Assurance Coordinator, and Executive Director to ensure that appropriate corrective actions are taken to respond to incidents of violence. This includes:

- The creation of pertinent policies and procedures.
- Incident investigation.
- Coordinating risk assessments.
- Implementing training programs.
- Ensuring appropriate program placements for individuals supported by The Ita Wegman Association.

It is the responsibility of the Facility Manager, Quality Assurance Coordinator, House Managers, Workshop Leader, or designate to ensure that Coworkers are properly oriented to their worksite. This orientation must include an explanation and description of any assessed risks of violence within their worksite, as documented on the Individual Risk Assessments form.

Orientations must include an explanation of the Ita Wegman Association's incident reporting procedure as it relates to violence in the workplace. House Coordinators and Workshop Leaders shall also ensure that Coworkers in their program comply with established protocols, including MANDT training techniques and behaviour management/support guidelines.

Incidents of violence must be dealt with promptly to ensure everyone’s safety. If warranted, Coworkers should contact their House Manager, Workshop Leader, or designate to request additional support from an outside agency (i.e. psychologist, behavioural consultant, etc.).

All Coworkers must follow established Association-wide and worksite-specific procedures and protocols and immediately report all incidents of violence or threats of violence.

All incidents of violence and threats of violence in the workplace must be reported on the IWA incident investigation report – see ***HSP36 Accident / Incident Investigation Reporting Guidelines*** and ***HSP9 Critical Incident Report Form*****.**

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, House Managers, Workshop Leaders, Joint Health and Safety Committee, Care Group

EP7: MEDICAL EMERGENCY

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

POLICY

The Ita Wegman Association will ensure all Coworkers are trained and well versed in dealing with any situation that may require medical assistance. Training will be ongoing and include but not be limited to: all emergency policies and procedures. All Ita Wegman residences and day program sites will maintain an up to date first aid kit, including vehicles being used to transport Companions. Additionally, it is expected that protective gloves will be worn for all incidents where bodily fluids are involved. Please use Biohazard kit as needed and necessary.

PROCEDURES

Medical Situations

Medical situations which are considered a medical emergency requiring a call to 911; the Coworker on site will deal with immediate medical attention until emergency authorities arrive. The Facility Manager will be notified at the earliest opportunity of first aid provided, information shared and any follow up arrangements requiring coordination.

- Give Emergency information about the Companion to the ambulance attendant

- Medication history should be brought to the hospital (including vital documentation of medical needs and histories)
- A plan for continuing support while the Companion is in hospital should be developed immediately upon hospitalization.
- Consultation with the Companion's representative or advocates.
- The House Coordinator, or Facility Manager should initially contact the hospital within two hours of hospital admission and every three hours thereafter to check on the status of the Companion. All contact and status information is to be documented and communicated through the Companion database and communication protocols i.e. communication logs, emails ensuring Companion confidentiality is maintained. Coworkers during initial contact with hospital personnel are to request that the House Coordinator be notified of any Companion progress or planning efforts to discharge the Companion.

- Please note, it is expected that the Facility Manager contacts the hospital for a Companion update. In the absence of the Facility Manager, that responsibility falls onto the House Coordinator.
- All medical emergencies will be documented with follow up planning managed in accordance with WCB, CLBC and Island Health reporting guidelines.
- Persons to notify in case of emergency include: The House Coordinator, Facility Manager, Business Administrator, and Companion representative.

Minor Medical Situations

Minor medical situations such as a scrape, minor cut etc. will be cared for by a Coworker on site and documented accordingly in the Companion database.

Medical situations (non-emergency - not requiring hospital attendance) that require further attention i.e. trip to a medical clinic - will be managed by the House Coordinator. The House Coordinator will be notified at the earliest opportunity of first aid provided, information shared

with the Facility Manager for any follow up arrangements requiring coordination and documentation.

REPORTING

All minor and non-emergency medical situations will be documented in the Companion database and the Companion's file with attached follow up reporting. First Aid reporting will be shared with the House Coordinator and Facility Manager. Associated follow up planning will be documented by the House Coordinator and / or Facility Manager as necessary.

All situations requiring **medical intervention** (hospital visit) will be documented in a Critical Incident Report immediately or within 24 hours. All reports are to be given to the Facility Manager for review and any required follow up. Follow up determined from reporting will be coordinated and managed by the Facility Manager.

Responsibility of: All Coworkers

Monitored by: Facility Manager

EP8: MEDICAL INJURY, MENTAL HEALTH EMERGENCIES, SUICIDE ASSESSMENT, AND DEATH OR SUSPECTED DEATH

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

POLICY

The Ita Wegman Association of BC will ensure that every Companion receives medical support and attention as required.

PROCEDURE

In the case of a medical/injury emergency, the Coworker in charge will take appropriate action, which may include, but may not be limited to:

- Calling 911
- Administering First Aid
- Implementing specific, predetermined medical procedures
- Notifying other relevant personnel
- A plan for continuing support while the Companion is in hospital and/or re-located should be developed immediately upon hospitalization.

DAY PROGRAM

The Coworker will contact the Facility Manager, Executive Director, or designate, who will retrieve relevant medical information from the main office or the Companion's home, and communicate with emergency medical personnel. In the case of hospitalization or emergency room admission, a Coworker will, if possible, accompany the injured Companion to provide information, continuity, and familiarity during the initial period of illness/accident.

The Facility Manager with input of the Coworker and/or House Manager will notify Companion representative(s), CLBC and Island Health by phone and write a report in accordance with the regulations governing incident reporting. The written report will be kept in the Companion Database, and the Companion's file in the office with the Facility Manager.

RESIDENTIAL

The Coworker will contact the House Manager, who will access relevant medical information and communicate with emergency medical personnel. In the case of hospitalization or emergency room admission, a second Coworker will, if possible, accompany the injured individual to provide information, continuity, and familiarity during the initial period of illness/accident.

The Facility Manager will notify Companion representative(s), CLBC, and Island Health licensing by phone and a written report following the regulations governing incident reporting. The written report will be kept in the Companion's file in the administration office.

The Ita Wegman Association
of British Columbia

Responsibility of: All Coworkers and House Coordinators

Monitored by: Facility Manager

MENTAL HEALTH EMERGENCY

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

POLICY

In the event of a mental health emergency, call 911 and tell them that it is a mental health emergency. Ensure the following information is available for the person experiencing the mental health emergency:

- Vital documentation of medical needs and histories.
- Persons to notify in case of emergency.

IN THE EVENT OF HOSPITALIZATION, OR RELOCATION

- The Facility Manager, Quality Assurance Coordinator, and Executive Director are notified immediately.
- Give Emergency information about the person to the emergency attendant.
- Medication history should be brought to the hospital.

If the person experiencing a mental health emergency is a Companion:

- A plan for continuing support while the person is in the hospital and/or re-located should be developed immediately upon hospitalization.
- Consultation with the Companion's representative, or advocates if appropriate.
- A Coworker will contact the hospital within two hours (if not going with the Companion) to check on the Companion's status.
- Ensure the hospital is aware that they are to notify the Ita Wegman Association when they plan to discharge the Companion.

After a hospitalization has occurred, ensure a call is made to the House Manager, Facility Manager, Quality Assurance Coordinator, and Executive Director. The incident and related

consequences must be communicated quickly and clearly to support after-care and follow-up efforts.

REPORTING

A Critical Incident Report is completed immediately or within 24 hours for any Companion presenting acute mental health behaviours that lead to a doctor or ER visit. All reports are to be reviewed by the Facility Manager.

Responsibility of: All Coworkers

Monitored by: Facility Manager

SUICIDE ASSESSMENT

Associated standards 1.H.2 (a, b) - 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

SUICIDE ASSESSMENT PROCEDURE

If a person speaks of suicide attempts of the past and/or suicide ideation of the present, some concrete questions will need to be asked. One approach is to frame your questions with a statement indicating that you have experience with other people who have talked or acted similarly when they were feeling suicidal. This is the reason for your concern. It is extremely important to remain calm and to listen very carefully to the person. Try to stay with the person. This means talking with the person in a manner that shows that you are trying to understand, rather than trying to change their thinking.

Often, people in a suicidal state do not feel listened to. Listen carefully to maintain a connection with the person. If you start trying to talk them out of it, your actions may encourage them to develop more sophisticated arguments for suicide.

At the first possible moment, consult with the Facility Manager, Quality Assurance Coordinator, or Executive Director. If anyone is making comments about wanting to end their own life, they should be taken to the emergency room for a psychiatric evaluation. This is not something that should be taken lightly, and while Coworkers may have the best interests of the individual in

mind, a qualified professional is the only person who can make an assessment on whether someone is in imminent risk of hurting themself.

If the person is a Companion:

A Critical Incident Report should be completed immediately or as soon as possible for any Companion threatening, planning suicide, or visiting a doctor or emergency department. All reports are to be reviewed by the Facility Manager and Quality Assurance Coordinator. Ensure that the Companion's Care Plan and Ita Wegman Association medical procedures are followed if the Companion goes to the hospital (e.g. their Care Card and Consent to Receive Support form) goes with them to the hospital, and a concrete follow-up plan is put in place by the Quality Assurance Coordinator and the House Managers.

POTENTIAL SIGNS THAT ONE MAY BE STRUGGLING

- Some individuals experience a "death wish," i.e., the world would be better off without me.
- Extensive thoughts of suicide.
- Affect and Behaviour: This can include a lessening of affect, such as not showing any emotion. Feelings of helplessness and hopelessness seem to be key factors in suicide.
- Individuals often show changes in grooming, eating, or sleeping.
- Motivation: What seems to be motivating the person to kill themselves?
- Gestures/Attempts: previous attempt history, previous gestures, what was said? to whom?
- Preparations: Has the person given away (prized) possessions, told anyone, written a suicide note?
- Plans/Means/Method: What is the degree of practicality in the plan to kill themselves? What is the plan? How would they do it? Do they have the means? (Availability, opportunity, lethality)

- Be aware of a sudden decrease in symptoms as the person appears calm and happier. This may occur as a result of the person's final acceptance of their plan.

WAYS TO INCREASE FLOURISHING MENTAL HEALTH

- **Recognize your emotions:** Recognize what influences your emotions. Discover how your emotions affect what you say or do.
- **Spiritual wellbeing:** Get to know yourself by understanding your values, and learn to accept yourself. Connect to something bigger (community, religion, volunteerism, etc.)
- **Healthy self-esteem:** See all your abilities and weaknesses and accept them. Accept yourself for who you are. Recognize your unique talents and abilities and use that confidence to follow your dreams and meet your goals.
- **Positive support networks:** Support can come from friends, family, colleagues, community members, mentors, etc. Having people to support you through life's challenges is beneficial. We can also be a positive support in someone else's support network.
- **Get involved:** Do things that are important or fun. Join a drop-in sports team, read at a senior's center, or join a club or group. This can help build new skills and build confidence. It can also help you build up your positive support network.
- **Build resiliency:** Life is always going to have up's and down's. Take action when you can, recognize when things are out of your control, and recognize and lean on the supports in your life.

Responsibility of: All Coworkers

Monitored by: Facility Manager

DEATH OR SUSPECTED DEATH

Associated standards 1.H.2 (a, b) - 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

The death or suspected death of a Companion who is supported by The Ita Wegman Association is to be treated as a medical emergency until the person has been officially pronounced dead by a medical doctor.

The assumption must be made that life exists until death is confirmed so that, should the person be still alive, life-saving treatment begins immediately. There is ample time to deal with the technicalities later, but there may be only that one, immediate chance to save a life.

Upon confirmation of death, the Facility Manager, Quality Assurance Coordinator, Executive Director, House Manager, and Workshop Leader must be notified as soon as possible. The Facility Manager or Quality Assurance Coordinator must notify next of kin and licensing authorities, i.e., Ministry of Health, as deemed most appropriate.

PROCEDURES

1. **EMERGENCY RESPONSE**

Coworkers finding a Companion not breathing, must immediately: Call 911 to summon an ambulance, fire department, or the police, and the emergency Ita Wegman Association first responder (see Emergency After-Hour Contact List).

2. SECONDARY RESPONSE

Once the emergency response has been initiated, Coworkers must:

a. Remove others (Companions) from the scene at the site

b. Where applicable, if the death occurred, move other Companion(s) to a secure area and seal the immediate area of the occurrence and leave it undisturbed

c. Notify the House Manager, Police, and licensing authorities as directed by the Facility Manager, Quality Assurance Coordinator, or designate

d. Family Representatives will be notified by the Facility Manager or Quality Assurance Coordinator

e. Complete the ***Critical Incident Report*** form

3. REPORTING

A Critical Incident Report will be completed immediately or as soon as possible and forwarded by the Facility Manager to Island Health and Community Living British Columbia for follow-up.

4. NOTIFICATION

The Facility Manager or Quality Assurance Coordinator will ensure that the following people, in addition to those already contacted, are notified:

a. Next of Kin

b. Coroner

c. Appropriate government agency personnel

5. DEBRIEFING SUPPORT – GRIEF COUNSELLING

The Facility Manager and Quality Assurance Coordinator ensure every Companion, Coworker, and/or Volunteer has access to debriefing and/or counseling, i.e., grief, trauma, etc., when they have witnessed or been affected by a traumatic experience such as a death in the workplace.

DEBRIEFING

Debriefing must occur between 24 and 72 hours after the event.

- Debriefing must occur if deemed necessary by the Facility Manager, Quality Assurance Coordinator, and/or Companion and/or Coworker.
- Debriefing for Coworkers is conducted with the Facility Manager, Quality Assurance Coordinator, or designate.
- Debriefing for Companions is coordinated through House Managers or, if more appropriately identified, external counsellors.
- Debriefing must address and respond to the emotional and psychological consequences of the event.
- Debriefs must provide information on resources available to Companions and/or Coworkers who need more support.

COUNSELING – GRIEF OR OTHER

Counselling services will be provided on a case-by-case basis to any Companion and or Coworker who has witnessed or been affected by a traumatic event such as the death of an Ita Wegman Association Companion or Coworker. Counselling support i.e., type of counselling, number of sessions, etc., is coordinated in consultation with the Companion and/or Coworker.

Please reference ***EP9 - Critical Incident Debriefing*.**

Responsibility of: All Coworkers

Monitored by: Facility Manager

EP9: CRITICAL INCIDENT DEBRIEFING AND TIMELINE

Associated standards 1.H.2 (a, b) - 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

The Ita Wegman Association is committed to ensuring all Companions and Coworkers are provided with debriefing/diffusing and counselling support following any traumatic workplace situation (critical incident). Examples of critical incidents include a fatality, a major medical emergency, an assault, a major police incident, a fire or other major emergency, an allegation, or a disclosure of a physical or sexual abuse.

PROCEDURES

In the event of a critical incident, Companions and/or Coworkers involved must be assisted in diffusing/debriefing the circumstances and effects of the incident and then accessing counseling support if appropriate.

1. **DIFFUSING**

Diffusing must occur within 9-12 hours of the event (or when it is safe to do so). The diffusing process is confidential and should last between 30-45 minutes for an individual or group.

Diffusing session will:

- Explain to a Companion and/or Coworker the physical, emotional, and cognitive reactions they may experience as a result of the event.
- Provide information on how the Companion and/or Coworker can care for their emotional and physical health.
- Provide information on resources available to the Companion and/or Coworker who may need more support (i.e., therapeutic counselling).
- Determine the need for a debriefing session.
- Design a follow-up plan.

2. DEBRIEFING

Debriefing must occur between 24 and 72 hours after the event with the individual or group.

- Debriefing must occur if deemed necessary by the diffuser or requested by a Companion and/or Coworker.
- Debriefing for Coworkers is conducted through the Facility Manager, Quality Assurance Coordinator, or Executive Director unless otherwise requested.
- Debriefing for Companions is conducted through the Facility Manager, Quality Assurance Coordinator, or a more appropriate identified external counsellor(s).
- Debriefing must address and respond to the emotional and psychological consequences of the event.
- Debriefs must provide information on resources available to Companions and/or Coworkers who need more support.
- A follow-up plan must be developed from the debriefing session(s).

3. PROCESS REVIEW

A process review must take place as soon as possible to:

- Discuss events through a therapeutic lens for the Companion and a therapeutic and clinical lens for Coworkers.
- Uncover any needs, concerns related to how the Companion and/or Coworker interacted or responded to the situation.
- Determine what support services should be put in place to address the effects of traumatic events, including but not limited to: required counselling, professional development, practical training, etc.
- Design a follow-up plan, i.e., ongoing counselling, etc.

4. GLOBAL REVIEW

Global review must take place monthly at the agency level to:

- Review all critical incidents
- Evaluate all follow-up plans
- Determine Coworker training needs
- Design an appropriate, forward-looking plan

A written analysis of critical incidents is conducted annually by the Facility Manager.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director

CRITICAL INCIDENT DEBRIEFING TIMELINE

Associated standard 1.H.2 (a, b) and 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

In the event of a critical incident, Companions and/ or Coworkers involved must be assisted in defusing/debriefing the circumstances and effects of the incident and then accessing counseling

support if appropriate. Please refer to ***Critical Incident Debriefing*** for further information regarding critical incidents and the debriefing process.

Date of critical incident: _____

Time of critical incident: _____

Please check each box as the step is completed.

Step 1

- Diffusing, within 9-12 hours of the critical incident

Step 2

- Debriefing, within 24 and 72 hours of the critical incident

Step 3

5. Process Review, as soon as possible after Debriefing

Step 4

- Global Review, every 3 months

Name of person completing the critical incident debriefing:

_____

Signature of person completing the critical incident debriefing:

_____

The Ita Wegman Association
of British Columbia

EP10: TELEPHONE PROTOCOL

Associated standard 1.H.2 (a, b)

Police - Fire - Ambulance Call: 911

Hello, my name is _____.

I am a Coworker at _____.

I am located at _____.

Please send an ambulance/fire truck/police to this location.

I am assisting an individual who is experiencing _____.

Someone will be waiting on the driveway to guide you to us.

*Note: Coworkers should ensure that someone is waiting by the end of the driveway going to Corwyn and Helios to direct the emergency services to the correct location.

- **When will you arrive?**
- **Do you need any other information?**
- **May I have your name and badge number?**
- **May I hang up now?**

The Ita Wegman Association
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EP11: EMERGENCY PROCEDURES TRAINING

Associated standard 1.H.4 a (1, 2, 3, 4, 5, 6, 7, 8, 9), b (1, 2, 3)

POLICY

All Coworkers and Companions with The Ita Wegman Association are provided with specific training and opportunities to practice what to do in the event of an emergency.

Training is provided:

1. To ensure that all Coworkers and Companions are prepared and remain safe and are aware of what to do in an emergency (fire, power failure, windstorms, earthquake, flooding, bomb threat, natural disaster, medical emergency, etc.).
2. To provide Coworkers and Companions with tools that enable them to respond to emergencies in a calm, composed manner.
3. To ensure all Coworkers and Companions have support and assistance when responding to emergency procedures. Companions with specific needs have a specific emergency response plan that outlines any protocols, support, and staffing requirements necessary to support them during an emergency.

PROCEDURES

The Facility Manager and assigned Coworker will assess each Companion's ability to participate in emergency preparedness training and determine the level of training required. Coworkers and Companions must be aware of standard emergency procedures in the event of an actual emergency. Coworkers and Companions are trained in:

- Fire escape routes
- Evacuation procedures
- Fire, earthquake, medical emergency, bomb threat, utility, natural disaster and any other emergency procedures
- Location of emergency supplies
- Location of the site's First Aid Kit, Automatic External Defibrillator "AED"

- Location of flashlights

It is the responsibility of the Facility Manager to ensure all Coworkers and Companions have been trained on all relevant emergency policies and procedures. Companions must indicate, to the best of their ability, that they understand what they are to do in the event of an emergency. At-hire and annual training will be documented.

Responsibility of: All Coworkers

Monitored by: Facility Manager

EP12: COMPETENCY BASED TRAINING – HEALTH & SAFETY / EMERGENCY

Associated standard 1.H.4 a (1, 2, 3, 4, 5, 6, 7, 8, 9), b (1, 2, 3) and 2.E.5 a, b (1, 2 (a, b (I, ii)

POLICY

All Glenora Farm Coworkers will receive competency-based training at hire and annually in the following areas:

- Health and safety practices
- Identification of unsafe environmental factors
- Emergency procedures
- Evacuation procedures
- Identification of critical incidents
- Reporting of critical incidents
- Medication management, if appropriate
- Reducing physical risks
- Workplace violence

- Infection protection and control
- Age-related cognitive decline

PROCEDURES

It is the responsibility of the Facility Manager and Quality Assurance Coordinator to track and monitor all training provided and completed. Training will be documented and recorded in Coworker files or an online system to ensure training is complete and current. Training records are available for external stakeholders (Island Health, CARF, CLBC, WorkSafeBC, etc.).

It is the responsibility of the Facility Manager to ensure all Coworkers receive and participate in competency-based emergency training, at hire and annually.

Responsibility of: Facility Manager, Quality Assurance Coordinator

Monitored by: Executive Group

EP13: EMERGENCY DRILLS AND FORM

Associates standard 1.H.7 a (1, 2), b, c (1, 2, 3, 4, 5), d

POLICY

Emergency drills, actual or simulated, are to be conducted at least annually in each shift (day program and residential) and at each program location. It is expected that all Glenora Farm Coworkers and Companions are familiar with the location of the first aid and earthquake kits. All Coworkers and Companions must have either read or been explained the procedures and understand what to do in all emergency procedures prior to running any drills.

PROCEDURES

- The monthly task calendar indicates which drill should be completed.
- **Earthquake:** Coworkers and Companions will move themselves underneath a solid object, such as a desk, heavy counter, or doorway, in the room they are currently in. The

House Coordinator or designate will give the “All clear,” and Companions and Coworkers will be directed to the nearest exit. Meet at the muster point.

- **Bomb or fire:** The House Coordinator or designate will instruct Companions and Coworkers to immediately exit the site from the nearest exit. Meet at the muster point.
- **Natural disaster:** In the event of a natural disaster (forest fire, flood, tsunami, etc.), the House Coordinator, Workshop Leader, or designate will engage in an emergency evacuation.
- **Emergency evacuation:** The Facility Manager will notify all Coworkers that there is an emergency evacuation. The House Coordinator, Workshop Leader, or designate will ensure all individuals are accounted for and direct individuals to the nearest exit. The Coworker in charge of each house will retrieve the emergency bins and any emergency medication. The Coworker in charge of the house will drive all Companions and Coworkers in their house to the assigned emergency housing.
- **Utility failures:** In the event of a utility failure (power failure, water failure, etc.) determine what is needed for the safety of Companions and Coworkers. For example, if the power fails, ensure that the generator is in working order and confirm plugs and areas that are attached to the generator. Ensure that anything important is plugged into the generator such as fridge, freezer, phone, etc.
- **Medical emergency**: In the event of a medical emergency, Coworkers are expected to use their First Aid skills. One Coworker will be responsible for the situation. This Coworker will be engaging in first aid and will instruct others what to do (call the ambulance, wait on the driveway for the ambulance, get a first aid kid, etc.). The Coworker in charge will administer First Aid until the emergency responders arrive on site.
- **Weapon threat:** In the event of a weapon threat (knife, gun, etc.), the first option is to run to a safe place. Once you have arrived at a safe place, call 911. If you are not able to safely run away, then Coworkers will call 911 and support Companions in hiding in place. Coworkers are responsible for ensuring that doors are locked or blocked, that windows and blinds are closed, and that individuals stay away from windows in a non-visible position. Be sure to silence your cell phone or tablet. As a last resort, one can fight the intruder. This is a last resort and may result in injury or death.

- **Violent/threatening situation:** In the event of a violent or threatening situation, there is not a weapon involved. An example could be a disgruntled Coworker comes to the Farm and is threatening physical violence or verbally assaulting individuals. The Coworker in charge, or designate, will call 911 and ensure all Companions and Coworkers are safely out of sight, either moving to a muster point or evacuating the property. Coworkers can use their Mandt System skills to attempt to de-escalate the threatening and potentially violent individual. If it is safe to do so, the Coworker in charge will attempt to run away. If it is not safe to do so, the Coworker in charge will attempt to speak to the individual and distract them until emergency services arrive.
- **If only one Coworker is present:** this Coworker will check all rooms for other Companions.
- **If two Coworkers are present:** one Coworker will be designated in charge and will check the site to ensure no Companion or Coworker is left behind.
- A head tally will be taken to assure all persons are accounted for. Once it is determined to be safe, the House Coordinator or designate will give the “All clear”. Coworkers will support Companions to re-enter the house if needed.
- The House Coordinator or designate will document the drill ensuring using EP19 – Emergency Drill Form.
- All drills and supporting documentation must be dated, signed and initialled for corrective action planning by the Facility Manager for follow up.
- Completed documentation will be archived by the Facility Manager for review and quality improvement planning.

NOTE: For all emergency drills – Coworkers will direct and or assist all individuals who require support to convene at the designated muster area or evacuate the property.

Responsibility of: All Coworkers

Monitored by: Facility Manager

The Ita Wegman Association
of British Columbia

EMERGENCY DRILL FORM

Associated standard 1.H.7 a (1, 2), b, c (1, 2, 3, 4, 5), d

• ☐**ACTUAL**	• ☐**SIMULATED**
• ☐**RESIDENTIAL**	• ☐**DAY PROGRAM**
FIRE ☐ EARTHQUAKE ☐ BOMB THREAT ☐ **NATURAL DISASTER ☐ EMERGENCY EVACUATION ☐ UTILITY FAILURES ☐** **MEDICAL EMERGENCY ☐ WEAPON THREAT ☐ VIOLENT/THREATENING SITUATIONS ☐**	
Date:	Time:
Location of Drill:	
Name of Person Completing Drill:	
Title of Person Completing Drill:	
Signature of Person Completing Drill:	
Describe the situation:	
# of People Participating:	
List any support provided to Companions. Attach a second page if more space is needed:	
Time taken to get everyone safely out of the building, if applicable:	
What challenges came up during the drill? What can be improved?	

Facility Manager to complete			
Areas needing improvement:			
Actions to address the improvements needed:			
Implementation of the actions:			
Necessary education and training of Coworkers:			
Whether the actions taken accomplished the intended results:			
Date of Review:		Signature:	

EP14: POWER FAILURE, GAS LINE AND WATER MAIN EMERGENCIES

Associated standards 1.H.2 (a, b) and 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

STEPS TO FOLLOW DURING A POWER FAILURE

Use flashlights whenever possible.

Turn the thermostat(s) down to minimum and turn off all unnecessary electronic appliances, equipment, and tools.

Do not use charcoal or gas barbecues, camping stoves, outdoor heating equipment, or home generators indoors.

Generators at all Ita Wegman Association residences have been directly installed into the existing electrical system and will switch on after a slight delay.

If the residence is not livable due to cold weather, the Facility Manager or designate will make appropriate arrangements for alternate accommodations. Every residence has an evacuation

plan identifying alternate and approved accommodations in case the residence becomes unlivable.

If leaving the residence, immediately notify the Facility Manager, Quality Assurance Coordinator, or Executive Director. Lock the door and leave a note attached to the outside of the door indicating the names of all Companions and Coworkers who are leaving the building and the address of their destination. The House Manager will include their contact information. Companion families or representatives will be notified of the relocation and provided with the destination location and House Manager contact information.

The House Coordinator and Facility Manager will ensure a Critical Incident Report is completed immediately or within 24 hours.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director

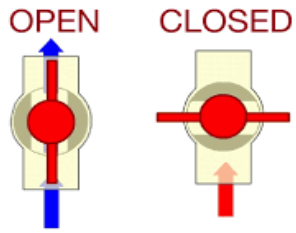
GAS LINE OR WATER MAIN EMERGENCY

Associated standard 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

IF YOU SMELL GAS OR SUSPECT A GAS LEAK, CALL THE BC GAS 24-HOUR EMERGENCY LINE AT 1.800.663.9911.

Valves: Open and Closed Positions

Valves are open when the valve handle is aligned with the pipe it controls (see below).
Valves are closed when the valve handle is perpendicular to the pipe that it is controlling (see below):



Inside the valve is a ball with a large hole in it. When the handle is turned, the ball allows liquid to pass through it.

WATER MAIN EMERGENCIES AND LEAKS

HELIOS AND CORWYN HOUSE:

To turn off the main water line to both Helios and Corwyn (including the laundry house). Location:

The main water line is located in the utility room behind the laundry room (accessed by going through the laundry room, out to the porch, and through the door on the left). Turn the water valve to the "off" position.

Helios House Water Valve only:
The water main valve is located in the office.

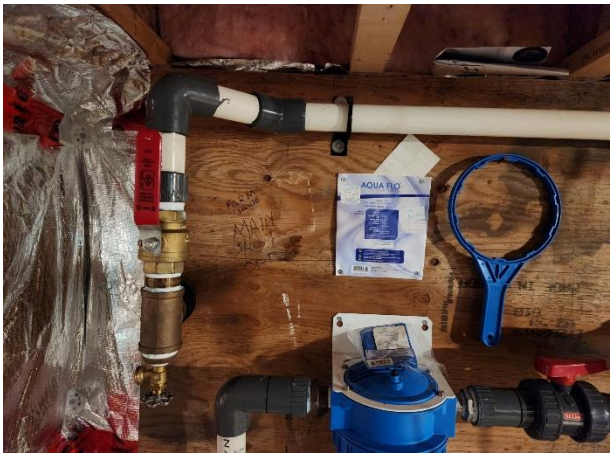
Corwyn House Water Valve only:
The water main valve is located in the utility closet in the living room.

The Big House Water Valve:

The water main valve is located in the room at the bottom of the stairs near the administration office (go down the stairs and through the door directly to your right).

The Farmhouse/Deerholme House Water Valve:

The water main valve is located under the Farmhouse in the basement, all the way to the back and then to the left.



The Well Water Valve:

The water main valve is located in the pumphouse at the well.

GAS LINE LEAKS

When to shut off propane?

Turn the propane gas off at the site if you smell propane gas. Propane gas has a strong odour of rotten eggs.

- Do not use matches or any open flame. Extinguish cigarettes.
- Do not operate electrical switches such as light switches.
- Leave a door or window open.
- Exit your home immediately.

Helios, Corwyn, and The Big House Propane Shut-off:

- **The kitchen propane tank for** Helios House is located outside of the kitchen/dining room exit (which side is it located on? On the left or right-hand side?).
- The kitchen propane tank for Corwyn House is located outside of the kitchen exit (which side is it located on? On the left or right-hand side?).
- The Big House propane tank is located outside on the left-hand side of the secondary kitchen exit (Companion-use kitchen on the main floor, south-facing side of the house).

To turn *OFF* the gas supply, turn the knob (located on the top of the tank under the cover) to the *LEFT* as far as it will go (see below):

To note: The Farmhouse and Deerholme do not use propane as a heat or cooking source.

Helios & Corwyn generator propane tank shut-off:

- **The generator propane tank for Helios and Corwyn Houses** is located behind the laundry house.
- **To turn *OFF* the gas supply, turn the knob (located on the top of the tank under the cover) to the *LEFT* as far as it will go (see below):**

GENERAL NOTES:

***If you smell propane, contact the Maintenance Manager, the Facility Manager, or a House Coordinator for assistance. ***

Water and gas emergencies can include, but are not limited to: earthquake, fire, and natural disasters such as floods. .

If leaving the residence, immediately notify the Facility Manager, Quality Assurance Coordinator, or Executive Director. Lock the door and leave a note attached to the outside of the door indicating the names of all Companions and Coworkers who are leaving the building and the address of their destination. The House Coordinator will provide their contact information. Companion families or representatives will be notified of the relocation and provided with the destination location and House Coordinator contact information.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Maintenance Manager

EP15: END OF LIFE

Associated standards 1.H.2 (a, b) - 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

End of life planning and response is governed by Community Living British Columbia (CLBC)'s End of Life policy (linked here).

Glenora Farm works with Community Living British Columbia (CLBC), individuals, families and other support network members involved in end-of-life care and service planning to ensure integrated seamless quality care and support is provided in the best interest of the Companion and their family and/or support network coping with end-of-life needs.

Service providers are required to report all deaths of Companions being supported in a CLBC-funded service to an Analyst at CLBC. Reporting requirements are outlined in CLBC's End Of Life policy and Glenora Farm's Critical Incident policy and are a condition of Glenora Farm's contract with CLBC.

RESPONSIBILITIES

The Glenora Farm Facility Manager will:

- Immediately notify a CLBC Analyst about all deaths of individuals receiving any CLBC-funded services, whether the death occurred at a program location or elsewhere. If a death occurs outside of CLBC working hours, the Facility Manager will notify the Ministry of Children and Family Development (MCFD) After Hours.
- Document and submit reports for all deaths of individuals who were receiving CLBC-funded services.
- Glenora Farm will immediately notify family members and legal decision makers, or confirm that they have been notified, about the death of an individual residing on Glenora Farm.
- Work with Glenora Farm Coworkers, family members, or Public Guardian and Trustees to determine who should assume responsibilities following the death of a Companion, such as making funeral arrangements. Glenora Farm will work with the Companion's support system to determine who should take the lead in completing tasks.

PROCEDURES

End-of-life care

The Glenora Farm Facility Manager collaborates with CLBC facilitators and analysts, individuals, families and/or support network members, legal representatives, and health care providers involved in end-of-life care and service planning.

The Glenora Farm Facility Manager confirms with CLBC when an individual has been deemed palliative by a physician, and ensures that end-of-life care and service planning is occurring.

Notification of sudden and unexpected deaths of individuals

Glenora Farm immediately contacts 911 for an ambulance and local police when an unnatural, sudden and unexpected, unexplained or unattended death of an individual occurred while attending Glenora Farm programming. In situations where the staff is uncertain about whether a death is considered unnatural, sudden and unexpected, unexplained or unattended, 911 should be called immediately. They can then advise if the ambulance and local police need to respond.

When a planned, expected, and natural death occurs at home in accordance with the Joint Protocol for Expected/Planned Home Deaths in British Columbia, the ambulance and the police do not need to be called.

Reporting of deaths of individuals who were receiving CLBC-funded residential services or when their death occurred while they were participating in a CLBC-funded service

Within 24 hours of a death, the Glenora Farm Facility Manager completes the service provider section of the CLBC Mortality Information Summary form and submits it to the CLBC liaison analyst. When the death occurs on a weekend or a statutory holiday, the CLBC Mortality Information Summary form is submitted by 8:30 a.m. on the next business day.

The Glenora Farm Facility Manager submits a critical incident report as outlined in the Critical Incidents Policy.

Investigations and reviews of deaths of individuals who received CLBC-funded services

Glenora Farm complies with requests:

• For information from the Provincial Clinical Consultant and Provincial Medical Consultant, and

• From law enforcement officers or agencies that have regulatory and/or investigative mandated responsibilities such as the BC Coroners Service to assist with a formal investigation and review.

Advance care planning

As individuals age, Glenora Farm Facility Manager and Quality Assurance Coordinator work collaboratively with the individual and their support network to address age-related needs and

advanced planning. When an individual is deemed palliative by a physician, Glenora Farm will adhere to any plans created. Individuals are considered capable in making their own health care decisions unless deemed incapable by a health care provider, or if full decision making is governed by a Committee of the Person.

As individuals age, Glenora Farm Coworkers discuss changing needs in the annual ISP meeting. If the family of an individual supported is not able to assist in advanced planning, Glenora Farm Coworkers or a CLBC Facilitator will support planning efforts.

Notification

Family members of an individual residing at Glenora Farm, who is deemed palliative by a physician, should be notified that the Companion has been deemed palliative unless the circumstances indicate that the Companion does not wish to have contact with their family. A discussion can occur with the Companion about how they would like their family to be informed. Following a death, family members of a Companion who resided at Glenora Farm are notified in a manner that is sensitive to their loss and reflects the type of relationship they have had with their deceased family member and Glenora Farm.

Glenora Farm is responsible for notifying any additional service providers or government agencies that have provided services to the deceased individual. The CLBC Analyst can support Glenora Farm in ensuring all other CLBC-contracted service providers and government agencies have been informed.

Bereavement Support

The Facility Manager may contact CLBC Facilitators or Analysts, health care providers, or community agencies to request information about which bereavement community resources are available for family members, support systems members, friends, other Companions, and Coworkers.

DEFINITIONS

Definitions can be found in CLBC's End of Life policy (linked here).

Responsibility of: Care Group, Core Group, Facility Manager, House Coordinators

Monitored by: Facility Manager, Executive Group

The Ita Wegman Association
of British Columbia

FINANCIAL POLICIES (FP):

FP1: FINANCIAL ACCOUNTABILITY

Associated standard 1.F.1 (a, b)

POLICY

The Ita Wegman Association keeps complete and accurate records of accounts and financial transactions to monitor purchasing, accounts receivable, cash billings, and cost allocations; measure progress; identify strengths and weaknesses; and plan for future needs.

Financial records assist in reporting to all internal and external stakeholders and government agencies. All funds are recorded through an established accounting system using accounting policies that are conservative in nature and adhere to generally accepted accounting principles (GAAP).

PROCEDURES

- Overseen by the Executive Director, an external accounting firm, and the Finance Group, the Bookkeeper records all financial transactions in the accounting system.
- The Bookkeeper maintains records, receipts, invoices, timesheets, cheque stubs, bank statements, and payroll statements.
- Monthly and upon request of the Executive Director, Accountant, or the Finance Group, the Bookkeeper prepares financial comparative statements.
- The Executive Director, Finance Group, Treasurer, and Board of Directors review cash flow statements and reports every two months to examine trends and any identified issues. Planning is then implemented to address any discrepancies or concerns.
- The accounting system is monitored by the Executive Director and Finance Group to ensure that it functions correctly.
- An external Certified Accountant examines the finances and records of the organization and provides a written Annual Financial Statement at fiscal year-end for the prior fiscal year, April 1 to March 31. This examination acts as the Ita Wegman Association's annual review/audit and is presented at the Annual General Meeting.

The Ita Wegman Association
of British Columbia

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Group, Executive Group, and Board of Directors

FP2: FINANCIAL INSURANCE

Associated standard 1.F.1 (a, b)

POLICY

The Ita Wegman Association purchases insurance to limit risk related to all Association operational needs and to ensure and maintain the safety and security of its Companions, Coworkers, and Board of Directors.

SCOPE OF INSURANCE COVERAGE

Insurance includes vehicle, to the maximum liability coverage available through commercial coverage for The Ita Wegman Association in the event of occurrences related to public liability, directors and officers' liability, property loss or damage, and Coworker fidelity.

PROCEDURES

1. PURCHASE, REVIEW, AND MAINTENANCE OF INSURANCE

- The Executive Director purchases and maintains up-to-date insurance policies for the organization, all organization property, and Coworkers.
- The Executive Director, Finance Group, and Board of Directors review insurance policies each year and make changes or adjustments as necessary to ensure appropriate and adequate coverage is maintained.

2. CLAIMS AGAINST POLICIES

- All appropriate insurance claims must be dealt with expeditiously.
- If a situation occurs that is or has the potential to result in a claim against The Ita Wegman Association insurance, it must be reported immediately to the Executive Group and Board of Directors.

- The Executive Director, in consultation with the Executive Group and Board of Directors, will review the situation and determine if it warrants moving forward to make a claim. If further information is required, the Executive Director will consult with the Ita Wegman Association insurance representative when appropriate for clarification and increased understanding.

Responsibility of: Executive Director, Finance Group

Monitored by: Executive Group, Board of Directors

FP3: INVESTMENT OF FUNDS

Associated standard 1.F.5 a, b (1, 2)

POLICY

Surplus funds that may accumulate at the end of each fiscal year are an asset that can be invested to increase the solvency and financial security of The Ita Wegman Association. The Executive Director, in consultation with the Finance Group, Executive Group, and Board of Directors, determines the type and amount of investment and considers the investment of only those funds that are in excess of those required for maintenance of the normal daily operations of the organization. The investment must be guaranteed and protected by Canadian law (e.g. Guaranteed Investment Certificates - GICs).

PROCEDURES

- The Executive Director, in consultation with the Finance Group, reviews the financial position of the organization on an annual basis or as needed to identify funds available for investment. At least annually, funds that have already been invested are reviewed to determine the success of the investment and/or to adjust the investment.
- The Ita Wegman Association receives financial advice and consultation from the accountant/auditor for the Association and the bank that holds the Association's accounts, loan arrangements, and investments.

- Based on advice and consultation, the Finance Group, Executive Group, and Board of Directors determine the amount to be invested and the type of investment that will maximize the return without risking the funds identified.

Responsibility of: Executive Director

Monitored by: Finance Group, Executive Group, and Board of Directors

FP4: CHEQUE SIGNING AUTHORITY

Associated standard 1.F.5 a, b (1, 2)

POLICY

The Ita Wegman Association safeguards access to funds and monitors spending through the assignment of approved signing officers. Signing officers are responsible and accountable for all purchases made and expenses paid by cheques, e-transfer, and wire transfer on behalf of the Association.

PROCEDURES

To ensure that the appropriate approvals are in place for the necessary expenditure of funds, the following protocol is maintained:

BANK ACCOUNT

- Signing officers of the Association's bank accounts include the Executive Director, Bookkeeper, Board members, and other Leadership Team Members as determined.
- All Ita Wegman Association bank accounts require the signatures of two signing officers.

Responsibility of: Executive Director

Monitored by: Finance Group, Executive Group, and Board of Directors

The Ita Wegman Association
of British Columbia

FP5: BANKING AND PETTY CASH

Associated standard 1.F.5 a, b (1, 2)

POLICY

The Ita Wegman Association protects the safety and security of all funds and establishes a system of accessing needed funds through the formation of business accounts and other banking agreements with the following financial institution, CIBC.

All financial institutions must be licensed and regulated by the federal government. All banking relating to The Ita Wegman Association in general, program, and payroll accounts is undertaken at a financial institution as established by the Executive Director, Finance Group, and Board of Directors.

PROCEDURES

- The Executive Director, in collaboration with the Finance Group and Board of Directors, negotiates banking arrangements with the financial institution.
- The Executive Director and one other delegated signatory sign documents related to the banking arrangement with the financial institution on behalf of The Ita Wegman Association.
- The Executive Director, in collaboration with the Finance Group and Board of Directors, coordinates the establishment of the appropriate accounts.
- The bank holds up-to-date records of the signing officers for general, program, and payroll accounts.
- Signing officers include the Executive Director, Bookkeeper, and three other Board and/or Leadership Team Members.

PETTY CASH MANAGEMENT

The following procedures govern the authorization, custody, use, reconciliation, and replenishment of the Association's petty cash fund. This ensures that petty cash is used only for legitimate Association business expenses and that appropriate financial controls are maintained.

Scope

This policy applies to all Coworkers, contractors, and authorized volunteers who request, approve, administer, or reconcile petty cash transactions on behalf of the Association.

Petty Cash Fund

The Association shall maintain a petty cash fund for small, infrequent business expenses that are not practical to pay through normal purchasing systems or accounts payable processes.

The Executive Director, Bookkeeper, and Finance Group are designated to establish and authorize the petty cash fund amounts and policy review.

Location and Storage of Petty Cash

Petty cash funds shall be maintained in a locked cash box or secure cabinet. The cash box shall be stored in a secure location with limited access.

At each location, one Coworker is designated as the Petty Cash Custodian (PCC).

The PCC is responsible for safeguarding the fund, maintaining records, and ensuring compliance with this policy.

The PCC may delegate temporary responsibility only with approval from the ED or Bookkeeper and documented transfer of accountability.

Authorized Access

Access to petty cash shall be limited to:

- The designated Petty Cash Custodian.
- The Executive Director and Bookkeeper.
- The Finance Group or Board Treasurer, as required for oversight.
- Individual Coworkers specifically authorized by management for audit or reconciliation purposes.

No other individual may remove cash from the petty cash fund.

Authorized Uses

Petty cash may only be used for legitimate Association business expenses that require immediate payment, including:

- Office supplies.
- Minor maintenance supplies.
- Postage and courier expenses.
- Parking fees and transit expenses for Association business.
- Purchases from Facebook Marketplace or private sellers.
- Emergency purchases.
- Small hospitality expenses approved by the ED.

Individual petty cash transactions should normally not exceed $200, unless otherwise approved by the ED.

Prohibited Uses

Petty cash shall not be used for:

- Personal expenses.
- Payroll or wages.
- Cash advances or Coworker loans.
- Travel advances.
- Alcohol (unless specifically authorized for an Association event).
- Purchases requiring formal procurement or competitive quotations.
- Reimbursements without original supporting documentation.

Requesting Petty Cash

Coworkers requesting petty cash must:

- Complete the Petty Cash form.

- Provide the purpose of the expenditure.
- Obtain required supervisory approval before receiving funds, unless the purchase is an emergency.

Receipts and Documentation

Every petty cash transaction must include:

- Original receipt or invoice.
- Date of purchase.
- Vendor name.
- Description of goods or services.
- Amount paid.
- Applicable accounting or expense code.

If a receipt is unavailable, a written explanation must be submitted and approved by the ED. Repeated missing receipts may result in denial of reimbursement.

Reconciliation

The ED or designate and the Bookkeeper shall reconcile the petty cash fund:

- At least monthly.
- Before requesting replenishment.
- Whenever custody changes.
- At any time requested by the Finance or Executive Groups.

The reconciliation must verify that:

- Cash on hand + Total receipts and vouchers = Authorized petty cash fund balance.

Any discrepancies must be investigated promptly and reported to the ED or Bookkeeper.

Replenishment

When petty cash requires replenishment:

- A request shall be issued to the ED and/or Bookkeeper
- The ED and Bookkeeper will review the reconciliation.
- The ED and/or Bookkeeper will approve the replenishment.
- The replenishment amount shall equal the total documented expenditures.

Oversight and Audits

The petty cash fund shall be subject to:

- Periodic unannounced cash counts.
- Internal reviews.

The Association reserves the right to investigate any discrepancies or irregularities.

Petty Cash Sources

The Association shall maintain a current register identifying all petty cash funds under its control.

The register should include:

- Name or location of the petty cash fund.
- Department or office responsible.
- Authorized fund amount.
- Assigned Petty Cash Custodian.
- Date established.
- Date of last reconciliation.
- Current balance.
- Last replenishment date.

If the Association maintains multiple petty cash funds, each fund shall be separately tracked and reconciled.

Separation of Duties/Responsibilities

The Petty Cash Custodian should not approve their own reimbursements.

The individual reconciling the petty cash fund should not be the same individual approving replenishments.

Reporting Lost or Missing Funds

Any suspected theft, loss, fraud, or unexplained shortage involving petty cash must be reported immediately to the ED to be managed and documented. The Association will investigate all discrepancies and take appropriate corrective action.

Policy Violations

Failure to comply with this policy may result in:

- Denial of reimbursement.
- Suspension of petty cash privileges.
- Disciplinary action.
- Recovery of improperly used funds.
- Referral to law enforcement where appropriate.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Group and Executive Group

FP6: FINANCIAL REPORTING

Associated standards 1.F.3 (a, b (1, 2, 3), c - 1.F.4 a (1, 2, 3 (a, b, c, d), 4 (a, b, c, d), b, c, d and 1.F.5 a, b (1, 2)

POLICY

To support fiscally sound financial practices, financial reports are completed for each month by the Bookkeeper upon request of the Executive Director / Accountant and reviewed by the Finance Group and/or Board of Directors.

PROCEDURES

- The Bookkeeper compiles all information from bank statements, billing submission, checks stubs and receipts, and timesheet and payroll reports and any other necessary information to create monthly statements of income and expenditure for the organization, bank balances, assets and liabilities and all other financial records.
- Upon request, the Bookkeeper prepares and provides to the Executive Director, Finance Group, Executive Group, and/or Board of Directors monthly comparative statements for all programs and services including the operating and capital project budgets. These statements detail the spending patterns in all programs and projects for that month, the current fiscal year to date, and previous fiscal years for total comparative information.

Responsibility of: Executive Director

Monitored by: Finance Group, Executive Group, and Board of Directors

FP7: EXPENSE TRACKING

Associated standards 1.F.4 a (1, 2, 3 (a, b, c, d), 4 (a, b, c, d), b, c, d, and 1.F.5 a, b (1, 2)

POLICY

The Ita Wegman Association keeps complete and accurate records of accounts and financial transactions. The Ita Wegman Association monitors spending, measures progress, identifies strengths and weaknesses, and plans for the future. Expense tracking procedures form part of the overall accounting system for The Ita Wegman Association and are developed and followed as part of the accounting continuum of The Ita Wegman Association.

All expense tracking procedures must follow approved accounting procedures established within The Ita Wegman Association's accounting system.

PROCEDURES

All monies spent through the issuing of an Ita Wegman Association payment must have the approval of the Executive Director and must be supported by receipts for the total purchase.

All approved expenses, paid by a Coworker's own money, are reimbursed following the submission of an expense claim form and associated receipts.

An approved expense is one that is already stated in a program's budget or a Coworker's contract or business contract. All expense requests must have the Executive Director's approval before being granted.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Board of Directors and Finance Committee

FP8: BUDGET REVIEWS

Associated standard 1.F.3 (a, b (1, 2, 3), c

POLICY

Annually, at year-end, the Ita Wegman Association hires a chartered accountant to examine the financial records and reports of the Association to verify that the figures in the financial reports are relevant, accurate, and complete.

The general focus is to ensure the reported financial statements fairly represent the condition of The Ita Wegman Association and help to ensure financial solvency and accountability.

The results of the review are submitted to the provincial government, the federal government (Revenue Canada), and external stakeholders, where applicable.

PROCEDURES

- Annually, the Ita Wegman Association appoints a registered firm of Chartered Accountants to complete a review of financial statements for the fiscal year.

- The Bookkeeper and Accountant prepares the books, statements, contracts, receipts, and all other necessary information for the annual review.
- The Certified General Accountant meets with the Executive Director, Bookkeeper, Accountant, and/or Board Treasurer (as required) to complete a thorough review of finances.
- The Certified General Accountant signs copies of the Notice of Reader Review before their submission to government bodies.
- The Certified General Accountant prepares a management letter indicating the Reader Review has been completed, and the organization is financially solvent.
- Where applicable, copies of the Reader Review are forwarded to the bank, funder(s), external stakeholders, internal stakeholders, and provincial/federal government authorities as applicable.

CAPITAL PROJECT BUDGET

- The policy, procedures, and monitoring listed above for the operating budget also apply to the Capital Projects Budget.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Group and Board of Directors

OPERATING RESERVES

Associated standard 1.F.5 a, b (1, 2)

POLICY

The Ita Wegman Association will set aside cash reserves to provide a cushion for specific planned or unplanned future needs. This will be a separate bank account: “Operating Reserves”. The Operating Reserve is a designated fund set aside by action of the Board of Directors. The Operating Reserve intends to ensure the stability of the mission, programs, and operations of the Association.

Operating Reserves are different from restricted funds. Restricted funds are grants and contributions that have been received for specific programs or projects. These funds are "restricted" for use according to the grant agreement or donor's instructions. A separate restricted bank account is maintained. Operating Reserves, on the other hand, are "unrestricted" funds that can be used for specific purposes with Board approval. The target minimum operating reserve fund for the Association is three (3) months of average operating costs.

PROCEDURE

FUNDING OF THE OPERATING RESERVE

The operating reserve will be funded with:

- Funds that have been received, but some or all will need to be repaid. E.g., government funding such as CEBA (Canada Emergency Business Account) $40,000, of which $30,000 will need to be repaid.
- 10% of all general donations received.
- The Board of Directors may from time to time direct that a specific source of revenue be set aside for operating reserves. Examples may include one-time gifts or bequests, special grants, or special appeals.

DISBURSEMENTS FROM THE OPERATING RESERVE

To use the operating reserves, a written request would be submitted to the Finance Committee of the Board of Directors. The request will include the analysis and determination of the use of funds and plans for replenishment. The Operating Reserve is intended to provide an internal source of funds for situations such as:

- Purchase price or cost of new construction
- Equipment replacement or uninsured losses over $1,000
- Any initial modifications or auxiliary apparatus that are necessary to make an item of capital equipment usable for its acquired purpose
- The Reserve may also be used for one-time, nonrecurring expenses that will build long-term capacity, such as Coworker and Contractor development, research and development, and investment in infrastructure or equipment.

Operating Reserves are not intended to replace a permanent loss of funds or eliminate an ongoing budget gap, such as:

- General repairs and maintenance.
- Operating costs such as food, supplies, wages, or utilities.
- Separate warranty costs or maintenance contracts.
- Demolishing or dismantling costs.
- Spare or replacement parts.

It is the intention for Operating Reserves to be used and replenished within a reasonably short period of time.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Group and Board of Directors

FP9: BUDGET PROCESS REVIEW

Associated standard 1.F.3 (a, b (1, 2, 3), c

INTRODUCTION

Programs and services provided by The Ita Wegman Association function within a budget. An annual budget is set following an annual budget and program review. The Ita Wegman Association of BC's annual budget is reviewed on a monthly basis by the Finance Group, which can forecast income (based on confirmed and projected income) and expenses (based on anticipated program and operational expenses). The budget is used to guide and monitor current spending patterns and to assist in future financial planning for the association.

POLICY

The budgetary system links program functions and activities to the costs necessary for their support. The Executive Director, Bookkeeper, Finance Group, and Board of Directors establish an appropriate budget for all support and program needs. The Board of Directors approves the

budget on an annual basis. The Executive Director and Finance Group review the budget regularly (at a minimum, monthly for the Finance Group and every two months for the Board), recommending adjustments and alterations as needed to the Board of Directors for approval.

PROCEDURES

1. DEVELOPING THE BUDGET

- The Executive Director, Bookkeeper, and Finance Group prepare an annual budget in accordance with generally accepted accounting principles (GAAP), in a format containing projected sources of income and a forecast of expenditures.
- Budgeting in any fiscal year or the remaining part of any fiscal year shall not deviate materially from current policies (see financial policies) or risk financial stability. Accordingly, the Executive Director may not cause, or allow budgeting that: contains too little information to enable credible projection of revenue and expenses; contains too little information to enable separation of capital and operational items, cash flow, and disclosure of planning assumptions; plans the expenditure in any fiscal year of more funds than are conservatively projected to be received in that period; endangers the fiscal soundness of future years; or ignores the building of organizational capability sufficient to achieve outcomes in future years.
- The Board of Directors examines the budget every two months or on an as-needed basis and approves the budget on an annual basis.

2. MONITORING THE BUDGET

- The Executive Director requests that the Bookkeeper prepare regular comparative statements that show actual expenditures compared to budget amounts for each forecasted expense category, along with total income received and total expenses incurred (Profit and Loss Statement).
- The Finance Group reviews spending levels and year-to-date balances at least monthly.
- The Board of Directors reviews spending levels and year-to-date balances every two months or as needed.
- The Executive Director will make adjustments as necessary following consultation with the Finance Group and/or Board of Directors and present an adjusted budget at their next scheduled meeting.

CAPITAL PROJECT BUDGET

- The policy, procedures, and monitoring listed above for the operating budget also apply to the Capital Projects Budget.

OPERATING RESERVE

- The policy, procedures, and monitoring listed above for the operating budget also apply to the Operating Reserve Budget.

Responsibility of the Executive Director, Bookkeeper, and Finance Group

Monitored by: Executive Director, Finance Group, and Board of Directors

FP10: COWORKER AND CONTRACTOR EXPENSES

Associated standard 1.F.5 a, b (1, 2)

POLICY

The Ita Wegman Association ensures contractors are reimbursed for approved expenses

where the expenses have been incurred with the prior approval of the Executive Director with the consultation of the Finance Group, and reimbursement is for the actual cost, supported by receipts and comprehensive invoicing.

PROCEDURES

Reimbursement

- Contractors are reimbursed for approved expenses upon submission of the corresponding

Expense claim form, receipts, and invoices.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Group and Executive Group

FP11: COMPANION FUNDS MANAGEMENT

Associated standard 2.A.8 a, b(1,2), c(1,2), d, e

POLICY

When a Companion requires assistance with managing their funds, the Ita Wegman Association ensures the Companion's funds are managed ethically and reflect the Companion's requests and expressed preferences. All financial activity is properly documented/recorded, and funds are available to the Companion as needed or requested.

Companions and/or their designated representatives must give consent in writing to The Ita Wegman Association to manage Companion funds (***FP12 - Permission to Manage Companion Funds***). A completed consent to manage funds assertion is required for all Companions at Glenora Farm.

PURPOSE

To ensure Companion funds are handled in an ethical, safe, secure, and appropriate manner, and to provide clear guidelines for Coworkers when either handling Companion funds or assisting a Companion with their fund management.

PROCEDURE

There are two categories of fund management available to residentially supported Companions. Eligibility for Category 2 will be determined by Glenora Farm based on a combination of GSA designation and demonstrated support need.

Category 1 - Companions who manage their funds independently, with no assistance from Coworkers. In this instance, there are no logs kept, and the Companion handles every aspect of fund management on their own (banking, spending, cashing cheques, withdrawing from an ATM, etc.).

Associated Policy:
FP16 Companion Purchase Order Form - Cash, Debit, Credit

Category 2 - Companions who require full assistance to manage their funds. In this instance, Coworkers monitor, document, and reconcile all financial transactions, ensuring the appropriate logs (listed below) are maintained, up to date, and include all associated records. Coworkers are responsible for ensuring the procedures below are followed. The House Manager handles and administers all cash, debit, and/or credit cards to ensure oversight of all purchases made.

Appropriate documentation (receipts, transaction records, bank and credit card statements) is collected, retained, and reconciled monthly by the House Manager and semi-annually by the Executive Director or Bookkeeper. If there is a desire to have more financial independence, a family representative can purchase a prepaid gift/credit card for the person they support. If a Companion has access to a prepaid credit card or gift card, transactions made on this card are not reconciled by Glenora Farm Coworkers. Family representatives are responsible for discussing purchases made on prepaid credit cards or gift cards with Companions.

Associated Policies:
FP14 Companion's Fund Log - Bank Account / Debit Card

FP15 Companion's Fund Log - Secured Cash Funds on Site

CATEGORY #1: PROCEDURE FOR WHEN COMPANIONS MANAGE THEIR FUNDS INDEPENDENTLY WITH NO ASSISTANCE FROM A COWORKER:

Companion Purchase Order Form - Cash, Debit, Credit:

- Companion places a purchase order with a House Manager using ***FP16 - Companion Purchase Order Form - Cash, Debit, Credit.*** The Companion gives the House Manager cash, a debit, or a credit card to make the purchase.
- The House Manager or designated Coworker fulfills the purchase order.
- The House Manager completes the purchase order form ***FP16 - Companion Purchase Order Form - Cash, Debit, Credit,*** indicating the item purchased, the amount of the purchase, and any change given to the Companion. The Companion signs the ***FP16 - Companion Purchase Order Form - Cash, Debit, Credit*** to indicate that they have received the purchased item(s) and change has been given to the Companion (if applicable).
- A copy of the receipt is attached to the purchase order form, and the original receipt is given to the Companion.

General Procedures

- Companions may be financially independent, but require assistance when making purchases, payments, or withdrawals due to challenges with dexterity, fine motor tasks, vision impairment, etc. A designated Coworker can support the Companion with these tasks, but is not responsible for any oversight.
- Companions designated as Category 1 have full independence in their purchases. Glenora Farm Coworkers will provide feedback and suggestions regarding appropriate purchases, but are not responsible for approving or opposing Companion purchases. Companions have the freedom to choose and make informed purchase decisions based on the quality of life framework. Conversations regarding purchase preferences will be held between Companions and their family representative(s). It is not appropriate for Glenora Farm Coworkers to limit Companion rights and the freedom to choose how their funds are spent.
- Glenora Farm Coworkers will work with experts (ie., family doctors, dentists, counsellors, etc.) to provide feedback to family representatives on whether Companion purchase choices are harming their health. Glenora Farm Coworkers are not medical professionals and are not qualified to make these decisions/statements.
- Companions with therapeutic diets will receive encouragement from Coworkers to make purchases that align with their therapeutic diet. Glenora Farm Coworkers are not

responsible for enforcing therapeutic diets unless there is an imminent and significant risk to the Companion's safety and well-being.

CATEGORY #2: PROCEDURE WHEN THE COMPANION REQUIRES FULL ASSISTANCE TO MANAGE FUNDS/FINANCES:

Bank account/debit card transactions:

- Any bank account withdrawal, ATM withdrawal, or debit card transaction must be recorded in ***FP14 Companion's Fund Log - Bank Account / Debit Card***.
- The bank withdrawal, deposit, or purchase receipts must be kept in an envelope and the envelope attached to the Companion's ***FP14 Fund Log - Bank Account / Debit Card*** when the Fund Log is completed and reconciled by the House Manager at the end of the month.
- Upon receiving the monthly bank statements, the log must be reconciled with the bank statement, initialed by the House Manager, and stapled to the log. Any discrepancies or errors will be followed up on immediately.
- House Managers communicate reconciliation information to the family Representative on a monthly basis.
- It is the responsibility of family representatives or Public Guardians/Trustees to ensure that monthly bank and credit card statements are provided to House Managers. Providing monthly account statements to the House Manager is a condition of financial support in Category 2. If monthly financial statements are not provided regularly, Glenora Farm will not provide full assistance to manage Companion funds/finances, and this task will become the responsibility of the family representative or Public Guardian/Trustee.
- When it is determined that a Companion's cash funds require replenishing, the House Manager will assist the Companion in withdrawing funds from the bank or ATM.
- Funds taken from the Companion's bank account will be recorded in the ***FP14 Companion's Fund Log - Bank Account / Debit Card*** and subtracted from the last available amount. The amount will be added to the cash on hand column on ***FP15 - Companion's Fund Log - Secured Cash Funds on Site*** (see ***"Secured Cash on site"*** below).

- Companions in category 2 must have the name of the House Manager approved on their account as a support person. Glenora Farm Coworkers will never hold joint bank accounts with Companions.
- If the Companion does not hold a bank account, the House Manager will work with the Companion Representative to ensure the House Manager has access to the Companion's funds in cash.

Secured cash on site:

- The Ita Wegman Association requests that Companions hold a maximum of $500 in cash on hand. If a Companion requires cash on hand over $500, it must be communicated to the Quality Assurance Coordinator or the Executive Director, and a reason must be stated. Companions and Companion Representatives will maximize their engagement with electronic banking.
- All Companion cash is clearly labelled with the Companion's name and kept in a secure and locked location. Cash may be kept in the Companion's wallet, marked bag, or container in a secure and locked location.
- Companions in Category #2 must have their cash held by a House Manager or a designate approved by the Executive Director, Facility Manager or Quality Assurance Coordinator. The Coworker must be aware of all purchases and ensure receipts are acquired for all transactions.
- When Companion funds are taken out of their bank account and transferred to a secure and locked location, House Managers will note a withdrawal from the bank account in the "Out" column on ***FP14 Fund Log - Bank Account / Debit Card***) and subtract the amount of cash withdrawn from the last recorded balance. The House Manager will initial beside each entry.
- When funds have been taken out of their bank account, the House Manager will note cash coming into the secure and locked location in the "In" column on ***FP15 - Companion's Fund Log - Secured Cash Funds on Site*** and add the amount withdrawn to the last recorded balance. The House Manager will initial beside each entry. The House Manager will note the type of transaction under the "Description" heading (i.e. "withdrawal for wallet", "cash from bank account" or something similar).

- All cash purchases need to be tracked on ***FP15 - Companion's Fund Log - Secured Cash Funds on Site,*** and the associated receipts need to be retained and reconciled monthly by the House Manager. As part of the reconciliation, the House Manager will verify the actual amount of cash against the last recorded amount in ***FP15 - Companion's Fund Log - Secured Cash Funds on Site***. The House Manager will note the type of transaction under the "Description" heading (i.e. "withdrawal for wallet", "cash from bank account" or something similar).
- Every month, the House Manager reviews ***FP15 - Companion's Fund Log - Secured Cash Funds on Site***, and the amount of cash available on hand and the ending balance should match.
- Any cash on hand will be returned to the Companion and/or family/representative upon discharge from Glenora Farm programming. Any Coworker listed as having the ability to support the Companion with banking transactions needs to be removed from the account upon discharge.

GENERAL REQUIREMENTS:

Individual choice and autonomy

- Glenora Farm Coworkers will work with experts (ie. family doctors, dentists, counsellors, etc.) to provide feedback to family representatives on whether Companion purchase choices are harming their health. Glenora Farm Coworkers are not medical professionals and are not qualified to make these decisions/statements.
- Companions with therapeutic diets will receive encouragement from Coworkers to make purchases that align with their therapeutic diet. Glenora Farm Coworkers are not responsible for enforcing therapeutic diets unless there is an imminent and significant risk to the Companion's safety and well-being.

Financial records

- The "Companion's Fund Logs" will be the only forms used to record Companion financial receipts and expenditures from all sources.
- The "Companion's Funds Logs" will be kept in the Companion's file under "Financial" at the Companion's residence. At the end of the calendar year, the Companion's fund logs are moved from the residential file to the administration office file.

- All financial records will be kept up to date and reconciled monthly by the House Manager and semi-annually by the Executive Director and/or Bookkeeper. If discrepancies cannot be resolved by the House Manager, the House Manager must work with the Executive Director and/or Bookkeeper for support.
- All receipts must be kept with all applicable information recorded on them, including the date, item purchased, retailer, and the amount spent.
- Companions and their family representatives must have access to their financial information upon request (ie., understanding how much money they have available, etc.).

Discrepancies

- Any shortage in Companion funds needs to be reported to the Executive Director immediately after the shortage is identified.
- Any issues or concerns arising from the management of Companion finances will be reviewed and investigated immediately by the Executive Director to resolve any discrepancies.
- Where necessary, corrective action will be implemented to ensure issues or concerns are limited in the future.
- Where necessary, corrective action will be taken if it is determined through an investigation that a Coworker has violated the code of ethics or IWA policies associated with Companion finances.

Training

- Each Coworker will be provided with an orientation to this policy.

Public Guardian and Trustee

- When dealing with funds from the Public Guardian/Trustee or another funding source, all the above-listed policies and procedures must be adhered to.

Gifts

- At times, Companions may receive financial gifts from family members or friends. If the gift is given directly to the Coworker, the funds can be kept and recorded as cash on hand or deposited into the Companion's bank account. If the financial gift is not given directly to the Coworker, the Coworker does not have control over the gift and will not know how much money has been given to the Companion, and the Coworker is not responsible for reconciling the unknown amount.

Financial designee in the House Manager's absence

- All Companion funds will be stored in a locked and secure area with only the House Manager having access. If funds are needed for an outing and the House Manager will not be present at the outing, the House Manager must give the Companion's money to the Backfill Coworker, either directly or by putting it in the household locked medication cabinet in an envelope marked with the Companion's name and the amount of money in the envelope.
- The House Manager must communicate with the Backfill Coworker in advance, letting them know the amount of cash taken out and that any purchases made with or for the Companion need to have corresponding receipts.
- The remaining funds (change given) and receipts need to be returned to the House Manager, either directly or by putting them back in the locked medication cabinet.
- House Managers must be responsible for the foresight and planning of purchases made in their absence. It is the responsibility of the House Manager to ensure those transactions are reconciled immediately on their next shift.

Responsibility of: House Managers and Backfill Coworkers

Monitored by: Executive Director, Bookkeeper, Finance Group

The Ita Wegman Association
of British Columbia

FP12: PERMISSION TO MANAGE COMPANION FUNDS

Associated standard 2.A.8 a, b(1,2), c(1,2), d, e

I _____

(Please print your name)

give The Ita Wegman Association of BC my permission for a House Manager to manage my funds following the ***Finance Policy 11 - Companion Fund Management Standard*** procedures as outlined for the following category (please select):

☐ Category 1: Companions who manage their funds entirely independently, with no monthly reconciliation assistance from Coworkers. The Companion, or their family representative, is in charge of budgeting, planning purchases, ensuring funds are available, etc. Companions may be financially independent but require assistance due to challenges with dexterity, fine motor tasks, vision impairment, etc. A designated Coworker can support the Companion in making their purchase but is not responsible for any financial oversight or reconciliation.

☐ Category 2: Companions who require full assistance to manage their funds and financial transactions. In this instance, Coworkers monitor and document all purchases and banking transactions, ensuring the appropriate logs are maintained. The House Manager handles and administers all cash, debit, and credit cards to ensure they have oversight for all purchases made and that appropriate documentation (receipts, transaction records, bank and credit card statements) is collected, retained, and reconciled.

**Please note: Eligibility for Category 2 will be determined by Glenora Farm based on a combination of GSA designation and demonstrated support need.*

I have read or have had the policy ***FP11 Companion Funds Management*** read to me, and I understand the policy.

The Ita Wegman Association
of British Columbia

_____

Signature of Companion **Date**

_____

Signature of Representative **Date**

_____

Signature of House Manager **Date**

FP13: COMPANION FINANCIAL FILE REVIEW *(bi-annual)*

Associated standard 2.A.8 a, b(1,2), c(1,2), d, e

Companion:	House Coordinators:_____	Date:
Reviewer:		
Reviewer Signature:		
Copy of Review in Companion File:	Yes ☐ No ☐	Date:

Legend: N/A (not applicable) **I/N** (incomplete)

BUSINESS ADMINISTRATOR TO REVIEW	**Yes**	**No**	**N/A**	**I/N**
All dates of services provided coincide with billed episodes of care				
Bills accurately reflect services provided				
Any necessary corrective action planning required (if so identify below)				

The Ita Wegman Association
of British Columbia

FP14: COMPANION'S FUND LOG - BANK ACCOUNT / DEBIT CARD

Companion Name	Month/Year

Date	Description	IN	OUT	Balance	Receipt?	Initial	Reconciled
	STARTING BALANCE						

The Ita Wegman Association
of British Columbia

FP15: COMPANION'S FUND LOG - SECURED CASH FUNDS ON SITE							
Companion Name				**Month/Year**			
Date	**Description**	**IN**	**OUT**	**Balance**	**Receipt?**	**CW Initial**	**Comp. Initial**
	STARTING BALANCE						

FP16: Companion Purchase Order Form								
Companion Name								
Date	**Description**	**Cash given to Coworker**	**Total Amount Spent**	**Change received (Y/N)**	**Debit/ Credit used (Y/N)**	**Receipt received (Y/N)**	**Coworker Initial**	**Companion Signature**

The Ita Wegman Association
of British Columbia

FP17: CELL PHONES

Associated standard 1.F.5 a, b (1, 2)

POLICY

This sets out the policy regarding emergency cell phones.

PROCEDURES

THE ITA WEGMAN ASSOCIATION EMERGENCY CELL PHONES

As needed for security, emergency, or other special needs, the Ita Wegman Association will supply and pay for emergency cell phones and the monthly service costs. This is an Association phone, not a personal-use phone. The cell phone is provided to carry out the Coworker's work, and the cost of the device is not considered a taxable benefit. Prior financial approval is required.

Coworkers' personal cell phones and cellular phone plans are not expenses covered by the Association.

Responsibility of: Executive Director and Finance Group

Monitored by: Executive Director, Finance Group, and Board of Directors

FP18: FINANCIAL PLANNING FOR A CHILD WITH A DISABILITY

Associated standard 1.F.1 (a, b) and 2.A.8 a, b(1,2), c(1,2), d, e

POLICY

From time to time, a parent or guardian may ask about long-term financial planning for a child with a disability. The Ita Wegman Association does not offer guardianship or related services. Each Companion is to be funded by government and/or private funding. Banks and related organizations offer advisory services to manage financial matters.

RESOURCES FOR FAMILIES AND REPRESENTATIVES

- RDSP: The Registered Disability Savings Plan (RDSP) helps Canadians with disabilities and their families save for the future. https://www.canada.ca/en/revenue-agency/services/forms-publications/publications/rc4460.html
- Canada Disability Savings Grants and Bonds: This is a matching grant. That means that the Government also pays into an RDSP to help with savings. https://www.canada.ca/en/employment-social-development/programs/disability/savings/grants-bonds.html
- Trusts: Provide a way for PWD (Persons With Disabilities) clients and their families to safeguard assets for meeting disability-related costs. https://www2.gov.bc.ca/gov/content/governments/policies-for-government/bcea-policy-and-procedure-manual/eligibility/trusts
- Easter Seals: Financial Planning for a Child with a Disability https://services.easterseals.org/family-information-resources/financial-planning-for-child-with-a-disability/
- No Investment Advice: The content herein is for informational purposes only and should not be construed as advice, including legal, tax, investment, financial, or other guidance. Nothing contained in our publications constitutes a solicitation, recommendation, endorsement, or offer by us or any third-party service provider.

Responsibility of: Executive Director and Finance Group

Monitored by: Executive Director, Finance Group, and Board of Directors

FP19: FOOD PURCHASING

Associated standard 1.F.5 a, b (1, 2)

POLICY

This sets out the policy regarding food and sundry purchases for the Companions and Coworkers, who live in the Ita Wegman Association-owned housing and/or are provided meals.

What we eat is closely related to good health. Poor nutrition is a risk factor for leading causes of death, including heart disease, stroke, diabetes, and cancer. Nutrition-related chronic diseases

are placing new demands on an already overburdened healthcare system and taking their toll on human productivity and quality of life.

Our emphasis will be on fresh fruits and vegetables, quality animal products, whole grains, and other foods important for health. We will avoid as much as possible highly refined, “factory” produced foods. Through our own sustainable agricultural practices and informed food purchasing decisions, we can promote health by providing fresh, good-tasting, nutritious food for the Glenora Farm community.

Our farm can help improve health outcomes by supporting a more sustainable food system. A sustainable agriculture and food system protects the environment and human health. It meets the needs for food and fiber while supporting the economic viability of our community.

Through our on-site farm and purchasing practices, we can help achieve the following:

- Promote good nutrition by offering a range of healthy foods
- Support good eating habits and model a healthy food environment
- Reduce antibiotic resistance by raising and buying poultry and meat produced without the use of antibiotics
- Reduce air and water pollution by providing fresh, locally grown foods whenever possible
- Support local food systems that avoid long-distance travel
- Grow, buy, and serve foods grown without pesticides, such as organic foods, and reduce exposure to harmful pesticides.

Buying food produced in ways that are ecologically sound, economically viable, and socially responsible also supports a food system that ultimately benefits healthier individuals and communities. We will adopt food procurement policies that provide nutritional food and support and help create food systems that promote the well-being of the whole community.

PROCEDURE

FOOD PURCHASING GUIDELINES

- Support local wherever financially possible

- Continue and expand our gardens to grow fresh produce as well as provide exercise opportunities
- Continue to consume the meat raised at Glenora Farm and, wherever possible, buy only meat/poultry raised without non-therapeutic antibiotics or hormones
- Set goals and explore new relationships designed to increase the purchase of locally produced fresh produce
- As much as possible and economically viable, buy organic food products, or buy from producers who have reduced synthetic pesticide use
- Purchase foods that provide fair prices and living wages to the people who produce them
- Buy dairy produced without the use of synthetic hormones, like Bovine Growth Hormone

Responsibility of: House Managers, Facility Manager

Monitored by: Executive Director, Finance Group, and Executive Group

FP20: CPA FIRM ASSIGNMENT

Associated standard 1.F.8 a, b (1, 2)

POLICY

Responsibility for the integrity and objectivity of the bookkeeping, accounting, and financial statements and all information contained in these statements' rests with the leadership of the Association. To fulfill its accounting and reporting responsibilities, leadership maintains a set of accounts that provide an accurate record of the Ita Wegman Association's financial transactions.

Leadership is also responsible for maintaining an effective system of internal control over financial reporting designed to provide reasonable assurance that financial information is reliable, that assets are safeguarded, and that transactions are properly authorized and

recorded in accordance with applicable regulations, authorities, and policies. The Association engages a Chartered Public Accountant (CPA) firm.

PROCEDURE

COMPILATION

In the past, the CPA firm has undertaken a "Compilation" assignment: A financial report that has been prepared and reviewed but not audited by a CPA. The financial reports have not been tested or verified, and the CPA states no opinion about the accuracy of the statements.

RESPONSIBILITIES

The Executive Director, Bookkeeper, and Finance Group are responsible for the timeliness and overall reliability of the accounting and financial reporting. The Executive Group and Board of Directors are responsible for ensuring that the leadership team fulfills its commitment and responsibilities regarding internal controls and financial reporting.

Responsibility of: Executive Director, Bookkeeper, and Finance Group

Monitored by: Board of Directors

FP21: INTERNAL CONTROLS

Associated standard 1.F.5 a, b (1, 2)

POLICY

Internal controls are the systems, rules, and procedures employed by The Ita Wegman Association to ensure the accuracy of financial and accounting information, uphold accountability, and prevent fraud.

Internal financial controls are essential checks and procedures that help the Association, leadership groups, and Board of Directors:

- Comply with regulations under the BC Societies Act, the Federal Income Tax Act and Ita Wegman Association's policies and bylaws.
- Meet their legal duties to safeguard the charity's assets
- Administer the charity's finances and assets in a way that identifies and manages risk
- Ensure the quality of financial reporting by keeping adequate accounting records and preparing timely and relevant financial information
- Ensure that the Association is compliant with laws and regulations relating to registered charity finances and reporting

In addition to improving operational efficiency through the accuracy and timeliness of financial reporting, it also aids in preventing asset misappropriation or fraud. Internal controls should be communicated to all personnel involved and monitored by the Executive Director and Finance Group to ensure compliance and to determine if they are working properly. A key benefit of strong internal controls is to help strengthen the Association's accounting procedures and systems, which in turn, helps detect and prevent losses, misappropriation, and fraud.

PROCEDURE

DIRECTORS RESPONSIBILITIES REGARDING ACCOUNTING REQUIREMENTS

The Board of Directors has legal responsibilities to ensure the Association is keeping accounting records, preparing accurate financial reports, and managing accounts with the appropriate level of external scrutiny.

Directors must ensure the protection of the Association's assets and take steps to ensure the Association is protected against financial abuse. Directors have several legal duties that must be met in relation to accounting and financial reporting. These include:

- Keeping 'sufficient' accounting records to explain all transactions and show the charity's financial position
- Preparing an annual report and statutory accounts to meet legal requirements
- Considering the need for a reserves policy, managing the level of reserves held, and the disclosure of any reserves policy in the Annual Report
- Formally approving the Annual Report and accounts

- Ensuring that accounts are subjected to any external scrutiny required by law or by the charity's governing document
- Ensuring that the Annual Report, accounts, and CRA annual return are filed on time
- Meeting requests from the public for copies of the charity's most recent annual report and accounts
- Safeguarding the assets of the charity and ensuring proper application of resources
- Taking steps for the prevention and detection of bribery, fraud, financial abuse, and other irregularities

Reference site: Non-Profit Directors (Societies Act FAQs)

https://wiki.clicklaw.bc.ca/index.php?title=Non-Profit_Directors_(Societies_Act_FAQs)

VITAL IMPORTANCE OF INTERNAL CONTROLS

Strong internal controls generally rely on the segregation of duties, which prevents a single Coworker or Contractor from both perpetrating and concealing fraud. Segregation of duties - A key feature of internal financial controls is to ensure that no single individual has sole responsibility for any single transaction from authorization to completion and review.

The most common form of fraud is misappropriation of assets, in which a Coworker, Contractor, or Executive of the Association uses their position to misuse funds of the Association. Examples of fraud:

- Falsified expense reports
- Theft of services, inventory, time, or company property
- Purchases from fake vendors
- Credit card abuse, including personal expenses
- Falsified time sheets to get paid for hours not worked
- Supervisor and leadership pre-signed cheques, which are used for personal purposes
- Unreported personal use of Association vehicles or equipment
- Cheque forgery and tampering

- Kickbacks or collusion, in which a Coworker or Contractor receives payments from a third party in exchange for cash or other advantages
- Financial statement fraud, in which a director, Supervisor, leadership team member, Coworker, or Contractor alters balance sheets, profit & loss, or cash flow statements with the intention to deceive or to gain some benefit or personal gain

BUDGET CONTROL

One of the most important financial monitoring activities is budgetary control, i.e., monitoring the financial performance against a budget. Proper and realistic estimates of income and expenditure need to be made for each area of the charity's programs and activities for each financial year. The overall budget will be set, which the Directors should agree upon before the start of the financial year.

There should be procedures for sharing monthly or periodic financial information with budget holders, Directors, supervisors, and leadership. Monitoring procedures should identify and seek explanations for significant over- or underperformance of both income and expenditures. Other monitoring activities include a review of expected sources of income and the actual income received. Monitoring can also help to ensure that any restrictions placed on the use of funds are identified and that reporting requirements to funders are met.

FINANCIAL REPORTING

Directors need access to accurate and up-to-date financial information to enable them to make proper decisions. Board of Directors meetings should be used to communicate information concerning the finances and financial management. All decisions by the Directors concerning finances should be taken collectively, and significant decisions and action points should be noted in writing.

The financial information provided should always be understandable, accurate, and timely. Information also needs to be provided regularly to ensure Directors can fulfill their monitoring role. The financial information provided at each Board of Directors meeting should include details of the charity's financial position and performance. The financial information should be sent to each director before each meeting and will typically include:

- The latest financial statements (Balance Sheet and Profit & Loss)
- A comparison of budget to actual figures

- An explanation for variances between forecasts and what actually happened
- Details of cash flow and bank balances

The meeting should set aside a specific time within the agenda for discussion of financial matters and allow the Directors to raise any issues of concern.

AUDIT ASSIGNMENT- CPA REVIEW ENGAGEMENT

The Board of Directors is responsible for overseeing the function of the independent CPA firm. The understanding of internal controls assists the auditor in assessing the risks of material misstatement, which in turn assists in designing and implementing audit responses that are tailored to a client's assessed risks.

CANADA REVENUE AGENCY

Canada Revenue Agency (CRA) may examine the internal controls, or the lack thereof, in charities. Internal controls are "procedures or policies put in place by management to safeguard assets, promote accountability, increase efficiency, and stop fraudulent behaviour."

Checklist (Excerpt from CRA website):

- Engage only in allowable activities. A registered charity is allowed to carry out its charitable purposes in only two ways: by carrying on its own charitable activities, and by gifting to qualified donees.
- Keep adequate books and records.
- Issue complete and accurate donation receipts. A registered charity may only issue official receipts for donations that legally qualify as gifts.
- Meet the annual spending requirement (disbursement quota). A registered charity must spend the minimum amount calculated for its disbursement quota each year on its own charitable activities or on gifts to qualified donees (for example, other registered charities).
- File annual T3010 information return. A registered charity must file an annual T3010 information return (together with financial statements and required attachments) no later than six months after the end of the charity's fiscal period.
- Maintain the charity's status as a legal entity.

- Inform the Charities Directorate of any changes to the charity's mode of operation or legal structure.

Reference: https://www.canada.ca/en/revenue-agency/services/charities-giving/charities/checklists-charities/basic-guidelines.html

Responsibility of the Executive Director, Bookkeeper, and Finance Group

Monitored by: Board of Directors

FP22: INTERNAL CONTROLS CHECKLIST: BOOKKEEPER

Associated standard 1.F.5 a, b (1, 2)

POLICY

Internal financial control checklist for implementation by the Association's Bookkeeper.
See also ***FP21 Internal Controls*** for a detailed description. The questions in this checklist are designed to help evaluate the Association's performance against the legal requirements and good bookkeeping practices. Charities must always comply with legal requirements and these requirements are identified in the checklist as they relate to the Bookkeeper's duties and responsibilities.

A 'yes' answer for good practice recommendations does not mean there is no scope for further improvement. A 'no' answer does not always indicate a problem. It may be that the Association has not put in place a particular control because the risk involved is small and the potential loss is acceptable, given the cost that would be involved in putting in place stronger internal controls.

Finally, the answers in the checklist should be based on the Bookkeeper's knowledge of what actually happens in the Association as it relates to their position. Having internal controls in place is only part of the picture. It must operate in practice to be effective.

PROCEDURE

1. Accounting/Bookkeeping

The Ita Wegman Association
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1.1 Accounting software	Yes	No
Are the software passwords kept secure? Are all parties using last pass?		
Passwords are updated with staff changes.		
1.2 Bookkeeping	**Yes**	**No**
Are financial transactions posted weekly?		
Are discrepancies investigated as soon as possible?	**X**	

2. Income

2.1 Income received in the mail	Yes	No
Are all incoming cheques, e-transfers, and cash recorded monthly?		
Does the charity keep unopened mail secure?		
2.2 Income from public collections and fundraising events	**Yes**	**No**
Are two unrelated people involved in counting and recording the cash income?		
Is cash banked as soon as possible and without deduction of expenses?		

Are records maintained for each fundraising event and agreed to bank deposits?		
2.3 Donations	**Yes**	**No**
Does the charity keep the records required by CRA?		
2.4 Other income	**Yes**	**No**
Does the charity review and follow up outstanding debts and collection?		
Are there reconciliations of amounts invoiced and cash received?		
2.5 Banking and custody procedures	**Yes**	**No**
Are incoming deposits banked and recorded promptly?		
Are funds banked without deduction of expenses?		
2.6 Deposits	**Yes**	**No**
Are income records agreed with the bank deposits and statements?		

3. Purchases and payments

3.1 Controls and authorization of expenditure on goods and services	**Yes**	**No**

Is there a written policy on the authorization of expenditure?		
Are vendor invoices received checked against orders confirming pricing and the receipt of the goods or services ordered?		
3.2 Controls and authorization of expenditure on capital purchases	**Yes**	**No**
Are capital expenditures above $5,000 approved by the Board of Directors?		
3.3 Payment by cheque	**Yes**	**No**
Does the bank mandate require at least two signatories?		
Is there a practice of not signing blank cheques?		
Are cheque books etc kept in a secure place with access only by authorized persons?		
Are any monetary limits placed on an individual's signing recorded in writing?		
Are all cheque expenditures recorded in the accounts and noted with the relevant cheque number, nature of payment and payee?		
Are cheques signed only with documentary evidence of the nature of the payment, e.g. vendor invoice?		

3.4 Payments by debit/credit/charge card	Yes	No
Does the charity have a policy for the use of credit cards, including the criteria for their issue, spending limits and security?		
Does the charity communicate the policy for the use of cards to all directors, Coworkers and Contractors using them?		
Are cards canceled when the holder ceases to work for the charity?		
Are all card expenditures supported by vouchers and invoices and recorded in the accounting records each time the card is used?		
Are card statements sent to the accounting office and checked to support records and invoices?		
Is the cardholder's use of the card independently reviewed periodically to confirm its use is consistent with the policy?		
3.5 Payments by auto payment	**Yes**	**No**
Are only named individuals authorized to set up direct debits, standing orders and direct credits?		
Does the charity use a dual authorization system for payments?		
Does the charity monitor the arrangements to ensure that automatic payment arrangements are canceled when the goods and services are no longer being supplied to the charity?		

3.6 Payment in cash	Yes	No
Is every effort made to minimize cash payments?		
Are all payments by cash made from a petty cash float and not from incoming cash?		
Is supporting documentation authorized by someone other than the person maintaining the petty cash or the person making the claim?		
Reconcile all 4 petty cash boxes and record pertinent information in the petty cash spreadsheet. Inform ED of any discrepancies.		
Are details of all payments in cash by Coworkers and Contractors supported by expense records?		
3.7 Wages and salaries	**Yes**	**No**
Are statutory deductions (tax, CPP, EI) made from Coworker and Contractor wages and salaries and regularly forwarded to CRA?		
Are any other deductions from salaries made only where they are required or authorized?		
Are the end-of-year T4 returns completed and filed with CRA by the deadline?		
Do all Coworkers and Contractors have contracts of employment?		

Are personnel records kept and held separately from wages records?		
Are pay level changes properly authorized in writing?		
Is there a system of authorization for recording and notifying new Coworkers and Contractors about departures, changes of hours and other payroll changes?		
Are monthly payments made to CRA for payroll deductions?		
3.8 The payment of expenses and reimbursements	**Yes**	**No**
Does the charity have a written policy to cover the payment and reimbursement of expenses?		
Are expenses reimbursed only where the individual incurred the expense in the course of carrying out the charity's business?		
Does the expense claim include a self-declaration that the claim is accurate and incurred on the business of the charity?		
Are reimbursements made by bank transfer or cheque?		
Are mileage payments for personal auto use in accordance with CRA mandated rates?		
3.9 Loans	**Yes**	**No**

Are the terms of the loans documented?		
Is there a repayment plan in place to repay the principal and interest due?		
3.10 Checks on expenditure records	**Yes**	**No**
Are regular checks made to ensure expenditure records are accurate and agree with the bank statements?		
Are regular checks made to ensure no discrepancies between the payments made and the original invoice or payment records?		

4. Assets and investments

4.1 Money held as a current asset	**Yes**	**No**
Are secure records kept of all bank accounts?		
Are bank reconciliations done monthly for all accounts?		
4.2 Electronic banking	**Yes**	**No**
If electronic banking is used to make payments does the system used require authorization of transactions by two individuals?		
Are accounting computers kept secure with up-to-date anti-virus and spyware software?		

Does the charity keep an audit trail of electronic banking transactions?		
4.3 Restricted funds and endowment funds	**Yes**	**No**
Are procedures in place to ensure that any restrictions put on the use of funds, by the donor or through an appeal, are observed?		

Prepared By: **Date:**

Signature:

Reviewed By: **Date:**

File upon completion.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Committee and Board of Directors

FP23: CHART OF ACCOUNTS

Associated standard 1.F.5 a, b (1, 2)

POLICY

The chart of accounts (or COA) is a numbered list that categorizes financial activity into different accounts and subaccounts in the accounting software. Every charitable organization, such as

The Ita Wegman Association, has a unique COA that depends on specific programs, revenue sources, and activities.

PROCEDURE

FINANCIAL STATEMENTS

The Association's financial statements differ from those issued by businesses. The Association issues the following financial statements:

A. Statement of Financial Position (Balance Sheet)

The Statement of Financial Position lists the assets held by the Association and the amount of all debt owed.

It also includes the nonprofit's net assets, which is the overall value of the Association, similar to the equity reported by businesses.

Assets – Liabilities = Net Assets (Equity)

B. Statement of Activities (Profit & Loss)

The Statement of Activities reports the revenues (income) and disbursements (expenses) during a specific reporting period.

C. Statement of Cash Flows

The Statement Of Cash Flows reports on all cash flowing into and out of the Association.

Specifically, the statement demonstrates the extent to which the Association's programs and activities generate and use money.

CHART OF ACCOUNTS

These are the main categories for the chart of accounts:

A. Statement of Financial Position (Balance Sheet)

1. Assets: 1000-1999

- Bank accounts, accounts receivable, buildings, and equipment

2. Liabilities: 2000-2999

- Accounts payable and mortgages due to other organizations

3. Equity/Net Assets: 3000-3999

- Net assets: unrestricted and restricted

B. Statement of Activities (Profit & Loss)

1. Revenue: 4000-4999

- Government funding, grants, donations, and other income

2. Expenses:

- Programs: 5000-5999
- Management & General: 6000-6999
- Fundraising: 7000-7999

3. Non-Operating Revenue: 8000-8999

- Extraordinary or restricted income

4. Non-Operating Expenses 9000-9999

- Extraordinary or restricted disbursements

NATURAL CLASSES

The Association reports its expenses by natural class.

Natural expense classification

This is a method of grouping expenses according to the kinds of economic benefits received in incurring those expenses. Examples of natural expense classifications include wages, supplies, interest expense, premises maintenance, utilities, and depreciation.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance group and Board of Directors

FP24: ROOM AND BOARD

Associated standard 1.F.5 a, b (1, 2)

POLICY

This sets out the policy regarding room and board provided to Coworkers and their dependents who live in Ita Wegman Association-owned housing and/or are provided meals. For "live-in" Residential Coworkers who are provided a place to live and eat, this is known as "room and board". This amount includes rent and any meals that are provided to Coworker.

The Canadian Revenue Agency (CRA) states that free housing and meals provided to an employee are taxable benefits and must be reported. The fair market value of the room and board will be a payroll deduction. This procedure would be included in Coworker agreements and hiring forms. The rate charged by the Association to the domestic or international Coworker or Contractor for room and board must be included in the employment contract.

PROCEDURE

Fair market value is defined as "a selling price for an item on which a buyer (Coworker) and the seller (the Association) can agree".

To determine the room and board fair market value, one method is to compare the prices others have paid for something comparable, often called "market value". The value of room and board should be equal to that of the same services in an active market. The active market would be local property listings using accommodations similar to those being provided.

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Room check-ins will happen at move-in and at regular intervals (twice a year for Coworkers, every three months for Companions, and 2-weeks before departure). The Facility Manager is responsible for scheduling and tracking the room check-ins. Any damage to Coworker and Companion rooms will be the financial responsibility of the Coworker/Companion.

Inspection / Check-In List based on Government of BC Condition Inspection Report RTB-27

Condition Codes: G- Good D-Damaged F- Fair S- Scratched P- Poor B- Broken M- Missing DT- Dirty St- Stained	**Condition at Beginning of Tenancy**	**Condition at End of Tenancy**
Ceiling		
Walls and Trim		
Floor / Carpet		
Closet(s)		
Doors		
Lighting Fixtures/Ceiling Fans/Bulbs		
Window/Coverings/		

Screens		
Electrical Outlets		
Damage Deposit Returned? How Much?	**List Repairs to be complete at the start of the tenancy:**	**List Damage to the rental unit or residential property for which the tenant is responsible:**

Responsibility of: Executive Director, Bookkeeper, Facility Manager

Monitored by: Finance Group, Human Resources and Relations Group, and Executive Group

FP25: US FUNDS ACCOUNTING

Associated standard 1.F.5 a, b (1, 2)

POLICY

Accounting standards require that the Association's financial statements be recorded in one currency i.e., Canadian funds. However, the Association has some American vendors who are paid in US funds. The Association holds a US funds bank account to disburse funds to American Vendors. This sets out the procedures to follow to implement this.

PROCEDURE

This procedure allows the organization to have a foreign currency bank account – while still ensuring that the asset, and the revenues and expenses, are properly stated at their Canadian values in accordance with generally accepted accounting practices.

ACCOUNTING SYSTEM

The accounting system must accomplish the following:

- Record the amount of the foreign currency in the US funds bank account.

- If there are $3,456 US dollars in the US bank account, that's the number that should be shown on the US Funds Bank account and on the balance sheet.
- Record the correct value of that asset. (Thus, if there are $3,456 US dollars and today's rate is 1.23, those US dollars are presently worth $3,456 x 1.23 = $4,250.88 Canadian.)
- Record US revenues and expenses at the Canadian equivalent. Thus, if $2,500 of those US dollars is used to pay a vendor, then record an expense of $3,075 as calculated above.

PAIRING THE US BANK ACCOUNT

The US bank account will be paired with a second general ledger asset account, named "Revalue US Dollars". The US funds bank account captures the numerical amount of the foreign currency currently held. The paired account captures the difference in value to the Canadian dollar. Thus, if $3,456 US dollars is held and the exchange rate was 1.23, the Revalue US Dollars account would contain $794.88.

PAYMENT EXAMPLE

If $2,500 of the US funds is used to pay a vendor, then record an expense of $3,075.

The entry to pay an American vendor would be:

January 21, 20xx

Debit – Expense account	$3,075
Credit – US Bank Account	$2,500
Credit – Revalue US Dollar	$575

This entry states the true cost of the expense; it updates the US bank balance correctly; and it revalues the asset (the US funds) according to today's exchange rate.

DEPOSIT EXAMPLE

An American organization/family remitted funds in US dollars. If they paid $45.00 US when the US dollar was worth 1.23, the deposit entry would be:

January 21, 20xx

Debit – US Bank Account	$45.00
Credit – Revenue	$55.35

Debit – Revalue US Dollar	$10.35

At the current exchange rate, the revenue was $55.35 Canadian.

REVALUE US DOLLAR ACCOUNT

As the fiscal year proceeds, there will be a number of transactions, each valued at the current day's exchange rate. Because the rate floats up and down, the amount in the "Revalue US Dollar" account eventually becomes inaccurate. For that reason, it's important to "adjust" the value of the US dollar account from time to time. As needed, the Association will make a separate entry on the last day of the month or quarter to update the US currency to the month-end rate.

GAIN OR LOSS ON FOREIGN EXCHANGE

Using the examples above, which started with $3,456.00 US dollars. $2,500.00 was spent and $45.00 deposited – bringing the US account balance to $1,001.00.

And the Revalue US Dollar account started at $794.88; $575.00 was deducted, and $10.35 was added, bringing the account balance to $230.23.

For example:

The exchange rate on the last day of the month was 1.25. At that rate, a balance of $1,001.00 is actually worth $1,251.25. The month-end balance sheet misstates the value of the US dollars. The following entry "trues up" to the current Canadian equivalent.

January 31, 20xx

To adjust the US dollar value per month-end rate of $1.25

Debit Revalue US Dollar	$20.02
Credit Gain or Loss on Foreign Exchange	$20.02

Note that this adjustment isn't tied to any particular transaction: it simply corrects for the month-end exchange rate. The "pick-up" is allocated to a revenue account that specifically captures currency gain or loss. In months when the US dollar increases in value, a gain is recorded because the US Funds are worth more. But when the Canadian dollar increases, a loss on the American currency would be recorded.

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Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Group and Board of Directors

FP26: RESTRICTED FUNDS

Associated standard 1.F.5 a, b (1, 2)

POLICY

A restricted fund is a reserve bank account that contains money that can only be legally disbursed for specific purposes. Restricted funds provide reassurance to donors that their contributions are used in a manner that they have specified.

- A restricted fund is a bank account that has been earmarked for specific or limited use.
- Restricted funds ensure that donors alone can direct the usage of those assets.
- Failure to comply with restrictions or unauthorized use of restricted funds can result in adverse public relations, penalties, and even legal action.

When a donor gives money to The Ita Wegman Association, they may specify whether the gift is unrestricted and thus can be used for any purpose the Association sees fit. If the funds are temporarily restricted, they must be used for a specific purpose. With permanently restricted funds, the donation acts as principal on which interest can be earned, but only the interest can be spent. Externally restricted funds have “restrictions” imposed by a funder or donor. For example, BC Gaming provided a grant to purchase a passenger van. Those funds are temporarily restricted and thus are only to be spent on a van purchase.

PROCEDURE

DESIGNATION OF A RESTRICTED FUND

A separate bank account, “Restricted Funds,” is to be maintained. The donor determines if the funds are to be restricted. Typically, fund designation is specified in writing or through an agreement with the organization.

When establishing an externally restricted fund, it's important to align on goals with the funding source so both parties are clear on what the funds can and can't be used for. Also, understand the funder's reporting requirements so that the books and reporting frequencies are accommodated.

Restricted funds must be accounted for separately in the financial statements. When budgeting, the Association will separate restricted and unrestricted funds so that the funds are spent correctly. An internal system will be implemented that alerts the Executive Director, Bookkeeper, and the Finance Group

When restricted fund obligations have been met and the donor's wishes are satisfied, the excess funds can be transferred to unrestricted funds.

MANAGING RESTRICTED FUNDS

Restricted funds are held in a separate bank account. The donor may require an additional restricted funds account specific to that donation. For example, BC Gaming required a separate restricted funds bank account. The Association will use class tracking functionality in the accounting software and the fund accounting method for reporting purposes.

In QuickBooks, create classes that are assigned to transactions. This "tracks" fund account balances by recording additional fund income and disbursement information. Use the class tracking functionality in QuickBooks to:

- Record revenues and disbursements relating to specific funds
- Ensure that funds are used in accordance with any restrictions

Class tracking functionality streamlines reporting obligations and keeps the Association accountable. By generating "Profit & Loss" statements by class, the revenues and disbursements for specific funds are clearly reported.

The Association will review fund transactions monthly to highlight bookkeeping and reporting errors. Reconcile fund bank account(s) monthly at a minimum. The Association will prepare a monthly report and share a single fund summary report to help keep the restrictions and reporting requirements for separate funds clear all times.

Responsibility of: Executive Director and Bookkeeper

Monitored by: Finance Group, Executive Group, and Board of Directors

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FP27: HOUSEHOLD RECREATION EXPENSES

Associated standard 1.F.5 a, b (1, 2)

INTRODUCTION

Outings and activities outside the farm property can be a real treat for Companions and

Coworkers. Off-Farm activities help sustain both physical health and happiness. Also, it is important that Companions can maintain their interests and have opportunities to develop new ones. Outings facilitate community integration and a sense of place and belonging. They also model inclusion and diversity.

Organized recreational outings will occur 1-2 times per month with activities that reflect Companion feedback. Participation will be at the initiation of the Companion and is not mandatory. This planning is in addition to the recreation and weekend activities that are currently offered to Companions for their participation.

HOUSEHOLD RECREATION EXPENSES

Household recreation expenses include outings, restaurants, and house holidays. These expenses are expenses beyond 'regular' day-to-day residential program expenses.

Food expenses

Eating out (off premises) frequency and assumption of cost. The Association will reimburse

(pay) for expenses:

- Coworkers and Companion living on the farm may dine out once a month at

Association expense.

- Individual meal expenses should not exceed $40 for each Companion and Coworker

(including tip).

- Companions and Coworkers dining out more than once a month will pay their own

bill.

- Alcohol is not a reimbursable expense.

Recreation expenses are personal

The Association does not reimburse the cost of recreation expenses such as vacation or outings for Companions or Coworkers.

Coordinating Payment

Companion families are responsible for assuming and coordinating payment for Companions and participating Coworkers.

Companion families work directly with House Managers on the outing or vacation details and expenses.

Payments for outings or vacations can be made by the Companion family representative in each house by way of a payment to The Ita Wegman Association.

House Managers will track spending and work with Companion family representatives for expense reporting purposes.

Responsibility of: Executive Director, House Managers

Monitored by: Finance Group and Executive Group

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HEALTH AND SAFETY POLICIES (HSP)

HSP1: GLENORA FARM INTERNAL INSPECTION FORM					
Use this checklist when conducting your regular safety inspections. Go over every aspect of your workplace to identify possible hazards.					
Floors and Walkways	**Yes**	**No**		**Yes**	**No**
Are aisles clear of materials and equipment?			Are supplies and materials stored properly on shelves?		
Are main aisles at least 1 m (36 in.) wide?			Does your storage layout minimize lifting problems?		
Are doorways clear of materials or equipment?			Are trolleys or dollies available to move heavy items?		
Are carpets or tiles in good condition and free of loose or lifting carpeting or tile?			Are floors around shelves clear of rubbish?		
Are floors clean and free of oil or grease?			Are racks and shelves in good condition?		
Are floors kept dry?					
If supplies or materials are stored on the floor, are they away from doors and aisles and stacked no more than three boxes high?			**Electrical**	**Yes**	**No**
			Are electrical cords in good repair?		
Stairs, ladders, and platforms	**Yes**	**No**	Is there clear access to electrical panels and switch gear?		

Are ladders safe and in good condition?			Are electrical cords secured?		
Are ladders safe and in good condition?			Are proper plugs used?		
Are stairwells clear of materials and equipment?			Are plugs, sockets, and switches in good condition?		
Are stairs and handrails in good condition?			Are ground fault circuit interrupters available, if required?		
Are ladders and stairs provided with anti-slip treads?			Are portable power tools in good condition?		
Walls	**Yes**	**No**	**Equipment and Machinery**	**Yes**	**No**
Are signs and fixtures securely fastened to the wall?			Are equipment and machinery kept clean?		
			Is the equipment regularly maintained?		
Lighting	**Yes**	**No**	Are operators properly trained?		
Are lighting levels in work areas adequate?			Are start-stop switches clearly marked and in easy reach?		
Are work areas free of glare or excessive lighting contrast?			Is machinery adequately guarded?		
Is task lighting provided in areas of low light or high glare?			Is there enough work space?		
Are windows covered with blinds, drapes, or other means of controlling light?			Are noise levels controlled?		
Does emergency lighting work?			Are fumes and exhaust controlled?		

			Do you have a lockout procedure in place?		

GLENORA FARM INTERNAL INSPECTION CHECKLIST					
Use this checklist when conducting your regular safety inspections. Go over every aspect of your workplace to identify possible hazards.					
Chairs	**Yes**	**No**	**Garbage**	**Yes**	**No**
Are chairs in good condition?			Are bins located at suitable points?		
Are chairs properly adjusted?			Are bins emptied regularly?		
Computers	**Yes**	**No**	**Hazardous Materials**	**Yes**	**No**
Are display screens free of dust?			Are material safety data sheets (MSDSs) provided for all hazardous materials?		
Are display screens bright enough with sufficient contrast?			Are containers clearly labelled?		
Are display screens positioned at a comfortable viewing level?			Are hazardous materials properly stored?		
			Are hazardous materials disposed of properly?		
Fire Safety and Security	**Yes**	**No**			
Are fire extinguishers clearly marked?			**Environment**	**Yes**	**No**
Are fire extinguishers properly installed on walls?			Is air quality good?		

Have fire extinguishers been inspected within the last year?			Are Companions, Coworkers, Staff and Volunteers protected from cool drafts or excessive heat?		
Are workers trained to use fire extinguishers?			Are Companions, Coworkers, Staff and Volunteers protected from excessive or irritating noise?		
Are flammable liquids properly stored?					
Will space heaters shut off automatically if tipped over?			**Parking**	**Yes**	**No**
Are emergency phone numbers close to phones?			Are parking spots and walkways appropriately lighted?		
Are smoke, fire, and burglar alarms in place?			Are parking spots safe? (names should not be painted on spots)		
			Are Companions, Coworkers, Staff and Volunteers encouraged to use a buddy or escort?		
Entrances and Exits	**Yes**	**No**	Is a speed limit posted in the parking lot?		
Is there safe access for Companions, Coworkers, Staff and Volunteers?					
Are emergency exits clear of materials or equipment?			**General Worker Questions**	**Yes**	**No**
Are emergency exit signs working?			Do Companions, Coworkers, Staff and Volunteers know where to go and who to call for first aid assistance?		
Are emergency lighting units provided? Are they working?			Do Companions, Coworkers, Staff and Volunteers know where to find MSDSs for chemical products?		

			Do Companions, Coworkers, Staff and Volunteers know where to find personal protective equipment (for example, disposable gloves or eye protection)?		
First Aid	**Yes**	**No**	Do Companions, Coworkers, Staff and Volunteers know how to use personal protective equipment?		
Is the first aid kit accessible and clearly labelled?					
Is the first aid kit adequate and complete?					
Is the first aid kit clean and dry?					
Are emergency numbers displayed?					
Are accident report forms readily available?					

HSP2: GLENORA FARM - VEHICLE INSPECTION CHECKLIST

If you notice a safety issue with the vehicle, please inform the Facility Manager or Maintenance Manager as soon as possible. The Facility Manager or Maintenance Manager will inform you if the vehicle is safe to drive. Please include the date at the top of the column and write your initials in each box after you have checked that item.

Vehicle Make	**Vehicle Model**	**Vehicle Year**	**Vehicle License Plate**

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Date/Initials						**Comments:**
PRE-START UP:						
Engine oil						
Coolant						
Windshield washer fluid						
Tires (wear, visible tire pressure)						

START ENGINE:						**Comments:**
Odometer reading						
Headlights (high, low)						
Turn signals (front, rear)						
Emergency signal						
Tail lights/reverse lights						
Foot brake						
Parking brake						
Horn						

Mirrors, Windows						
Windshield wipers						
Dashboard warning lights						

HSP3: FIRST AID / MEDICATION / INSPECTIONS & EMERGENCY PLANS

Associated standard 1.H.2 (a, b) and 1.H.9 (a, b, c, d (1, 2)

POLICY

To ensure Companion and Coworker safety and security, The Ita Wegman ensures all sites maintain first aid, medication, inspection and emergency plans that are current, reviewed and in working order. There is emergency information easily available at all times for each Companion and Coworker, such as emergency contact numbers, necessary medical information etc. All Coworkers are to be clear about the location of the nearest emergency room, medical clinic, and how to reach emergency services i.e. 911.

FIRST AID KIT: Must be readily available. Must have a checklist in it or beside it that is checked off quarterly to ensure all items are in the kit or replaced as necessary. A First Aid kit including a Injury Log must be kept up to date and in all sites/vehicles operated by The Ita Wegman Association.

MEDICATION GUIDELINES: Must be clearly understood by Coworkers working at sites managing medications and as such all medications must be locked/secured and a log must clearly state what has been given, when and by whom. All trained and approved Coworkers managing medications must follow the 5 R's (right person, right medication, right dose, right time, right route).

TRAINING: All persons working must have up-to-date Level One First Aid and CPR training. A copy of this is kept on the Coworker's file at the administration office.

INSPECTIONS: One external Health and Safety inspection is conducted annually e.g. Fire Department, or a person with specific credentials/safety knowledge is available internally, this would be considered equivalent. A Health and Safety Site Documentation Form – External is completed. Ensure documentation completed includes quarterly checks on smoke detectors and carbon monoxide detectors.

Two internal Health and Safety inspections are completed annually by the joint health and safety committee (JHSC). It is reasonable for the inspections to be similar to the external inspection in order to maintain a readiness for compliance to inspections by external regulatory agencies. Ongoing evaluations are key to continuous improvements.

Working, up to date (annually checked by fire department) 5lb fire extinguishers are present at every site on every floor and all Coworkers are familiar with their location, and operation.

EMERGENCY PLANS: All Coworkers are to be familiar with all emergency plans and as such are expected to review and be aware of policies around evacuation, and temporary shelter, continuation of essential services, emergency phone numbers and notification of the fire department. Each emergency plan is tested at least once per quarter at every The Ita Wegman Association site. These tests must be documented, reviewed and signed by the Facility Manager and held within the Administration files. The results of these drills are analyzed for performance improvement and lead to changes or affirm current practice.

Documentation of training is maintained in each Coworker's file, and will demonstrate each person's competency in the following areas:

- Safety practices
- Identification of unsafe environmental factors

- Emergency procedures
- Evacuation procedures
- Identification of critical incidents
- Reporting of critical incidents.

Responsibility of: All Coworkers

Monitored by: Facility Manager and House Coordinators

HSP4: FIRST AID KIT CHECKLIST AND INJURY LOG

Associated standard 1.H.2 (a, b) and 1.H.9 (a, b, c, d (1, 2)

Date Checked:	
Kit Checked By:	
Signature:	

# to be in the first aid kit	Description: (BC Basic First Aid Kit Contents)	Actual # Available	Number to Reorder	Date of Restocking	Expiry date
1	CPR Mask with One-Way Valve				
4	Pairs of Vinyl Examination Gloves				
1	Paramedic Scissors				

8	Benzalkonium Chloride Antiseptic Towelettes				
1	Cloth Adhesive Tape 2.5cm x 4.5m				
1	Triangular Bandage 102 x 102 x 142 cm				
6	Sterile Gauze Pads 10.2 x 10.2 cm				
1	Compress Pressure Bandage with Crepe Ties 11.4 x 15.2 cm				
5	Plastic Adhesive Bandages 1.9 x 7.6 cm				
5	Fabric Adhesive Bandages 2.5 x 7.6 cm				
5	Knuckle Adhesive Bandages				
5	Fabric Fingertip Adhesive Bandages				
2	Fabric Patch Adhesive Bandages 5 x 7.6 cm				
3	Junior Adhesive Bandages				
1	Elastic Wrap Bandages 7.6 cm				
1	Waterproof Waste Bag				

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LOG OF INJURY

Date	Coworker	Companion	Injury Description	Reported to: FM/HC/Other	Critical Y/N

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HSP5: SMOKE DETECTORS / CARBON MONOXIDE DETECTOR CHECKLIST

Associated standard 1.H.2 (a, b)

House:_____ Date: _____

Smoke detectors and Carbon Monoxide detectors need to be checked quarterly. Batteries need to be changed yearly.

CO Detector #	checked	Batteries Changed	Comments	Smoke Detector #	checked	Batteries Changed	Comments
Smoke Detector #	checked	Batteries Changed	Comments				

Form completed by: _____

HSP6: COMPANION SAFETY AND RISK PLANNING

Associated standards 1.H.2 (a, b) and 2.A.17 a, b (1, 2), c (1, 2, 3), d

POLICY

The Ita Wegman Association collects information on Companion safety and risk issues before intake through the anamnesis document and conversations with the individual and family representatives and CLBC Facilitators. Safety and risk information is collected on an ongoing basis through one-on-one conversations, Care Group meetings, annual ISP meetings, etc. Safety and risk issues are also discussed at intake and during the onboarding phase. This information is included in Care Plans, Risk Assessments, and the online database. All safety needs are reviewed on an ongoing basis and adjustments or changes to support needs are documented and communicated to Coworkers. Companion Care Plans are reviewed and updated annually or as needed when changes in support needs arise. All actions developed are done so to ensure protocols are in place to ensure Companion and Coworkers safety.

Responsibility of: House Coordinators, Workshop Leaders

Monitored by: Facility Manager and Quality Assurance Coordinator

HSP7: PHYSICAL RESTRAINT AND PREVENTATIVE MEASURES

Associated standard 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5) and 2.A.19 a, b (1, 2)

POLICY

Glenora Farm Coworkers are trained in The Mandt System to maintain personal awareness and employ preventative measures to build positive relationships with Companions. Coworkers are trained in evaluating the environment and personal stressors and how to interact with Companions based on where they are on the crisis cycle to prevent unsafe behaviour. Coworkers are trained in de-escalation tools, and use their training to empower Companions to change their own behaviour.

DEFINITION AND DESCRIPTION

Physical restraint is when a Coworker limits, but does not immobilize, the movement of a capable person who poses an immediate and believable physical threat to themselves or others. Nonphysical options are always used first, and Coworkers use the least amount of strength required for safety.

Seclusion involves the confinement of the Companion in a room or area from which free exit is prevented.

Glenora Farm Coworkers may engage in physical restraint as a last-resort when the Companion is going to hurt themself or someone else in the day or residential program. Glenora Farm Coworkers will never engage in seclusion in either the day or residential program.

PROCEDURES

Physical Intervention Training and Education
All direct support Coworkers are trained in related health and safety policies and procedures upon hire, and are required to engage in annual Mandt training by a certified instructor.

Companion family representatives, advocates, or Public Guardian and Trustees are informed and educated on the Mandt System approach and when physical restraint may be used.

Glenora Farm does not engage in seclusion at any time in the residential and day programs.

RULES GOVERNING THE USE OF CRISIS INTERVENTION

- Only Coworkers trained in the technical portion of The Mandt System are able to employ physical restraints.
- If a Companion needs to be restrained semi-regularly, Coworkers will ensure that information is documented in the Care Plan with a signature from a medical doctor, updated annually.
- Before engaging in physical restraint, Coworkers will use the graded hierarchy of interventions (philosophy and attitude, non-verbal communication, verbal communication, accompanying, supporting, avoiding, redirecting, releasing, and restraining).
- Physical restraint is only permitted if there is an immediate and believable risk of harm to self or others by someone who is physically capable. Physical restraint is never used

for any other reason. Coworkers use the minimum amount of strength necessary to safely restrain a Companion.

- A maximum of two Coworkers will engage in physical restraint at the same time.
- Coworkers will engage in physical restraint for a maximum of three minutes. After three minutes, the Coworker must begin to disengage and be prepared to re-engage for a maximum of three more minutes. Coworkers will be aware of the condition of the Companion and will disengage if the threat is no longer immediate.

DE-BRIEFING /POSTVENTION

- All critical incidents are followed by three debrief sessions. ***Please refer to EP9 - Critical Incident Debriefing and Timeline.***
- Immediate debrief: Short in length, immediate, and emotional. The immediate debrief allows Coworkers to discuss feelings surrounding the situation. This should happen before Coworkers are expected to return to work or home. There is no blame or judgement assigned.
- Assessment debrief: Medium in length, once Coworkers have returned to stabilization or baseline phase, and non-emotional. Coworkers discuss what went well and what could be improved next time. There is no blame or judgement assigned.
- Long-term debrief: Longer in length, after the crisis, and non-emotional. Coworkers identify learning areas and communicate those with other Coworkers. The goal is to discover better ways to handle the situation in the future. There is no blame or judgement assigned.

ACCOUNTABILITY AND REPORTING

- Unless a Companion has a Critical Incident Exemption form approved by CLBC and a Behavioural Consultant, restraint and seclusion is considered a critical incident and must be reported to Island Health and CLBC within 24 hours. ***Please refer to HSP8 - Critical Incident.***
- Coworkers will monitor the Companion for a minimum of 24 hours after any instances of restraint.
- If a Companion is injured after restraint, Coworkers will ensure the Companion has access to First Aid or professional medical support.

The Ita Wegman Association
of British Columbia

Responsibility of: All Coworkers

Monitored by: House Coordinator, Workshop Leader, Facility Manager

HSP8: CRITICAL INCIDENTS

Associated standard 1.H.2 (a, b) - 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5), 1.H.11.a,b

DEFINITION

Critical incidents are defined as those incidents, which are serious, have significant impact upon individuals and are not typically viewed as normal occurrences or behaviour. Critical incidents are further defined as major medical emergencies (including allegations and disclosures of abuse, neglect, harmful behavior), major police incidents, fire, bomb, natural disaster or other major emergency including, but not limited to, the following:

- **Aggression between persons in care**
  Aggression between persons in care means aggressive behaviour by a person in care towards another person in care that causes an injury that requires
  a) first aid,
  b) emergency care by a medical practitioner or nurse practitioner, or
  c) transfer to a hospital.

- **Aggressive/ Unusual behaviour or violence**
  Aggressive or unusual behaviour by an individual that results in harm and/or causes significant concern. Harm can be done to property or a person. Harm to a person can be physical or emotional harm, and can be towards themselves, another supported individual, staff or others. Unusual behaviour means behaviour that is unusual FOR THE PERSON.

- **Attempted Suicide or Suicide**
  Attempt by an individual to intentionally self-harm for the purpose of taking their own life. Suicidal threats are not critical incidents, but they should be recorded as non-reportable incidents by the service provider and reported to a healthcare professional. If there is a pattern of suicidal threats or suicidal ideation, it is important that the service provider follow-up with a healthcare professional.

- **Choking**
  An individual's airway is obstructed, requiring first aid, emergency care by a medical practitioner or nurse practitioner, or transfer to a hospital. Choking is a prevalent cause of death among individuals. All choking incidents that do not require first aid or any type of immediate medical assistance and are not reportable as critical incidents, should be recorded as non-reportable incidents by the service provider and reported to a healthcare professional.

- **Death - expected/ unexpected (sentinel events)**
  Any death of a person.

- **Communicable disease / outbreak**
  An outbreak or the occurrence of a disease above the incident level beyond that which is normally expected, including a communicable disease or parasite such as scabies. Transmission can be by direct or indirect contact with infected persons or with their excretions in the air, water, food or on surfaces or equipment.

- **Infection control**

Standard/universal precautions are steps taken for protection when coming into contact with the blood or body fluids of other people.

- **Biohazard**

Coming into contact with a biozahardous material. Please refer to ***HSP21 Bio Hazardous Material*** for the full list.

- **Emergency Restraint / Seclusion/ Restriction of Rights**
  Use of physical, mechanical, chemical or other means to temporarily subdue or limit the freedom of movement of a person in care. Includes containment, which is restraining a person's freedom of movement within a certain area, e.g. half door that contains a person within one room, locked exits, or locking seat belt in vehicle. Restraint protocols

must be part of an approved Behaviour Support Plan. Each incident must be reported and documented on a person's served file.
Restraints that are required for medical purposes only as prescribed by a health care professional (i.e. not required for behavioural purposes) are not considered restricted practices and do not need to be reported as critical incidents. Under no circumstances does Glenora Farm engage in seclusion in any of its programs.

- **Emotional Abuse**
  Means any act, or lack of action, which may diminish the sense of dignity of a person in care, perpetrated by a person who is not in care, such as verbal harassment, yelling or confinement. Emotional abuse may include: intimidation, withholding needed medication, censoring mail, invitation or denial of privacy or denial of access to visitors.

- **Fall**
  A fall of such seriousness, experienced by a person in care, as to require emergency care by a medical or nurse practitioner, or transfer to a hospital.

- **Financial Abuse**
  The misuse of funds and assets of a person receiving support by a person not receiving support, or the obtaining of the property and funds of a person receiving support by a person not receiving support without the knowledge and full consent of the person receiving support or their substitute decision maker.

- **Medication Error**
  An error in the administration of a medication, which adversely affects a person receiving services or requires emergency intervention or transfer to a hospital. Medication errors that do not result in emergency care by a medical or nurse practitioner or transfer to a hospital should be recorded by the service provider as non reportable incidents.

- **Missing/ Wandering (Elopement)**
  Unscheduled or unexplained absence of an individual from a CLBC funded service. An absence is considered unscheduled or unexplained if it is unusual for the individual, the service provider is unaware of their location, and the behaviour is not reflected in a Behaviour Support and Safety Plan.

- **Motor Vehicle Accident/ Injury**
  Injury to an individual as a result of a motor vehicle accident while participating in a CLBC funded service.

- **Neglect**
  Alleged or actual failure of a service provider to meet the individual's needs, including the need for food, shelter, medical attention or supervision, which endangers the individual's safety.

- **Other Injury**
  Any other injury or assault to an individual (including those of sexual nature, that do not meet the definition of Abuse) that requires emergency care by a medical or nurse practitioner, or transfer to a hospital.

- **Physical Abuse**
  Alleged of actual excessive or inappropriate physical force directed at an individual by a person in a position of authority or trust, including: a staff member or volunteer or a person who is not responsible for providing services and is not a supported individual. The alleged or actual physical abuse is perpetrated against the individual. This critical incident type is never about the individual's actions towards a staff or any other persons.

- **Poisoning, Food Poisoning**
  Illness of an individual requiring emergency care by a medical practitioner or nurse practitioner, or transfer to a hospital, including food poisoning. Food poisoning is a food borne illness involving an individual that requires emergency care.

- **Service Delivery Problems**
  Condition or event that could impair or interrupt the ability of a service provider and its staff to provide care to an individual and which affects the individual's health, safety, dignity, or wellbeing. For example, a sudden illness of a caregiver. Other events that may affect service delivery but are not critical incidents including incarceration and expected hospitalization must be recorded by the service provider. In these situations, the service provider should contact their liaison analyst to inform them that the individual is expected to be away from service.

- **Sexual Abuse**
  Any sexual behaviour directed towards a person receiving services by an employee,

volunteer or any other person in a position of trust, power, or authority and includes: any sexual exploitation whether consensual or not. Sexual behaviour may include inappropriate, unsolicited, or forced sexual attention.

- **Sexual Assault**

Unwanted physical contact, Sexual advances, Requests for sexual favours, Suggestive or offensive comments or gestures emphasizing sexuality, sexual identity, or sexual orientation.

- **Unexpected Critical Illness**
  Illness of an individual requiring emergency care by a medical practitioner or nurse practitioner, or transfer to a hospital.
- **Weapon Use and Unauthorized Possession**
  An individual who uses or threatens to use a weapon to harm or threaten somebody. A weapon includes any object used to threaten, hurt, or kill a person, or destroy property. Weapons may include but are not limited to loaded or unloaded firearms, knives, swords, mace, pepper spray or derivatives, and improper use of laser beams. Incidents where an individual possesses a weapon, for example, a pocketknife but does not use or threaten to use it, should be recorded by the service provider as a non-reportable incident.
- **Unauthorized use and possession of legal or illegal substances**

Illegal drugs are not permitted at Glenora Farm. Legal or prescribed drugs must be used as prescribed and monitored, controlled, and safely stored.

- **Overdose**

Any drug overdose when a person has taken a toxic amount of drugs or a combination of drugs.

POLICY

In situations that are deemed critical, the safety and well-being of Companions and Coworkers is of primary concern. All critical incidents must be immediately dealt with by the Senior Coworker present and involve emergency response personnel (police, fire, ambulance), if necessary.

Reporting for a critical incident must be completed immediately and forwarded to the Facility

Manager.
The Facility Manager will report the critical incident to all appropriate municipal and provincial government authorities i.e. Licensing Authorities or Worksafe BC, as necessary.
In case of a power outage and/ or failure to report a critical incident to Community Living BC (CLBC), or with the Island Health e-Incident/ Fax Form, call CLBC and Island Health immediately leaving a message to report the critical incident taking place and file the Critical Incident Report Form as soon as possible.

PROCEDURES

Glenora Farm has a training system in place to ensure all Coworkers are trained in and aware of critical incidents. Prevention measures are included in the specific policy (ie. HSP24 - Abuse and Neglect Standard. Mandt training is provided to all Coworkers.

Coworkers will provide for the immediate treatment of injured parties, notifying emergency response personnel as appropriate. If the incident is not covered under existing policies and/ or procedures, Coworkers will enlist whatever internal or external support and/or expertise required to support the need/ situation. When it is safe to do so, the attending Coworker will notify the Facility Manager.

REPORTING AND DOCUMENTATION GUIDELINES

All critical incidents will be recorded and documented by the attending Coworkers using Glenora Farm's Companion database and then immediately forwarded to the Facility Manager. The Facility Manager will determine follow-up action. The Facility Manager will record the critical incident on the critical incident annual analysis report. A written analysis of all critical incidents is provided to leadership on an annual basis which addresses causes, trends, areas needing improvements, actions to address the improvements needed, implementation of the actions, whether the actions taken accomplished the intended results, necessary education and training of Coworkers, prevention of recurrence, and internal and external reporting requirements.

In case of a power outage, please call
CLBC / MCFD's Provincial Centralized Screening at 1-800-663-9122
and leave a phone message with Island Health at 250 - 370 - 8699.

- Critical Incident debriefing will occur in accordance with ***EP9 Critical Incident Debriefing*.**

- **REPORTING GUIDELINES**
- Please include ***only factual information*** when describing a critical incident report. This should include: why, who, where, how, and approximate times (when), also provide any direction given i.e. *Doctor Jones prescribed aspirin to be administered 3 times daily.* Include a sufficient amount of information so that if someone has never met any of the individuals involved, a clear picture will emerge about what happened. What happened leading up to the incident – what happened during the incident – what happened after the incident was over, and what follow up is anticipated?
- Do not include guesses or opinions.
- Indicate at what approximate time people were contacted, what people stated, any badge numbers or file numbers
- Please ensure a copy of the report is forwarded to the Facility Manager immediately for review, follow up and further reporting requirements.
- Quarterly, all incidents are reviewed by the Facility Manager to look for trends. A report is created from this review to come up with recommendations if any are necessary.
- The original incident report should be held in a file/binder labeled Critical Incident Reports and kept in the office of The Ita Wegman Association in a secure and locked location.
- All Coworkers working with The Ita Wegman Association Companions must be trained in critical incident report writing within the database.

TIMELY DEBRIEFING

Please refer to ***EP9 - Critical Incident Debriefing and Timeline.***

ANALYSIS AND REMEDIAL ACTION

The association engages with a critical incident analysis on an annual basis, or as needed. The analysis includes causes, trends, areas needing improvement (remedial actions to address the

improvements needed, implementation of the actions, whether the actions taken accomplished the intended results, necessary education/training of Coworkers, prevention of occurrence, and internal and external reporting requirements).

Responsibility of: All Coworkers

Monitored by: Facility Manager

HSP9: CRITICAL INCIDENT REPORT FORM

Associated standards 1.H.2 (a, b) and 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11)

NOTIFICATION (completed by Facility Manager)		
	Date of Notification:	**Time of Notification:**
1. Police, Fire Department, Ambulance		
2. Facility Manager		
3. Supervisor		
4. Licensing (IH, CLBC)		
5. Medical Authority (i.e. Poison Control 811, pharmacist)		
6. Legal Guardian / Family Representative		
7. WCB (filed with Business Administrator)		

CRITICAL INCIDENT REPORT FORM

(to be forwarded to Facility Manager)

The Ita Wegman Association
of British Columbia

Date of Occurrence: (D/M/Y)		Time of Occurrence:	
Reporting person:		Location Address:	
Name of companion:		Date of Birth:	Sex: M F
Other individuals involved:			
Name:			Relationship/Role:

TYPE OF CRITICAL INCIDENT (Circle or Underline)		
1. Aggression between persons in care 2. Aggressive /unusual behaviour 3. Attempted suicide 4. Choking 5. Death - expected /unexpected 6. Disease outbreak 7. Emergency restraint/seclusion	8. Emotional abuse 9. Fall 10. Financial abuse 11. Medication error 12. Missing /wandering 13. Motor vehicle injury 14. Neglect	15. Other injury 16. Physical abuse 17. Poisoning /food poisoning 18. Service delivery problems 19. Sexual abuse 20. Unexpected Critical illness 21. Weapon use

DETAILS OF THE INCIDENT: (use separate sheet if necessary). Provide a **FACTUA**L account of what happened or alleged to have happened, detailing who was involved, where, when and

why (if possible). Describe any direction given by medical personnel. Ensure Dr names, police names and badges are recorded and the times when professionals are notified.

Signature of reporting Individual:		Date:	

Signature of Facility Manager Reviewing Report:		Date:	

HSP10: ADULT GUARDIANSHIP POLICY

Associated standards 1.H.2 (a, b) and 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I

POLICY

The BC Adult Guardianship Act is designed to promote every adult's right to self-determination and recognizes the need to ensure adults who may require protection from abuse, neglect, or self-neglect have access to a timely response and support. It is a formal safeguard for individuals CLBC supports. The BC Adult Guardianship Act ensures that:

a. Companions have self-determination in decision making,

b. Companions have the right to the most effective and least intrusive form of support,

c. Using the court is the last option once all alternatives including support and assistance planning have been offered to the Companion.

d. There is a presumption of capability:

i) Until the contrary is demonstrated. Every adult is presumed to be capable of making decisions about their personal care, health care, and financial affairs.

ii) An adult's way of communicating with others is not grounds for deciding that they are incapable of making decisions about anything referred to in subsection (i).

All Glenora Farm Coworkers must adhere to the regulations outlined in the Adult Guardianship Act.

PROCEDURE

Companions may be vulnerable to abuse or neglect, sometimes unintentional. In some situations, Companions may not have an external support system to ensure their safety and well-being. Glenora Farm is not designated under the Adult Guardianship Act and therefore does not have the authority to investigate allegations of abuse, neglect, and self-neglect that occur during provision of services. Glenora Farm is responsible for ensuring the conduct of all Coworkers and volunteers is in line with the BC Adult Guardianship Act.

If you are aware of a situation where it appears that a Companion is experiencing abuse or neglect, please notify the Facility Manager, who will notify the local CLBC office.

CLBC will respond to these concerns by conducting an investigation, when appropriate, and determining how best to resolve the issues raised and support the Companion. If you raise a concern or make a report, your identity will remain anonymous unless you indicate otherwise. If contacting the Facility Manager is not possible for any reason, you should contact the nearest CLBC office. You can report suspected instances of abuse, neglect, and self-neglect to any CLBC staff member. The CLBC staff member will report your concern to the Regional Integrated Services Manager and forward the report to CLBC staff responsible for adult guardianship investigations. You will not be expected to remain involved or required to participate in any investigation or legal action.

DEFINITIONS

To assist you in determining whether you should notify your Facility Manager or a CLBC staff member of suspected abuse, self-abuse or neglect of a Companion, the following are the definitions provided by the Adult Guardianship Act:

Abuse, as defined in the Adult Guardianship Act, means:

As defined in the Adult Guardianship Act: The deliberate mistreatment of an adult that causes the adult:

(a) Physical, mental or emotional harm, or

(b) Damage or loss in respect of the adult's financial affairs, and includes intimidation, humiliation, physical assault, sexual assault, overmedication, withholding needed medication, censoring mail, invasion or denial of privacy or denial of access to visitors.

Neglect, as defined in the Adult Guardianship Act, means:

• Any failure to provide necessary care, assistance, guidance or attention to an adult that causes, or is reasonably likely to cause within a short period of time, the adult serious physical, mental or emotional harm or substantial damage or loss in respect of the adult's financial affairs and includes self-neglect.

Self-neglect, as defined in the Adult Guardianship Act, means:

• Any failure of an adult to take care of themselves that causes, or is reasonably likely to cause within a short period of time, serious physical or mental harm or substantial damage or loss in respect of the adult's financial affairs, and includes:

(a) Living in grossly unsanitary conditions,

(b) Suffering from an untreated illness, disease or injury,

(c) Suffering from malnutrition to such an extent that, without intervention, the adult's physical or mental health is likely to be severely impaired, and

(d) Creating a hazardous situation that will likely cause serious physical harm to the adult or others or cause substantial damage to or loss of property.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator

The Ita Wegman Association
of British Columbia

HSP11: MEDICATION PRESCRIPTION SUPPORT, DOCUMENTATION AND MAR SHEETS

Associated standard 2.C.1(a,b,c,d,e,f,g (1,2), 2.A.21 (a, b) - 2.C.2 (a, b, c, d, e, f, g) - 2.C.5. (a, b, c, d (1, 2, 3) and 2.C.6 (a, b, c, d (1, 2), e, f (1, 2), g, h

POLICY

The Ita Wegman Association does not prescribe or dispense medication; Coworkers only monitor and administer medications this includes homeopathic medications. In this regard, Coworkers monitor those Companions who are able to manage their medications and treatments independently and assist in the administration of medications and treatments for Companions who require ongoing assistance.

Only medications which have been prescribed by a licensed medical practitioner are administered to a Companion. Medication profiles are developed for Companions with medication(s) or identified treatment needs and are reviewed annually, or as needed with the licensed medical practitioner and the attending pharmacist. For Companions residing in The Ita Wegman Association residences, House Coordinator or designated alternate are required to attend all meetings (when applicable) with physicians if a change in medication or a new medication prescription is anticipated. The House Coordinator must maintain clear communication regarding medications prescribed and administered with Companion representatives as required.

PROCEDURES

COMPANION PRESCRIPTION MEDICATION SUPPORT

PHYSICIAN VISITS

- Medications must be monitored and /or administered as prescribed by a Companion's physician. Medication ordered by a physician may not be discontinued or dosage changed without consultation with the physician. All changes to medication are to be forwarded to the House Coordinator.
- Coworkers need to recognize that a Companion can be unaware of the side effects, precautions necessary or risks that can occur with medications. Each Companion should be supported to obtain complete information from the physician, pharmacist and other

resources available. Prior to the medication being started, Coworkers will read the medication monitoring form provided by the pharmacy that lists each drug and its side effects. All such information is to be kept in the Companion's documentation binder and in the online system. Each Companion should be supported to understand the information about the administration of their medication and the appropriate use of over-the-counter drugs.

- Medical appointments should review the effectiveness and appropriateness of medication on a regular and as needed basis.
- Any recognized adverse effects must be reported immediately to the Companion's physician and resulting recommendations implemented.

ANNUAL REVIEWS

- At least annually, or more frequently, as appropriate, medications and treatments will be reviewed by MSAC (Medical Service Advisory Committee) with each Companion. A list of medications will be maintained and reviewed with each Companion, including those who self-administer. Support agreements shall be amended for major changes in medication and treatments or changes in the support required to administer.
- The annual review should address issues such as side effects, mixing prescription medication with over-the-counter drugs, alcohol, cannabis, etc. as outlined below.
- Each Companion who requires support to administer their medication will receive support geared to their specific needs.
- Each Companion's support plan will clarify the assistance a Companion requires to move toward self-administration. This plan will incorporate a Companion's strengths and will be reviewed on a regular basis by the Companion with help from other people involved in their life.
- For additional safety, support should be provided to assist each Companion with specific medical challenges, to purchase medic-alert bracelets or necklaces. Other practices may be incorporated to increase safety and minimize risk of medication error.

PRESCRIPTION FULFILLMENT AND PAYMENT

- Prescriptions for medication shall be filled at the pharmacy of the Companion's choice.

- The B.C. Care Card covers most Companion medications. These care cards must be supplied to the pharmacy when ordering.
- The Companion pays for medications not covered by the care plan.

MSAC (MEDICATION SAFETY ADVISORY COMMITTEE)

- Each Companion will have a designated MSAC consisting of the House Coordinator and the dispensing pharmacist.
- The MSAC will conduct a medication review annually, including: inspection of the medication storage area and practices, review of training processes, inspection of MAR documentation, review of Standing Order Authorizations, inspection of first aid box contents.
- The MSAC is responsible for maintaining up-to-date medication records (provided by the dispensing pharmacy), which are to be stored near the medication and made accessible to all Coworkers administering medication.

MEDICATION DOCUMENTATION

GENERAL MEDICATION AND PRESCRIPTION DOCUMENTATION

- Written Companion protocols, procedures, training and orientation will be implemented to minimize the opportunity for medication error to occur.
- Any discrepancies or missing medication must be reported to the House Coordinator immediately and an incident report completed as per reporting policy.
- Coworkers will maintain a record of medication (MAR) documenting the dosage, frequency and time of medication support. MAR sheets will be prepared by the dispensing pharmacy.

MEDICATION PROFILES

Clear medication profiles must be maintained, including:

- The name of the medication,
- Dose and time administered,
- The date it was ordered,

- The name of the doctor who prescribed it,
- Possible side effects, and
- A brief explanation of the reason for the medication.

The House Coordinator is responsible for the maintenance of medications fact sheets and medication administration (MAR) sheets. This includes all PRNs. The House Coordinator will also select, train and oversee the Coworkers who will administer the medication.

INFORMED CONSENT

- Documentation of informed consent from all Companions requiring medication will be acquired for all medication use and support. Documentation will also include any dietary needs and restrictions associated with medication use and will be documented in all Companion files prior to any medication support commencing.
- The Companion will retain a copy if they wish.

PREGNANCY AND MEDICATION USAGE

If a Companion is pregnant, they must inform a Coworker as soon as possible as they may need to stop or change their medications. The Companion's medical doctor will support the companion in deciding if any medications need to change. It is important to consider the effects of the use of prescription and non-prescription medications, including alcohol, during pregnancy.

Responsibility of: All Coworkers

Monitored by: House Coordinator and Facility Manager

HSP12: MEDICATION ACQUISITION, PACKAGING, LABELING, STORAGE, MAINTENANCE AND DISPOSAL

Associated standards 2.C.2 (a, b, c, d, e, f, g) and 2.C.5. (a, b, c, d (1, 2, 3)

POLICY

The Ita Wegman Association does not prescribe or dispense medication; Coworkers only monitor and administer medications this includes homeopathic medications. In this regard, Coworkers monitor those Companions who are able to manage their medications and treatments independently and assist in the administration of medications and treatments for Companions who require ongoing assistance.
The Ita Wegman Association adheres to all Adult Care Regulations regarding medication storage, monitoring, review, administration, records keeping and reporting, i.e., any errors or adverse reactions are reported promptly and are responded to appropriately. Training is conducted for identified House Coordinators and Coworkers to ensure medication regulations are properly followed and supported. Training is documented in Coworker files and reviewed minimally annually to support quality improvement and competency-based training efforts.

PROCEDURES

PROCEDURE FOR PURCHASING AND MAINTENANCE OF MEDICATION AND SUPPLY OF MEDICATION

Medication purchasing and maintenance will follow standard drug prescription and payment procedures of the BC Provincial Health Care Program and Medical Services Plan. This protocol involves prescriptions being handed to the Companion, family representative or Coworker by the physician; the Companion, family representative or Coworker then taking the prescription to a pharmacy of choice, the pharmacy filling the prescription and handing the completed order to the Companion, family representative or Coworker. Medication use is monitored by Coworker to support maintenance needs.

The pharmacy will bill the Medical Services Plan through the Companion's Care Card. In the event that the Care Card does not cover a drug, the Companion will be billed directly and must pay privately.

PROCEDURE FOR TRANSPORTATION & DELIVERY OF MEDICATION

The Companion, family representative and/or Coworker and their pharmacy will manage transportation and delivery of medications. Planning will involve the coordination of pick-up requests, standing orders, delivery protocols and emergency contact information. Planning and

established protocols will be documented in Companion files and coordinated with the Companion's pharmacy to ensure accurate oversight is demonstrated.

PROCEDURE FOR MEDICATION STORAGE, PACKAGING, LABELING, HANDLING AND USE

- Medications are kept in a locked medicine/filing cabinet, or other secure location. Medications requiring refrigeration or protection from light are stored accordingly i.e. refrigeration unit that is secure and locked, medication stored in light proof filing/medicine cabinet or drawer that is secure and locked.
- The pharmacy and/or prescription container may provide additional information for the proper storage of medications.
- Narcotics and barbiturates will be stored in a secure and light free location i.e. locked medicine cabinet in staff office, which has a double bolt lock.
- Medications must be clearly labeled by the pharmacy for the Companion for whom they are prescribed.
- Medications must remain in their original, labeled containers.
- For any medication that is not prepared in blisters and comes in its original packaging, the original box and instruction sheet (if applicable) need to be stored together with the container holding the medication (tablets, drops, juice, ointment etc.). The date of opening the container and the date of expiration (when available) must be noted on either the container itself or on the box.
- An adequate supply of medications shall be maintained.

PROCEDURE FOR MEDICATION DISPOSAL

When medications are to be discarded, the following will occur:

- Under no circumstances may a Coworker discard a medication directly; it must be returned to the pharmacy.
- Document the medication to be discarded and the reasons for discarding in the comments section of the MAR sheet.

- Return the medication to the pharmacy or to the pharmacist during the annual MSAC check.
- Include the discard details in your agenda for your annual MSAC check.
- When a Companion is no longer taking a medication or if the medication's expiry date has passed, it must be returned to the pharmacy.

HANDLING MEDICATION SHORTAGES WEEKDAYS AND ON THE WEEKEND

If, for whatever reason, a medication shortage is discovered on the weekend, all British Columbia pharmacies are capable of filling a prescription throughout the weekend. The Companion, family representative, House Coordinator or designated Coworker will speak to the pharmacist, explain the situation and request additional medication. The physician or on-call doctor may have to be contacted.

The prescription is then filled and the Companion, family representative, House Coordinator or designate will make arrangements for the medication to be picked up or delivered. All shortages will be documented on Companion MAR forms for follow up, incident reporting and quality assurance efforts.

Responsibility of: All Coworkers

Monitored by: House Coordinator & Facility Manager

HSP13: MEDICATION HANDLING AND ADMINISTRATION

Associated standards 2.A.21 (a, b) - 2.C.2 (a, b, c, d, e, f, g) and 2.C.5. (a, b, c, d (1, 2, 3)

POLICY

The Ita Wegman Association does not prescribe or dispense medication; Coworkers only monitor and administer medications this includes homeopathic medications. In this regard,

Coworkers monitor those Companions who are able to manage their medications and treatments independently and assist in the administration of medications and treatments for Companions who require ongoing assistance.

Only Coworkers over the age of 19 who have been trained in medication safety and administration are able to monitor and administer Companion medications.

Companions who self-administer are responsible for the physical care of their medications including having their meds on hand as needed. Medication self-administration occurs only after obtaining the approval of the involved doctor, Medical Health Licensing Officer and Pharmacist and is recorded in the Companion's medication profile. Only medications which have been prescribed by a physician are administered to a Companion.

PROCEDURES

PROCEDURE FOR COWORKER TRAINING

All Coworkers and House Coordinators are provided current and comprehensive training on all medication management expectations prior to supporting Companion needs. Only Coworkers and House Coordinators who have demonstrated this competency can qualify to be trained and oversee medication administration. House Coordinators will select Coworkers to be trained within their houses.

MEDICATION CHECKS

Medication practices indicate that administering medications incorporates the following checks:

- Check label(s) prior to pouring/administering any medication. **RIGHT MEDICATION**
- Observing the correct name of Companion on the medication. **RIGHT PERSON**
- Noting and following the correct dosage of the medication. **RIGHT DOSAGE**
- Noting and following the correct dosage time and frequency. **RIGHT TIME**
- Noting and following the correct way to administer medication. **RIGHT ROUTE**

HANDLING MEDICATIONS

- In order to minimize drug contamination or toxic reactions, medication of any type should never come in contact with the skin, hands or mouth of any Coworker dispensing the medication.
- In the event that medications are touched, wash affected areas immediately and discard contaminated medication as per policy.
- Report any adverse reactions to your physician and complete incident and WCB forms.
- When administering/applying creams or topical medication, use fresh (unused) Q-tips or gloves.
- When administering/pouring capsules and pills, medications must be poured into the bottle cap, medication cup, spoon or tissue.
- Liquids should be administered with the appropriate tools for liquid medications, liquid dropper or calibrated spoon. This procedure will ensure the appropriate dosage is measured.

MEDICATIONS PROCEDURE & UTILIZING MAR SHEETS

Unless otherwise stated in the Companion's support plan, the following procedure should be used when dispensing medications:

- Wash your hands.
- Wear latex gloves when applying topical ointments.
- Check the date and time, and compare the medications listed on the Medication Administration Record (MAR) with the medications on the cards. Make sure you have the right medications for the right person!
- Once you're sure everything checks out, punch the pill(s) out of the blister pack next to the correct date (if a previous dosage has been missed, just leave it in the blister pack). For topical ointments, follow the directions on the container.
- For all non-blister pack medications, check the expiration date before administering.
- Administer the pill(s) to the Companion in the method they most prefer or as directed by physician/pharmacist (with water, on a spoonful of applesauce, etc).
  Stay with the person until the medication is taken.

- After the medications are taken, or the ointment applied, initial the Medication Administration Record in the appropriate box. If the medication is refused or lost, record the appropriate code in the box (see upper left corner of MAR).

MAR documents are considered legal reporting forms and must not be tampered with. If you make an error in recording, circle it and write on the reverse side what happened. Do not use liquid paper or try to change anything once it has been recorded.

Medication dropped or lost should be replaced by using the medication from the last day of the month. Phone the pharmacist to order a replacement for the end of the month. Record the lost medication on the back of the MAR.

SPOILED MEDICATION

If medication is spoiled in any way:

- Dispense another dose of medication, where none of the original dosage was ingested.
- Return the original dosage to the pharmacy for disposal.
- Phone the pharmacy and order one replacement of the medication.
- Indicate on the MAR that one dose had been destroyed and replaced.

Note: if the Companion does not reside at a Ita Wegman Association residence an identified and medication trained Coworker will inform and assist Companion and / or legal guardian of “spoil” and assist where applicable to ensure the pharmacy or origin is notified of the “spoil” and planning coordinated to return original dose for disposal and replacement if required.

PRN MEDICATIONS - ("as needed") are to be recorded on the reverse side of the MAR. Documentation to include the need for PRN and any benefit or lack thereof effects to ensure quality of care and comprehensive reporting.

Approved and trained Coworkers must:

- Sign the PRN out.
- Administer as needed.
- Return the medication to a storage location.
- Report to the House Coordinator / Program Director or designate medication was administered.

- Document on the back of the MAR sheet.
- Report the reason and or effects of the medication, record this in the Companion's notes.
- Follow standard incident debriefing procedure (when applicable).

TIMING – NOTED ON THE MAR

Timing for administering medication must be strictly followed. Coworkers will maintain a running record of the dates and times when medication is given to a Companion (this includes any refusals or missed medications).

CHANGES TO DOSAGE

Any and all changes to medication must be confirmed with the physician and pharmacy before being administered. No hand-written changes will be made on pharmacy labels. Any changes to medication will be documented on the MAR and in the Companion's medical notes. Changes of dosage by a physician will be recorded, dated, and signed on the MAR.

RECORDS

Complete and current records are kept secure and safe in the Companion file. The written record MAR includes the name of medication, dosage, frequency, instructions for use, and the name of the doctor.

Responsibility of: All Coworkers

Monitored by: House Coordinators and Facility Manager

HSP14: MEDICATION INCIDENTS

Associated standard 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5) and 2.C.6 (a, b, c, d (1, 2), e, f (1, 2), g, h

POLICY

The Ita Wegman Association does not prescribe or dispense medication; Coworkers only monitor and administer medications - this includes homeopathic medications. In this regard, Coworkers monitor those Companions who are able to manage their medications and treatments independently and assist in the administration of medications and treatments for Companions who require ongoing assistance.

The Ita Wegman Association adheres to all Adult Care Regulations regarding medication storage, monitoring, review, administration, records keeping and reporting, i.e. any errors or adverse reactions are reported promptly and are responded to appropriately.

PROCEDURES

MISSED MEDICATION OR REFUSAL TO TAKE

There may be occasions when a Companion may miss, lose or refuse their scheduled medication. In the event of any of these events the following will occur:

- Document the missed or lost medication on the MAR sheet.
- Contact the appropriate House Coordinator and inform them of the incident.
- A probable directive could result in the House Coordinator contacting the hospital, pharmacies, and/or Companion's physician.
- House Coordinator to complete a critical incident report immediately and send it to the Facility Manager.

PROCEDURE FOR MEDICATION INCIDENTS

Coworkers should perform a visual check of the pertinent medication sheet that they are attending to. In the event there has been an error(s), follow the appropriate drug incident response.

DEFINITION OF A MEDICATION INCIDENT

Medication incidents are categorized as:

1. Unordered drugs given - any medication given to a person not prescribed for that person.
2. Wrong dosage - any dose above or below the correct dose.

3. Extra dose - any dose given in excess of the total number of times ordered by the physician.
4. Wrong time - any drug given (other than a refusal) more than (1) one hour before or after time ordered.
5. Omission - any dose not given by the time the next dose is due.
6. Wrong route of administration of medication.
7. Spoiled medication.
8. Failure to record administration of medication-on-medication sheet.
9. Incorrectly recording administration of medication-on-medication sheet.
10. Failure to comply with the medication policy / procedures as determined by the House Manager or House Coordinator.
11. A Companion refusing to take their medication or having to destroy a tablet which has been contaminated (i.e., dropped on floor) is not considered a medication error. Similarly, items 7 and 8 may or may not be considered a medication error, depending on the circumstances.

DRUG INCIDENT RESPONSE

The Ita Wegman Association Critical Incident Policy requires that all accidents, injury, serious medication errors and critical incidents be reported immediately to the House Coordinator / Facility Manager.

When a medication incident has occurred, this requires an immediate response. ALL Coworkers or House Coordinators will:

A) Inform the Companion what has occurred, and the steps you are taking to rectify the situation.

B) It is recommended the Coworker or House Coordinator contact one of the following:

- Dispensing pharmacist within twenty (20) minutes of the incident, or the family physician within twenty (20) minutes of the incident
- Contact family and/or a friend as specified in a Companion's support plan

- Contact the House Coordinator / Facility Manager
- Or the BC Poison Information Center - phone 604-682-5050
- Or, as a last resort, the emergency room at the hospital and act on their recommendation.

C) Follow instructions given.

D) When safe to do so contact Facility Manager

E) Report on the incident in the database as a critical incident report, citing how and why the incident occurred, steps taken, who was notified and at what time. Instructions from the pharmacist and/or physician will also be noted, as well as any other pertinent information.

F) Record the physician or pharmacists' instructions in the event log.

Responsibility of: All Coworkers

Monitored by: House Coordinator & Facility Manager

HSP15: MEDICATION INSTRUCTIONS

Associated standard 2.C.2 (a, b, c, d, e, f, g) - 2.C.5. (a, b, c, d (1, 2, 3) and 2.C.6 (a, b, c, d (1, 2), e, f (1, 2), g, h

POLICY

The Ita Wegman Association ensures all medical needs and medication requirements are observed for every Companion. All Coworkers are provided training in the following medical orders given by physicians. When medication is prescribed by a physician for a Companion living within the residence, written instructions will be obtained from the prescribing physician and attending pharmacist as to the identification, potential side effects, means and schedule of administration of each medication prescribed as well as approval for use of over the counter medications.

PROCEDURES

OBSERVATION

PURPOSE*

Observation is essential to assist in making a diagnosis, or in keeping track of a Companion's progress. It gives purpose and direction to the Companion's support. It aids others (doctors, therapists, social workers) in their work with a Companion and their family.

DEVELOPING OBSERVATION SKILLS*

Skill and judgment in observing develop with practice, patience and the will to improve, the same as with any other skill. There are five resources to be used when observing Companions:

- Looking - take particular note to detect any changes in a Companion’s usual facial expressions, skin, body posture. Please note Companion's immediate surroundings (i.e. ventilation, temperature, nourishment) and their condition (i.e. if the diet was consumed or not).
- Listening - is the most important half of a conversation. Purposeful listening during conversation is a means for gaining such information as coherence, disorientation, worries, fears, needs and interests of the Companion.
- Smelling - Unusual odours are an index to circumstances and they capture the attention of an alert Coworker. For example, the observation of a sweet odour on a Companion's breath might be a valuable aid to the physician.
- Talking - it is important to show the Companion genuine acceptance. Keep in mind that how something is said or asked (tone of voice, language used, facial expressions, attention, etc.) makes a difference in the way a Companion responds.

- Touching or Feeling - Taking the pulse is a good example of observing through touch. Placing the hand on the brow detects fever or perspiration. During both, the sense of touch may locate abnormalities of the skin or scalp.

The Coworker has many opportunities to observe; the challenge comes in continued motivation to develop these abilities within your knowledge and responsibilities. The role is one of supplying accurate, specific information to the physician and professionals. It is a vital role.

SIGNS AND SYMPTOMS*

A SIGN is an indicator or a fact that points out evidence of something. These indicators are things that can be seen, heard, felt, smelled, etc. (i.e., taking temperature).

A SYMPTOM is evidence that a Companion shares or tells, such as nausea, headache, chills, fever, fatigue, dizziness, fear.

GUIDELINES IN RECORDING OBSERVATIONS

The following are not necessarily numbered in order of importance, nor would all nine points apply to each recording. However, the time something was observed must accompany the remarks. The nature of what is recorded is determined by what is important for the physician or professional to know.

- Time/when observed.
- Location of abnormal sensation (exactness in so far as possible).
- Duration (how long it lasted, i.e., chill).
- Frequency/intensity (pain was constant or intermittent, severe, mild throbbing, etc.).
- Relief obtained from nursing measures (whether or not they seemed to help).
- General appearance of the Companion (if this has changed).
- Amount, colour, character of discharge (urine, feces, vomit, sputum, drainage).
- Exact words of the individual, when indicated.
- Complaints (as to eating, sleeping, pain, etc.).

TAKING TEMPERATURE

PURPOSE - To determine the temperature of the body heat as an observation.

EQUIPMENT - Thermometer, tissues or cotton swabs, lubricant (water-soluble), paper, pen, a watch with a second hand, and latex gloves.

COURSE OF ACTION - The Ita Wegman Association only uses electric thermometers. Thermometers are to be used according to the instructions included by the manufacturer.

ORAL TEMPERATURE

- Wash hands before and after the procedure.
- Ensure the Companion is in a comfortable position, either sitting or lying down.
- Place the correct end of the thermometer under the Companion's tongue. Ask the Companion to keep their lips closed and see that they do not talk, bite or remove the thermometer.
- Leave the thermometer in place until the thermometer beeps.
- Read the temperature on the thermometer. Place the thermometer in an antiseptic solution. Record the reading in the Companion database.

INFRARED NO-TOUCH TEMPERATURE

- Wash hands before and after the procedure.
- Ensure the Companion is in a comfortable position.
- Turn on the thermometer. Ensure that it is set to ‘body’, not ‘surface’.
- Take the temperature.
- Read the temperature on the thermometer. Record the reading in the Companion database.

NORMAL TEMPERATURE RANGE

The normal range for temperature is 96.8F (36.0C) to 99.5 F (37.5C) if taken orally, or by infrared no-touch thermometer.

Temperature will vary from one Companion to another and will fluctuate throughout the day.

EAR DROPS

- It is recommended that support be provided to avoid contamination or infection. Wash hands before and after the procedure.
- Avoid touching the dropper against the affected ear or any other surface.

- Hold the container in your hand for a few minutes to warm to near body temperature. DO NOT HEAT IN BOILING WATER.
- If the drops are in suspension form, shake well for ten seconds before using.
- Have the Companion lie on their side or tilt the affected ear up for ease of administration.

To allow drops to run in:

- Adults – Hold the earlobe up and back
- Children – Hold the earlobe down and back
- DO NOT insert the dropper into the ear. DO NOT wash droppers to avoid getting water in the drops.
- Maintain the ear tilted for about two (2) seconds, or insert a soft cotton plug, whichever is recommended.
- If the condition persists or becomes worse, or if the Companion experiences any itching or burning in the ear for more than a few minutes after use, contact the physician.
- REMEMBER: Keep the container tightly closed when not in use.
- DO NOT refrigerate, unless instructed to do so by the physician or pharmacist.

NOSE DROPS

- It is recommended that support be provided to avoid contamination or infection. Wash hands before and after the procedure. Wear gloves.
- Have Companion lie on back without a pillow, head turned to the side and slightly back.
- Draw medication into a dropper. Instill prescribed numbers of drops into each nostril.
- Ask the Companion to keep their head back for five minutes.

NASAL SPRAY

- It is recommended that support be provided to avoid contamination or infection. Wash hands before and after the procedure.

- Close the nostril that is not receiving the medication. Do this by gently pressing on that side of the Companion's nose.
- Gently insert the bottle tip into the other nostril.
- Ask Companion to breathe in deeply through that nostril as you squeeze the bottle.
- Repeat if directed.

EYE DROPS AND OINTMENT

- It is recommended that support be provided to avoid contamination or infection. Wash hands before and after the procedure. Wear gloves.
- The tip of the eye dropper, squeeze bottle or ointment tube must not come in contact with the hands, the eyelid or the outside of the cap. If contamination should occur, medication should be discarded.
- Position Companion lying with head tilted backward or sitting in a chair with head tilted backward.
- Cleanse eyelid and lashes from the inner corner to outer corner with moistened cotton swab - avoid pressure on the eye.
- Draw medication into the dropper. With the forefinger of one hand, press against the bony orbit of the eye and gently pull down on the tissue below the lower lid, forming a small pocket with the lower lid. The medication container is held to the side of the face, but it is never closer than one inch from the body. Allow drop(s) to go into the eye pocket between lower lid and eyeball; release eyelid. Keep the eye closed for one minute, use a cotton swab to wipe the eye.
- In instilling an eye ointment, the same procedure is followed. On applying the ointment, squeeze a small ribbon of medication along the inside of the lower lid. With either ointment or drops, the Companion should be advised not to rub the eyes but to blot any excess medication with a clean tissue or cloth.

RECTAL ADMINISTRATION OF SOLID MEDICATION

Purpose - Specific to a Companion's condition. To ensure medication is received when other methods are not feasible.

EQUIPMENT:

- Gloves
- Lubricant
- Tissue wipes or gauze square
- Prescribed medication

APPLICATION:

- Wash hands before and after the procedure.
- Allow Companion as much privacy as possible by covering with a sheet, and exposing only the anal region.
- Turn Companion on the left side with the right knee at a right angle.
- Put on a glove and remove the wrapper from the suppository. Lubricate your index finger.
- Insert suppository gently, point first, into rectum past the internal anal sphincter muscle approximately two and one-half to three inches into the rectum or one finger length. Ask Companion to breathe through the mouth as suppository is inserted; remove finger.
- Apply pressure over the anus; hold buttocks together for a short time.
- Instruct Companion about retaining the suppository; hold for at least 15 to 20 minutes. If possible, for the purpose of defecation, hold until absorption is completed, according to the purpose of the drug and effect desired.
- Leave the Companion warm and comfortable.
- Record. Report and observe as necessary.

CONDITION OF EPILEPSY

Epilepsy is a disorder characterized by disturbances of consciousness generally resulting in seizures. A seizure is a state produced by abnormally excessive discharges within the central nervous system.

TREATMENT OF EPILEPSY

Seizure disorders are dealt with in several ways. Two of these treatment methods include either emphasis on regularity with respect to diet, activity, rest and exercise, or administration of drugs of various types and combinations.

Treatment by drug administration is a common form of control. The objective when dealing with drugs is to obtain the ideal dosage level that will control the seizure but will not interfere with the Companion's daily life.

People who have the condition of epilepsy should adhere to regular meals, sleep and exercise as a precautionary measure in preventing the onset of seizures.

CARE FOR A COMPANION DURING A SEIZURE

When a Companion has a seizure, it is important to remain calm. A seizure may appear harmful but the Companion is not in pain and will probably not suffer any damage resulting from the seizure itself. You cannot stop a seizure once it has begun. Simply let the seizure run its course.

- If the Companion is seated, try to gently pull them onto a flat surface so they do not fall.
- Do not restrain a Companion's movements. Rigid restriction may result in broken bones as the muscular movements during the seizure are very strong.
- Clear the area of all objects that might harm a Companion but try not to interfere with the movements a Companion is making. Place something soft under the head to ensure a slight incline. In many cases, simply placing your hands under the Companion's head to act as a cushion is the easiest and most effective way to prevent head banging or injury.
- Turn the Companion on their side in order to aid breathing, if it can be accomplished without interfering with the Companion's movements. Saliva or vomit can flow more freely from the mouth in this position. If the seizure is intense, simply guiding the head to the side might be an easier procedure than attempting to reposition the Companion's whole body. Loosen all tight clothing and try to keep the head and neck extended, not flexed, as this also helps with breathing.
- Do not give the Companion anything to drink during a seizure or put anything in the Companion's mouth, unless directed by individual Seizure Protocol.
- Stay with the Companion until all movements have ceased and stand by until the Companion has fully regained consciousness. The Companion will probably be confused upon regaining consciousness and will need to be reoriented to their surroundings.

- After a seizure, the Companion may feel very tired and wish to rest. When the Companion feels better, they may wish to proceed with regular activities. If the seizure lasts more than eight (8) minutes, or if the seizure is repeated without consciousness being regained, call 911 immediately.
- A common occurrence for people who have experienced a seizure is feeling embarrassed upon regaining consciousness, especially if the Companion has become incontinent. The less people around or watching the Companion the better it will be for the individual once the seizure is over.
- **RECOGNIZING AND RECORDING SEIZURE ACTIVITY**

The following information will assist you to recognize and record seizure activities accurately. The information observed and recorded will greatly assist the Companion's physician to understand the particular seizure activity which is occurring. It is important to keep in mind that all Companion's experience seizures differently. Seizure symptoms can range from mild (appearance of being 'spaced out', eye flickering, shuffling,) to severe. House Coordinators, or Workshop Leaders will inform Coworkers regarding the warning signs, and seizure signs specific to the Companion.

Record the time the seizures occur, duration and your observations.

AURA - This is a warning that some people experience or display immediately before a seizure begins. A common occurrence is the Companion may cry out or reach for support.

COLOUR CHANGES - The Companion may appear white (pallor) or blue (cyanosis).

FALL - Not all seizures are associated with a fall or loss of posture. If a Companion does fall, it is important to know whether the Companion gradually slumped to the ground (atonic), or experienced an abrupt, violent and forceful fall to the ground (akinetic).

AKINETIC SEIZURES - are those which commonly cause bodily injury. People who are prone to frequently experience this type of seizure activity may decide to wear protective headgear for their health and safety.

TONIC SPASM - Identified with a sustained contracture of the limbs so they appear rigid. If the back and neck are involved, they will become arched and extended. Teeth and jaw may be clenched tightly. Usually accompanied by cyanosis. A Companion may become incontinent. Generally, confusion and sleepiness are experienced following such seizure activity. Duration is approximately 1 - 3 minutes, however it may be longer.

HYPNOTIC - Some seizures are associated with a loss of muscle tone and the Companion experiencing this type of seizure activity appears floppy like a rag doll. Such seizure activity usually renders a Companion motionless but occasional jerking movements may be present.

UNCONSCIOUS - An unconscious Companion will not respond to pain (i.e. pinching) or verbal stimuli.

FOCAL MOTOR - It is important to describe the part of the body involved in a focal seizure. Commonly, it will involve one full or partial side of the body. (i.e. face only - arm only). The activity may shift from side to side. Also, it may only be a sensation such as a tingling in one area of the body, or a jerking of a limb, or may have visual or auditory or olfactory (smell) phenomena associated with it. Duration is approximately 2 - 10 seconds but may be longer.

MYOCLONIC JERKS - Momentary split-second flexion movements of the arms and/or head and legs occurring once or in a series of jerking movements. It is important to observe the total number of jerks and the total duration of the seizure.

ABSENCE ATTACKS - Characterized by a transient lack of attention without loss of consciousness or brief loss of consciousness. There may be slight twitching, eyes blinking, slight muscle movement may be seen around the mouth, or kicking or shuffling of feet, drooling, etc. May resume activity immediately. Duration 2 - 10 seconds.

PSYCHOMOTOR - Varies widely. Often has loss of awareness of surroundings, inappropriate actions (i.e., picking at clothes, chewing movements), walking to and from and the Companion may appear disoriented. If you observe a behaviour pattern that is repetitive, you should describe it in the best possible manner. Duration may be 2-4 minutes and occasionally longer.

O.D. - ONCE DAILY

b.i.d. - TWICE DAILY

t.i.d. - THREE TIMES DAILY

g.i.d. - FOUR TIMES DAILY

hr - HOUR

qlh - EVERY HOUR

q2h,q3h,q4h,q8h, - EVERY 2, 3, 4, 8 HOURS

a.c. - BEFORE MEALS

p.c. - AFTER MEALS

h.s. - AT BEDTIME

stat - IMMEDIATELY

rep - REPEAT

p.r.n. - AS NECESSARY

p.o. - BY MOUTH

o.d. - IN THE RIGHT EYE

o.s. - IN THE LEFT EYE

gtt(s) - DROP(S)

ung - OINTMENT

supp - SUPPOSITORY

elix. - ELIXIR

liq. - LIQUID

fid - FLUID

susp. - SUSPENSION

caps. - CAPSULE

tab. - TABLET

tbsp. - TABLESPOON

tsp. - TEASPOON

Responsibility of: All Coworkers

Monitored by: House Coordinator and Facility Manager

The Ita Wegman Association
of British Columbia

HSP16: MEDICATION ADMINISTRATION TRAINING FORM

Name	Initials on MAR sheet

Instructor:

Date

- HSP 11 - Review Medication Prescription Support and Documentation and MAR Sheets.
- HSP 12 - Review Medication Acquisition, Packaging, Labeling, Storage, Maintenance, Disposal, and MAR Sheets
- HSP 13 - Review Medication Handling and Administration
- HSP 14 - Review Medication Incidents
- HSP 15 - Review Medication Instructions
- HSP 17 - Review Medication Off Site
- HSP 18 - Review P.R.N. Medication Administration
- HSP 19 - Review Psychotropic Drugs

_____ _____

Signature of trainee Signature of instructor

The Ita Wegman Association
of British Columbia

HSP17: MEDICATION OFF SITE

Associated standard 2.C.2 (a, b, c, d, e, f, g) and 2.C.5. (a, b, c, d (1, 2, 3)

POLICY

The Ita Wegman Association ensures all medical needs and medication requirements are observed for every Companion. All off-site medication management procedures adhere to Adult Care Regulations (BC Law). All Companion off-site medication needs are managed and monitored by a House Coordinator.

PROCEDURE

REGULAR MEDICATION

Medications generally administered in the homes of The Ita Wegman Association may accompany a Companion off-site; i.e., programming, on holiday, family visit or other planned absence. To ensure Companion safety and in accordance with Adult Care Regulations guidelines, the following occurs:

- Off site request is made to the House Coordinator associated with the Companion.
- House Coordinator approves medication removal.
- Medication is prepared and stored in a secure traveling package (note: Ingram Pharmacy has approved sending medication in the original blister packs, along with a note including storage tips).
- If absent Companion is accompanied by a Coworker: A MAR sheet is prepared and included in the traveling package.
  For parents and family: the MAR sheet can stay in the Ita Wegman Association residence, the House Coordinator will mark it with a “4”, then write the situation on the back of the MAR sheet (i.e. “Chris was at home with mom from July 23- 26”).
- Traveling packages are then given to approved/assigned Coworker or parents of the Companion.
- Upon return the medication package is returned to the House Coordinator.

- The MAR sheet is reviewed by the House Coordinator to assure compliance with procedure and a check for any incidents or irregularities.
- Any incidents are recorded in an incident report following standard procedure.

PRN medication (PRN = "when necessary")

PRN medication administered in the homes of The Ita Wegman Association are administered by trained Coworkers. When leaving the property of The Ita Wegman Association the Coworker must:

- Sign the PRN out with the House Coordinator.
- Administer as needed.
- Return the medications to the House Coordinator. Report to the House Coordinator or designate if a medication was administered so that the MAR sheet is completed.
- Complete the PRN chart report describing the need for the medication and conditions prompting the need for a PRN.
- Report the effects of the medication, record this on the PRN chart report.
- Follow standard incident debriefing procedure, if appropriate.

Responsibility of: All Coworkers

Monitored by: House Coordinators and Facility Manager

HSP18: P.R.N. MEDICATION ADMINISTRATION

Associated standard 2.C.2 (a, b, c, d, e, f, g) and 2.C.5. (a, b, c, d (1, 2, 3)

A P.R.N. is administered for short-term, temporary relief of severe behaviour disturbance.

- P.R.N. stands for “pro re nata”, meaning “as needed”
- A valid prescription from the Companion’s physician/psychiatrist is required.
- It should be administered only when necessary.

Prior to the administration of the P.R.N. medication, the Coworker has:

1. A clear understanding of the physician’s prescription including:

a. The name of the medication to be given.

b. The reason for the medication to be given.

c. The time the medication is to be given.

d. The frequency of when P.R.N is to be given.

e. The dosage to be given.

f. The maximum daily doses or amount to be given.

2. Know the “Five Rights”:

a. The Right Patient.

b. The Right Medication.

c. The Right Time.

d. The Right Dosage.

e. The Right Route. (i.e. by mouth; inhalation; dissolving under the tongue etc.)

3. Be familiar with the Companion’s behaviour pattern that would generally warrant the use of a P.R.N. medication.

4. Have attempted alternative intervening measures unfortunately:

a. These intervention measures have failed, and

b. The Companion’s behaviour disturbance remains unchanged, and/or

c. The Companion’s behaviour is escalating to the extent of potential bodily injury or property damage.

Following the P.R.N. being given, the authorized Coworker will:

1. Document the event in a Companion's notes according to the following guidelines:

a. Description of the Companion's behaviour warranting the P.R.N. medication.

b. Description of alternative strategies attempted.

c. Name and dosage of medication given.

d. Date, time, route and site of mediation given.

e. Who gave the medication.

f. Subsequent observation: desired effect/side effects; changes in behaviour, etc.

3. Evaluate the incident:

a. For development of strategies to prevent future occurrences.

b. To determine if the P.R.N. should be reviewed and changed.

Responsibility of: All Coworkers

Monitored by: House Coordinators and Facility Manager

HSP19: PSYCHOTROPIC DRUGS

Associated standard 2.C.2 (a, b, c, d, e, f, g)

POLICY

The phrase "**psychotropic drugs**" is a technical term for psychiatric **medicines** that alter chemical levels in the brain, which impact mood and behavior. Antipsychotics, antidepressants, ADHD drugs, anti-anxiety medications and mood stabilizers are some of the more commonly used psychotropic drugs. The Ita Wegman Association employs the following safety guidelines for Companions receiving psychotropic medication treatment.

1. Monotherapy regimens for a given disorder or specific target symptoms should be tried before polypharmacy regimens.
2. One medication change should be made at a time (except for cross-tapers).
3. Polypharmacy (i.e., the use of two or more medications for the same indication or specific mental disorder) is discouraged and requires specific justification (except for different forms of the same medication).
4. Medications can only be prescribed according to their published recommended daily maximum doses.
5. Companions on psychotropic medications require Informed consent.

Responsibility of: All Coworkers

Monitored by: Quality Care Coordinator

HSP20: EMERGENCY AND AFTER-HOURS CONTACT

Associated standards 1.H.2 (a, b) and 4.H.8

POLICY

To ensure the safety of all Companions and Coworkers associated with The Ita Wegman Association during after-hours or in emergency situations, the following Ita Wegman Association on-call support is available and should be contacted for direction.

First Responder: Kristine Millere 250-510-8139
Second Responder: Tara Batho 250-715-1559 (office) 604-828-9277 (cell)

PROCEDURES

1) Matters involving a residential home please contact: **Kristine Millere -**

phone (office): 250-715-1559 after hours 250-510-8139 (cell)

2) Matters involving the day program please contact: **Kristine Millere -**

phone (office): 250-715-1559 after hours 250-510-8139 (cell)

3) For all other enquiries or issues please contact: **Tara Batho - phone (office): 250-715-1559 after hours 604-828-9277 (cell)**

4) For maintenance emergencies please contact: **Richard Young - phone (cell): 250-510-8417**

Responsibility of: All Coworkers

Monitored by: Facility Manager

HSP21: BIO-HAZARDOUS MATERIAL

Associated standard 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5) and 1.H.16 (a, b, c)

POLICY

To ensure a safe environment exists for all Companions and Coworkers of The Ita Wegman Association.

PROCEDURES

Industrial Health and Safety Regulations (WCB) and the Workplace Hazardous Materials Information System (WHMIS) legislation states that hazardous materials and substances within a worksite must be identified and measures taken to eliminate or effectively control the dangers related to their transportation, storage, handling, use and disposal.

It is the responsibility of every Coworker to store and handle hazardous materials and substances in a safe manner. Hazardous is defined as those products that come with a hazardous symbol on the label, and are reflected in the following classes:

1. CLASS A: COMPRESSED GAS

This class includes compressed gases, dissolved gases and gases liquefied by compression or refrigeration. Examples: gas cylinders for oxyacetylene welding or water disinfectants.

2. CLASS B: FLAMMABLE AND COMBUSTIBLE MATERIAL

This class includes solids, liquids and gases capable of catching fire or exploding in the presence of a source of ignition. Examples: white phosphorus, acetone and butane. Flammable liquids such as acetone are more easily ignited than combustible liquids such as kerosene.

3. CLASS C: OXIDIZING MATERIAL

Materials which provide oxygen or similar substances, and which increase the risk of fire if they come in contact with flammable or combustible materials. Examples: sodium hypochlorite, perchloric acid, inorganic peroxides.

4. CLASS D: POISONOUS AND INFECTIOUS MATERIALS

DIVISION 1 -Materials causing immediate and serious toxic effects. This division covers materials, which can cause the death of a person exposed to small amounts. Examples: sodium cyanide, hydrogen sulphide.

DIVISION 2 - Materials causing other toxic effects. This division covers materials which cause immediate skin or eye irritation as well as those which can cause long term effects in a person repeatedly exposed to small amounts. Examples: acetone (irritant), asbestos (cancer causing), toluene diisocyanate (a sensitizing agent).

DIVISION 3 - Biohazardous infectious material. This division applies to materials, which contain harmful microorganisms. Examples: cultures or diagnostic specimens containing salmonella bacteria or the hepatitis B virus.

5. CLASS 5: CORROSIVE MATERIAL

Caustic or acid materials that can destroy the skin or eat through metals. Examples: muriatic acid, lye.

6. CLASS 6: DANGEROUSLY REACTIVE MATERIAL

Products, which can undergo dangerous reactions if subjected to heat, pressure, shock or allowed to contact water. Examples: plastic monomers such as butadiene and some cyanides.

It is the responsibility of the Joint Health and Safety Committee to ensure Material Safety Data Sheet (MSDS - http://www.phac-aspc.gc.ca/msds-ftss/index.html) Binders exist, listing every hazardous product on site. This may require multiple Binders, given that the data sheets must be stored *with* the product, i.e. one in the storage area for oil products and paint, one for household cleaning supplies, and one for health and hygiene products. For the main office administration Coworkers, it will be expected that you adhere to overall building health and safety practices and follow the guidelines set as identified.

Material Safety Data Sheets are available via the seller of the product. Further, searching the Web via the name of the manufacturer may lead to a quick download of the Material Safety Data Sheet. Check with MACL colleagues and MACL Administration as a potential source of needed MSDS. Finally, MSDS.com provides a free service for up to 5 downloads per month.

The Material Safety Data Sheet contains: Product Information, Hazardous Ingredients, Physical Data, Fire and Explosive Hazard, Reactivity Data, Toxicological Properties, Preventative Measures, First Aid Measures, and Preparation Information.

MSDS may be complex and technical. Many workers may find some of the information on MSDS difficult to understand. The identified Health and Safety Committee must ensure every Coworker understands the information in order for him or her to work safely with or near controlled products.

7. CLASS 7: BIOHAZARD MATERIAL

To safeguard all Coworker's and Companion's health, this occurrence demands <u>immediate</u> attention.

To this end, there is a "Biohazard response" kit located with the first aid kit in each residence. In the kit you will find:

1. An Instruction sheet with the cleaning protocol

2. Hand Towelettes
3. Face Mask, Surgical with shield
4. Disposable Gloves
5. Waste Bags and Twist Ties
6. Biohazard Pick Up Scoop/Scraper
7. Surface Disinfectant
8. Paper Towel
9. Infectious Waste /Biohazard Disposal Tag
10. General Household Cleaner

Avoid direct contact with body fluids, as they all have the potential to spread germs. Germs in vomit and diarrhea may travel through the air, so it is very important to clean it up quickly. The following is the recommended procedure to use:

Take the kit to the site of the biohazard event

1. Put on gloves and an apron. (Masks and goggles and protective sleeves are in kit if you wish to use).
2. Remove all the visible material, working from the least to the most soiled areas, using a paper towel supplied. If you are cleaning up feces or vomit, be careful not to agitate the material, so that virus particles do not become airborne. Put all material in a garbage bag for disposal.
3. Clean the area using General Household Cleaner and paper towels, again working from the least to the most soiled areas. Put all soiled paper towels same garbage bag as step #2 for disposal.
4. Sanitize the area using a sanitizer solution. The sanitizer must contact the affected area for a minimum of 10 minutes. (5 minutes if on carpet)
5. Place any Soiled linens in a second garbage bag,

a. Seal with twist tie

b. Label with supplied label (blood, vomit, feces, urine) Items grossly contaminated with blood are disposed of –not laundered - please label as such

c. If event occurs in a residence – take to the associated laundry room

d. If event occurs in Admin areas – take to closest laundry room

6. Spray goggles with sanitizing solution - wipe dry

7. Discard gloves and other disposable articles in same garbage bag as step #2 for disposal.

Dispose of liquid wastes in the toilet or down the utility sink drain - DO NOT FLUSH PAPER TOWEL

8. Wash your hands after removing the gloves.

9. Report the event to the Facility Manager.

If kit items need replenishing, please inform the Facility Manager.

Responsibility of: All Coworkers

Monitored by: Facility Manager and Quality Assurance Coordinator

HSP22: COMPANION OUTINGS WITH AUTHORIZED INDIVIDUALS

Associated standard 1.H.2 (a, b) - 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

The Ita Wegman Association will ensure no Companion is permitted to leave or be removed from a residence or program facility with a person who is not authorized or deemed capable to take the Companion off property.

PURPOSE

To ensure all Companions are always safe and secure.

PROCEDURE

Any individual wanting to remove a Companion from a residence or program facility must first have authorization from the Companion's representative if they have a representation agreement. If a Companion does not have a representation agreement, they may authorize someone to pick them up at the moment. If a Coworker has a safety concern about the person picking the Companion up, they will immediately notify the Facility Manager. The individual picking up the Companion should ensure that the Coworker on shift has the contact information, and is aware of the expected duration off-site, and the location(s) they are going. For individuals with a representation agreement, a list of authorized individuals can be found on the Companion database.

The Ita Wegman Association reserves the right to request additional information or approval if there is a concern of Companion safety based on the release.

Coworkers will consult with the Facility Manager if the individual wishing to remove the Companion is suspected of being under the influence of drugs and alcohol. Physical signs of intoxication include slurred speech, clumsiness, and problems with memory and attention.

Responsibility of: all Coworker

Monitored by: House Coordinator, Facility Manager, Workshop Leader

HSP23: CELL PHONE USE

Associated standards 1.H.2 (a, b) and 1.J.1 a (1, 2, 3, 4, 5, 6), b (1, 2, 3)

POLICY

The Ita Wegman Association recognizes cell phones are considered an essential communication tool and to that end, The Ita Wegman Association Permits Coworkers to utilize their cell phones as long as the use does not impede work to be completed. It is expected that while at work, duties will come first and cell phone use will be restricted to emergency calls / texts or work-

related needs. If at any point in time there is a suspicion or actual incident where work is not being completed due to excessive use, corrective action will be taken.

For instances where a Companion of The Ita Wegman Association is being transported in a vehicle, it is expected that all Coworkers understand and ensure that at ***no time is the use of a cellular phone while driving with a Companion in the care of the Ita Wegman Association permitted. This includes making or answering calls.***

DO NOT USE A MOBILE DEVICE WHEN DRIVING. **BC LAW**

PULL OVER TO MAKE OR RECEIVE A CALL

If you must make or receive a call while in your car, pull over to the side of the road as soon as it is safe to do so. Make sure you're safely off the side of the road so you're not posing a danger to other vehicles. Hands-free does not mean risk-free. However, a hands-free unit allows you to keep both hands on the wheel while you talk on the phone. Attach the microphone to the visor just above your line of vision, so you can keep your eyes on the road.

NEVER DIAL WHILE DRIVING

If you must dial manually, do so only when stopped. Pull off the road when it is safe to do so.

DON'T TAKE NOTES WHILE DRIVING

If you need to write something down, pull off to the side of the road.

Responsibility of: All Coworkers

Monitored by: Facility Manager

HSP24: ABUSE AND NEGLECT

Associated standards 1.H.2 (a, b) - 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5) and 1.J.1 a, b, c (1, 2, 3, 4, 5, 6), d (1, 2), e (1, 2, 3, 4, 5), f (1, 2, 3), g, h, I

POLICY

Companions receiving support from Glenora Farm have the right to an environment which is safe and free from any abuse, neglect, exploitation of any kind, retaliation, and humiliation. All persons have the right to live free of abuse of any kind from anyone.

Companions have their rights reviewed with them at onboarding, annually at their ISP meeting, or as needed. Coworkers receive training on what is considered abuse and how to identify unsafe environments at hire, annually, or as needed.

Any Coworker who has knowledge of an incident of suspected abuse or neglect has the responsibility to report such an incident immediately to the Facility Manager. Failure on the part of any witness to report such an incident will result in their termination of employment.

No action, corrective or otherwise, will be taken against the Coworker who reports suspected abuse, unless they were involved in the abuse themselves.

Glenora Farm will operate on the presumption of innocence until proven otherwise. Support will be provided to the accused person(s), unless the accused person(s) has been apprehended while abusing a Companion.

The support will consist of the following:

Two members of the Executive Group (one being an HRR representative) will be appointed as the only people to contact the Coworker in question to ensure clear communication and will advocate for a speedy resolution of the incident.

PROCEDURE

Any person suspecting or	1. Immediately ensure the health and safety of the Companion. Remove the Companion from immediate danger / threat and direct the abusive

observing abuse or neglect	Coworker from the immediate area. Example: “Please wait downstairs / outside.”
	2. Check the Companion for any injuries. Remain near the person, offering reassurance and first aid if needed.
	3. Report the incident immediately to the Facility Manager. Provide written details of the incident and complete a Critical Incident Report Form.
	4. While waiting for the Facility Manager to arrive, conduct initial fact finding with the Companion. Example: “What happened? When did it happen? Has this happened before?”
The Facility Manager	1. Attend the scene to support the Companion and responding Coworker.
	2. The Coworker named in the allegation will be notified of the allegation and informed of what the process will be moving forward. Depending on the nature of the allegation, the Coworker may be suspended from work in accordance with employment standards regulations and may be asked to leave the property immediately.
	3. Call Island Health and CLBC to inform them of an allegation of abuse / neglect. Submit the critical incident report with information from the responding Coworker.
	4. If emergency services are required, call the appropriate emergency services. If the Companion has a Representation Agreement, notify the representative on file.

	5. Inform the Executive Group about the alleged abuse.
	6. An investigation will be conducted in accordance with provincial and federal reporting guidelines. Glenora Farm Coworkers will follow Island Health and CLBC directives in their investigation.
	8. The two members of the Executive Group will interview the Companion and other person(s) involved. Statements collected will be reviewed by the two members of the Executive Group and compared to determine what occurred and the factors associated with the incident. Findings, recommendations and any corrective action required will be included in the report. The Facility Manager will consult with the Executive Group, the Board of Directors and any legal counsel as necessary. A recommendation will be made as quickly as possible regarding the Coworker. A Coworker may be terminated immediately following an internal investigation, regardless of any outside investigative results. Recommendations and investigation results conducted by The Executive Group will be forwarded to licensing authorities as necessary. It is recognized that investigations and conclusions by RCMP are independent from an investigation conducted by Glenora Farm. Specific direction(s) from the RCMP will govern the actions of the Facility Manager.
	9. In collaboration with the Quality Assurance Coordinator, make recommendations and take any appropriate action to prevent recurrence of the abuse.

The Companion has the right to contact the RCMP, Island Health, or CLBC by themselves without interference from any Coworker. Once the Companion has indicated that they wish to lay charges, the interview and / or any questions regarding the matter will cease and the Companion will be supported by a Coworker or a family representative to work with the RCMP.

FOLLOW-UP

With recommendations from the two members of the Executive Group, the Executive Group will decide the working status of the Coworker after completion of the investigation which may consist of any of the following options:

- The Coworker may return to work and continue to perform their normal job or contract functions,
- The Coworker may return to work, but corrective action is required i.e. completion of identified training and a monitoring schedule to observe performance,
- The Coworker has been found to be in breach of their employment or contract agreement and employment is terminated.

COMPANION SUPPORT

If desired, additional counseling or other services will be made available to the Companion.

CONFIDENTIALITY

All information regarding the situation will be shared in keeping with IWA standards of privacy and confidentiality.

DEFINITIONS

ABUSE
The deliberate mistreatment of an individual that causes the person physical, mental, or emotional harm; or damage to or loss of assets. Specific types of abuse include:

PHYSICAL ABUSE: Any excessive or inappropriate physical force or action directed at a person by any person.

PHYSICAL ASSAULT: Includes but not limited to slapping, hitting, punching, kicking, stuffing a foreign object such as a cloth in a person's mouth, or the use of unauthorized physical restraint.

ROUGH TREATMENT: Includes but not limited to unnecessary force applied during lifts, transfers, personal care routines, or physical interaction that appears painful or uncomfortable for the person.

PSYCHOSOCIAL OR EMOTIONAL ABUSE: Any act or treatment that diminishes a person's sense of identity, dignity, or self worth. This includes retaliation.

VERBAL OR EMOTIONAL ABUSE: Includes but not limited to yelling, swearing, demeaning or derogatory remarks, name calling, humiliation, intimidation, taunting /teasing, or excessive and repeated demands.

SEXUAL ABUSE: Any sexual behaviour directed at a Companion by a Coworker or any other person in a position of trust or authority. May also include inappropriate, unsolicited or forced sexual attention from persons connected to a Companion but not responsible for their supports. Includes but is not limited to sexual exploitation, harassment, use of pornography, or indulging in any form of sexual stimulation without physical contact.

SEXUAL ASSAULT: Includes but not limited to nonconsensual, inappropriate or forced sexual touching, sexual intercourse, or any form of sexual activity that includes physical contact.

FINANCIAL ABUSE OR EXPLOITATION: The misuse of a person's funds or assets or obtaining the person's property or funds without prior knowledge or consent of the person or their legal representative.

THEFT: Stealing money or personal property.

FRAUD: Deceitful manipulation of finances or assets.

MISUSE OF FUNDS: Use of funds or assets in a way that does not honour the best interest of the Companion.

MEDICATION ABUSE: The misuse of a Companion's medication or prescriptions through overmedicating (incl. sedation), withholding medication, or noncompliance with medication refills.

FAILURE TO RESPECT PERSONAL DIGNITY AND SELF EXPRESSION: Failing to provide a Companion with support for self expression, intentionally or otherwise. Includes but is not limited to serious emotional and/or physical damage that can occur as a result of a Companion not having a communication system or their communication being ignored in areas such as expression of illness, pain, or fear.

PERSONAL HUMILIATION AND PRIVACY: Includes but not limited to leaving a Companion unclothed in view of others, leaving a Companion too long after incontinence, or an undue

delay in taking a Companion to the bathroom that can create extreme embarrassment, pain, or anxiety.

NEGLECT

Any deprivation of a Companion's requirements for food, shelter, medical attention or supervision that endangers the safety of the Companion. Includes any failures to provide necessary care, assistance, guidance, basic necessities or attention to an adult that causes, or is reasonably likely to cause within a short period of time, the Companion serious physical, mental or emotional harm or substantial damage to or loss of assets.

Basic necessities include proper nutrition, shelter, or appropriate clothing for weather conditions.

Care includes personal hygiene, repositioning, and changes of incontinence pads or linen.

Specific types of neglect include:

GROSS PHYSICAL NEGLECT: Includes but not limited to withholding food, personal care, shelter and protection, or medical care.

GROSS PSYCHOSOCIAL NEGLECT: Includes but not limited to lack of attention, isolation, confinement, or the use of unauthorized seclusion or timeouts.

CRIMINAL NEGLIGENCE: Defined in law and requires legal consultation.

Responsibility of: All Coworkers and Facility Manager

Monitored by: Executive Group

HSP25: SLIPS, TRIPS AND FALLS

Associated standard 1.H.2 (a, b)

POLICY

The Ita Wegman Association is committed to providing a safe work and home environment. Slip, Trip and Fall Protection is an integral part of our commitment to a safe work and home

environment.
Slip, Trip and Fall Protection shall be achieved through the use of controls that will involve all Coworkers and Companions.

The use of controls include:

- Identification of hazards that contribute to slips, trips and falls
- Taking responsible precautions to prevent slip, trip and fall hazards when identified
- Educating all Coworkers and Companions on measures that will reduce slips, trips and falls
- Elimination of hazards through identification, addressing i.e. engineering (design) and implementing protocols to address identified hazards.

DEFINITIONS

Slip

A slide causing an individual to lose their balance. This can either be corrected or cause the individual to fall. Slips happen when there is too little friction or traction between the footwear and the walking surface. Common causes of slips are:

- Wet or oily surfaces
- Occasional spills
- Weather hazards
- Loose, unanchored rugs or mats
- Flooring or other walking surfaces that do not have the same degree of traction in all areas

Trip

A stumble, often over an obstacle, causing an individual to lose their balance. This can either be corrected or cause the individual to fall. Trips happen when the foot strikes or hits an object. Common causes of tripping are:

- Obstructed view
- Poor lighting
- Clutter in the path of travel
- Wrinkled carpeting
- Uncovered cables
- Bottom drawers not being closed
- Uneven walking surfaces

Fall

An event that results in an individual or a body part coming into contact with the ground or other surface that is lower than the individual. Falls can occur at the same level (e.g. to the floor or ground on which the person was previously standing) or to a lower level (e.g. down a flight of stairs or through an opening). Falls often, although not always, result from slips or trips.

Purpose of the Prevention of Slips, Trips and Falls Policy and Associated Guidelines and Tools:

The policy assigns responsibility with respect to:

1. Conducting risk assessments to determine risk of Coworker and Companion exposure to slip, trip and fall hazards
2. Putting in place safety guidelines and procedures (e.g. inspections, appropriate footwear, housekeeping practices) for Coworker and Companion protection
3. Communicating with Coworker and Companion safety guidelines and procedures that are established and their role in helping to make and support a work / home place free of slip, trip and fall hazards
4. Following safety guidelines and procedures that are established
5. Evaluating the safety guidelines and procedures that are established to determine their effectiveness
6. Developing training for Coworker and Companion to prevent and minimize slips, trips and fall hazards

PROCEDURES

EXECUTIVE GROUP

- Ensure the Coworkers and Joint Health and Safety Committees are informed of this policy
- Provide leadership and support to ensure the implementation of this policy
- Ensure supplies resources, equipment, etc., are purchased and made easily available to assist in the prevention of slips, trips, and falls
- Ensure that the Slips, Trips and Falls Prevention Policy will be brought to the attention of all Coworkers and Companions (e.g. through safety talks, team meetings, etc)
- Ensure suitable and sufficient risk assessments are undertaken and reviewed for the risks of slips, trips and falls (e.g. regularly and as circumstances change)
- Follow identified safety guidelines to address slip, trip or fall hazards
- Ensure that the work / home place is regularly inspected for slip, trip and fall hazards
- Ensure that prompt action is taken to address any potential or identified hazards that may contribute to the occurrence of slips, trips and falls (e.g. repair any damaged or broken surfaces, clean up spills, mitigate snow or ice on surfaces)
- Follow up on all incidents, accidents and near misses associated with slips, trips and falls to investigate their cause and to identify any needed changes to preventative/control measures or procedures
- Keep records of key activities undertaken to minimize the likelihood of slips, trips and falls (e.g. cleaning/maintenance schedules, such as floor stripping)
- Complete Safety Footwear Needs Analysis, as necessary, to determine whether protective footwear is needed in the performance of jobs and/or tasks.
- Provide appropriate equipment, work procedures, personal protective equipment and training to protect Coworkers from risk of falling from heights (e.g. fall restraint/fall arrest systems, ladder safety)

Coworkers will:

- Take actions to eliminate slip, trip and fall hazards if able to do so
- Be vigilant and ensure that any slip, trip and fall hazards they are aware of are reported to Supervisors
- Organize areas of their work environment within their control so as not to introduce slip, trip and fall hazards (e.g. open drawers, poor housekeeping)
- Where protective footwear is provided, ensure they and other personal protective equipment for the work environment(s) in which they work are worn. Inform Supervisors when footwear is no longer in a state of good repair (e.g. worn treads) and needs replacement.
- When protective footwear is not required, wear personal footwear appropriate to the job and tasks performed
- Exercise caution during wet, slippery conditions and in the use of steps and stairs
- Follow any training and slip, trip, and fall safe working procedures appropriate footwear

Maintenance Workers will be responsible for ongoing maintenance:

- Ensure facilities have appropriate flooring for the type of work operation/activity to be conducted within buildings.
- Ensure that other aspects of the facilities are reviewed to minimize or eliminate the risk of slips, trips and falls (e.g. with appropriate lighting to enable detection of hazards without creating glare on walking surfaces, with stairs with appropriate rises, runs and railings, without obstructions in the regular path of travel, etc)
- Match floor cleaning and maintenance procedures with manufacturer's instructions or accepted industry practices for type of floor surface
- Maintain surfaces free of hazards or obstructions, or clearly identify the presence of hazards or obstructions if elimination is not possible or feasible (e.g. through use of barriers or signage)
- Ensure that prompt action is taken to address any potential or identified hazards that may contribute to the occurrence of slips, trips and falls (e.g. repair any damaged or broken surfaces, clean up spills, mitigate snow or ice on surfaces)

If applicable, those responsible for purchasing equipment (e.g. footwear and attachments, fall protection equipment, etc) will:

- Consult with divisions to enable their slip, trip, and fall hazards to be addressed

Facility Manager /Executive Director will:

- Assist in the selection of personal protective equipment
- Assist in the design and/or delivery of training or other instructional/information-sharing mechanisms
- Assist with the implementation of the policy and the development of safe work procedures
- Assist with proper reporting/notification of incidents to the Workplace Safety and Insurance Board and Ministry of Labor, as needed
- Keep statistics on incidents and injuries to assist in planning prevention strategies

Joint Health and Safety Committees will:

- Incorporate identification of slip, trip and fall hazards into their workplace inspection reports
- Review incident and accident reports to assess injury trends with respect to slips, trips and falls
- Make recommendations for the development of, or improvements to, existing slip, trip, and fall prevention programs (e.g. safe work procedures, training, equipment, etc) as needed
- Regularly review this policy and associated tool kit and recommend amendments, as needed

Responsibility of: All Coworker

Monitored by: Executive Group, Joint Health and Safety Committee

The Ita Wegman Association
of British Columbia

HSP26: CONSENT TO USE TOOLS

Associated standard 1.H.2 (a, b)

_____	_____	_____
Companion's Name (Please print)	Companion's Signature	Date (dd/mm/yy)
_____	_____	_____
Name of Parent/ Representative (Please print)	Signature of Parent/ Representative	Date (dd/mm/yy)

- Iron
- Sewing Machine
- Clippers/pruners
- Wheelbarrows, spades, forks
- Hand Saw
- Knives
- Box Grater
- Drill, sander
- Mixer, stand mixer, hand Grinder
- Lawn mowers
- Axe, woodchipper, wood splitter

Please complete and sign the form below.

□ YES, I understand the risks in using the above tool/s and give my consent for _____ to use the tools marked above.

□ NO, I do not consent to _____ using the above checked tool(s).

The Ita Wegman Association
of British Columbia

HSP27: INFECTION CONTROL AND STANDARD UNIVERSAL PRECAUTIONS

Associated standard 1.H.2. (a, b) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5) and 1.H.12 a (1, 2, 3, 4, 5), b (1, 2, 3)

POLICY

Standard/universal precautions are steps taken for protection when coming into contact with the blood or body fluids of other people. Standard/universal precautions are intended to stop the spread of germs to others. It is not always apparent if a person is infected with AIDS, Hepatitis B, Hepatitis C, or any number of other diseases.

Standard/universal precautions will be followed at all times to ensure the prevention of the risk of further infection to others. Equipment and supplies required for appropriate precautionary prevention and response will be kept updated, inventoried, stored appropriately and accessible. Blood and body fluids need to be treated as potentially infectious. Body fluids include blood, semen, urine, feces, nasal secretions, saliva, vomit, and vaginal secretions.

PROCEDURE

1. Coworkers and Companions will always implement standard/universal precautions when contact is made with another person's bodily fluids. With respect to COVID-19 Pandemic, Coworkers and Companions will abide by the ***HSP47 COVID-19 Safety Plan***.
2. When a person's health is potentially compromised due to contact with another person's bodily fluids, a Critical Incident Report must be completed and a WorkSafe BC report filed, as necessary.
3. Coworkers and Companions will have access to training, orientation and/or resources about the transmission and prevention of disease and illness.
4. All sites are cleaned regularly to prevent the spread of illness and disease.
5. All residences and worksites will be provided the necessary supplies to meet standard/universal precaution standards.

These more common infections and illnesses are responsible for the majority of illness, and they fall into four broad categories:

- **RESPIRATORY INFECTIONS:** such as colds and flu are responsible for the greatest number of illnesses. Most colds exhibit themselves as fever, runny nose, coughing and sneezing. Many lead to ear infections or lower respiratory infections. These infections are generally spread from the mouth and nose or through droplets coughed or sneezed into the air.
  Coworkers and Companions showing symptoms of illness, are required to wear a mask or isolate at home until free of symptoms.

- ***SAFEGUARDING DURING OUTBREAKS*:** As mandated by the Province of British Columbia public health order and Community Living BC policies, the Ita Wegman Association maintains mandatory immunizations for Covid-19 for all Coworkers and Contractors as a responsibility to safeguard the health of Companions and Coworkers.
  All Coworkers and Companions are required to wear a mask at their workplace and home place, until the outbreak is over.
  Exceptions exist for persons who, for medical reasons, cannot wear a mask. For individuals who are medically unable to wear a mask, additional safeguards will be put in place.

- **INTESTINAL INFECTIONS** cause diarrhoea such as viral enteritis, Giardia, Shigella, Salmonella, and Hepatitis A. In these cases, infections are transmitted from person to person directly from the bowel movement to the mouth, usually by way of the hands or indirectly by food or other objects, which go into the mouth.

- **SKIN INFECTIONS** and infestations such as impetigo, lice, scabies or ringworm are generally transmitted through direct contact. Some bacteria such as Staphylococcus spread easily through direct contact and from contaminated articles to broken skin surfaces. Viruses such as the Herpes Simplex (which causes cold sores) spread readily from moist lesions.

- **VIRAL INFECTIONS** such as chickenpox, measles, roseola, mumps and mononucleosis are mainly transmitted through oral and nasal secretions.

The basics of standard/universal precautions:

- **Blood and body fluids** – always treat as potentially infectious. Clean first with water to wipe away dirt, soils and other debris. Plain dish soap or any kind of household cleaning

product will remove dirt, oils and other debris from surfaces. Secondly, disinfect with store-bought disinfectant. If not available, household bleach can be mixed with room temperature water (do not use hot water) in specific ratios to disinfect areas (please see table below for ratios). Ensure that there is a Drug Identification Number (DIN), which is an 8-digit number given by Health Canada confirming it is approved for use in Canada.

Recommended bleach, water ratios, and cleaning times needed for COVID-19 disinfecting	**High touch and heavily soiled areas** (appropriate for households with illness)	**All other surfaces**	**Food contact surfaces**
Example areas and surfaces	Toilets, light switches, door knobs, cell phone, TV remotes, bathroom faucets	Tables, counters, floors, chairs, cribs	Any surface or equipment that contacts food
Bleach concentration in ppm (refers to the % ratio of bleach to water) OR 1 part bleach diluted in ## parts of water	1000ppm 0.1% (1:49)	500ppm 0.05% (1:99)	100ppm 0.01% (1:499)
Time to leave wet, rinsing and drying	Allow 1 minute then rinse with clean water	Allow 5 minutes, no rinse required, let air dry	Allow to air dry, no rinse required
Frequency if everyone in household is well	Once every few days	Once per week	After each use
Frequency if someone in household has COVID-19 or symptoms of illness	Twice per day	Once per day	After each use

- ***Gloves*** – wear latex, vinyl, or rubber disposable gloves when handling blood, body fluids, or when cleaning cuts, scrapes, or wounds. Gloves should be in your first aid kit, so they are always ready. Method of wearing Gloves:

i. Perform hand hygiene before putting gloves on

ii. To remove gloves safely, with one of your gloved hands pull off your glove for the opposite hand from the fingertips, as you are pulling, form your glove into a ball within the palm of your gloved hand. To remove your other glove, slide your ungloved hand in under the glove at the wrist and gently roll inside out, and away from your body. Avoid touching the outside of the gloves with your bare hands. (see Appendix 7 for instructions).

iii. Gloves must be changed and hand hygiene performed when they are torn.

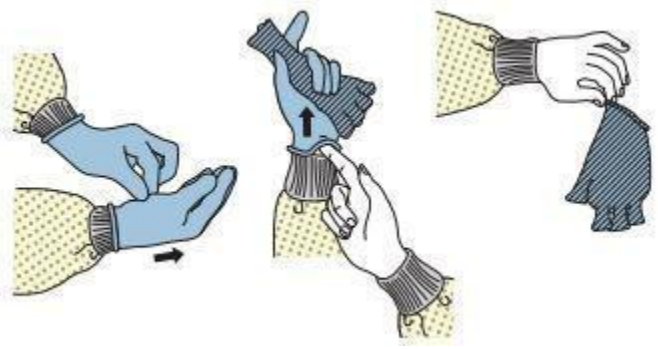
iv. Discard the gloves in a plastic-lined waste container.

v. Perform hand hygiene after removing gloves.

- ***Sharp Objects*** – place needles and syringes in a safe container. Never re-cap, bend or break off used needles. Sharps collector containers are provided as needed at some Association sites. If a sharps container is not available, place them in a sealed puncture-proof metal or plastic container with a lid, such as an empty coffee tin and then place in the garbage.
- ***Personal Articles*** – never share toothbrushes or razors. They can transmit small amounts of blood from one user to the next. Dispose of razors carefully. Wrap sanitary napkins before disposing. Handle bloody bedding or clothing cautiously and wash in hot soapy water.
- ***Use of PPE*** - PPE must be used when providing personal care and working with bodily fluids. PPE can include face masks, disposable gloves, or face shields. Fabric/reusable masks should not be worn when providing personal care.
- ***Order of Operations*** - When using PPE for personal care, there is a proper order of operations to reduce the instances of removing gloves and reducing waste. When using gloves for a personal care routine, you should start with helping one brush their teeth. Next, helping with showering. Finally, support with toileting if necessary. **If there is a**

change to the order of operating, one must change their gloves. Guidelines on how to properly remove PPE can be found below. If the person supported has an infected area (ie: cold sore, broken skin) a change of gloves is needed before and after treating the affected area.

- ***Removing PPE*** - Outside of gloves are contaminated! If your hands get contaminated during glove removal, immediately wash your hands or use an alcohol-based hand sanitizer. Using a gloved hand, grasp the palm area of the other gloved hand and peel off the first glove. Hold the removed glove in a gloved hand. Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove. Discard gloves in a waste container. (*Credit: Centre for Disease Control*)



- ***Length of use for PPE -*** Disposable gloves and masks are for single use only. Face shields or eye protection glasses can be sanitized for use by the same person until they are damaged or the plastic, foam or straps are visibly soiled.

- ***Sanitizing Reusable PPE*** - When sanitizing face shields or eye protection glasses, clean your hands and put on a pair of disposable gloves. Using a disinfectant, wipe the inside of the face shield first, and then the outside. Ensure the surface stays wet for the disinfectant contact time which will be outlined on the disinfectant bottle. Rinse the face shield with tap water and allow it to dry. Remove gloves and perform proper handwashing technique. Store the face shield in a clean, designated area.

- ***Contaminated Objects and Surfaces*** - Surfaces visibly soiled with blood, body fluids or excrement should be cleaned immediately. Wipe up blood or other body fluids with a disposable cloth and discard it appropriately (instructions in the next paragraph). Soiled surfaces should be disinfected thoroughly after cleaning. Clean the area using a solution that is approved for biohazard remediation. This solution should be freshly made up, or it may lose its strength. Following a blood spill, allow this solution to sit on the

contaminated surface for 10 minutes, then wipe clean and discard the cloth. Soak mops or brushes used for cleaning in the solution for 20 minutes.

- ***Linen and Clothing*** - Linen and clothing that has been contaminated with blood or body fluids should be handled as little as possible. These articles should be transported directly to the washing machine and laundered in hot soapy water.
- **Dishes and Cutlery** - Wash all dishes in an automatic dishwasher or use a three-step dishwashing technique, which includes a final sanitizing stage.
- ***Other Precautions*** - Coworkers (and Companions receiving support) should avoid exposure of open skin lesions or mucous membranes to blood or body fluids. Companions who exhibit aggressive behaviour (biting, scratching, etc.) may require special precautions. Consult a nurse or other health care practitioner.
- ***Quarantine*** - At any point, if there is a need to evacuate or quarantine a program or facility based on Coworker or Companion illness. All Coworkers will adhere to the Ministry of Health Licencing quarantine protocols. In this regard, the Ita Wegman Association will work with Ministry of Health officials to ensure the safety and well being of all Companions and Coworkers.

Hand washing is the best single way to prevent the spread of germs from one person to another. Wash hands thoroughly with soap and water for at least 15-20 seconds.

When to Wash Your Hands:

- Before preparing, handling, serving or eating food
- After personal body functions
- Before and after breastfeeding
- Before putting on any PPE including gown, gloves, facial or eye protection
- After taking off any PPE
- Before and after engaging in group activities
- Before contact with a participant or their environment
- Before and after first aid
- After contact with bodily fluids

- After contact with participant and/or their environment
- After disposing of garbage or dirty laundry
- Whenever hands look dirty

Proper Hand-Washing Method:

1. Wet your hands

2. Apply plain soap (antibacterial soap not necessary, as COVID-19 is a virus and not bacteria)

3. Rub hands together for 20 seconds (the length of time it takes to sing *Twinkle Twinkle Little Star* or *Happy Birthday*)

4. Wash the front and back of your hands, as well as between your fingers and under your nails

5. Rinse your hands well for 10 seconds under warm running water, using a rubbing motion

6. Wipe and dry your hands gently with a paper town or a clean towel (drying them vigorously can damage the skin)

7. Turn off tap using the paper towel so that you do not re-contaminate your hands (when using a public bathroom, use the same paper towel to open the door when you leave)

8. If skin dryness is a problem, use a moisturizing lotion

Cover your mouth and nose with a tissue when you cough or sneeze. Throw tissues away immediately, then wash or sanitize your hands. If you don't have a tissue, cough or sneeze into the bend of your elbow, or into your upper arm or sleeve (not your hands).

Teach others – particularly children about healthy behaviour and potential risks and how to deal with them safely.

Please Note: BC Centre for Disease Control (2020). Taken from **http://www.bccdc.ca/health-info/diseases-conditions/covid-19/prevention-risks/cleaning-and-disinfecting**

How can you safely clean up spills of blood or other body fluids?

- Protect yourself by wearing disposable vinyl or latex or rubber gloves. If there is a risk of splashing use protective eye wear.
- Use disposable absorbent material such as paper towels to remove most of the spill. Place these in a plastic bag and deposit in the municipal garbage disposal unit, not in the regular facility garbage receptacle, where others come in contact with it.
- Wipe the floor, or any contaminated surfaces with a disinfectant solution. This can be easily made by mixing one part household bleach to ten parts of water. This type of bleach solution should be freshly made up or it may lose its strength. For carpets or upholstery that may be damaged by bleach, other household germicides or disinfectant agents can be used. Soak mops or brushes that have been used for cleaning in a disinfectant for 20 minutes.
- When you are finished wash your hands thoroughly with soap and water and make sure mops, brushes and pails have been thoroughly rinsed to avoid a mix of chemicals

What should you do if you find a used syringe or condom?

NEVER touch needles, syringes or condoms. It is important to help everyone understand how important these necessary precautions are.

If you find a used syringe or condom – especially in a park, school or playground – it is important to inform the proper authorities or, if able, dispose of them promptly and carefully. It is best to limit risks as much as possible.

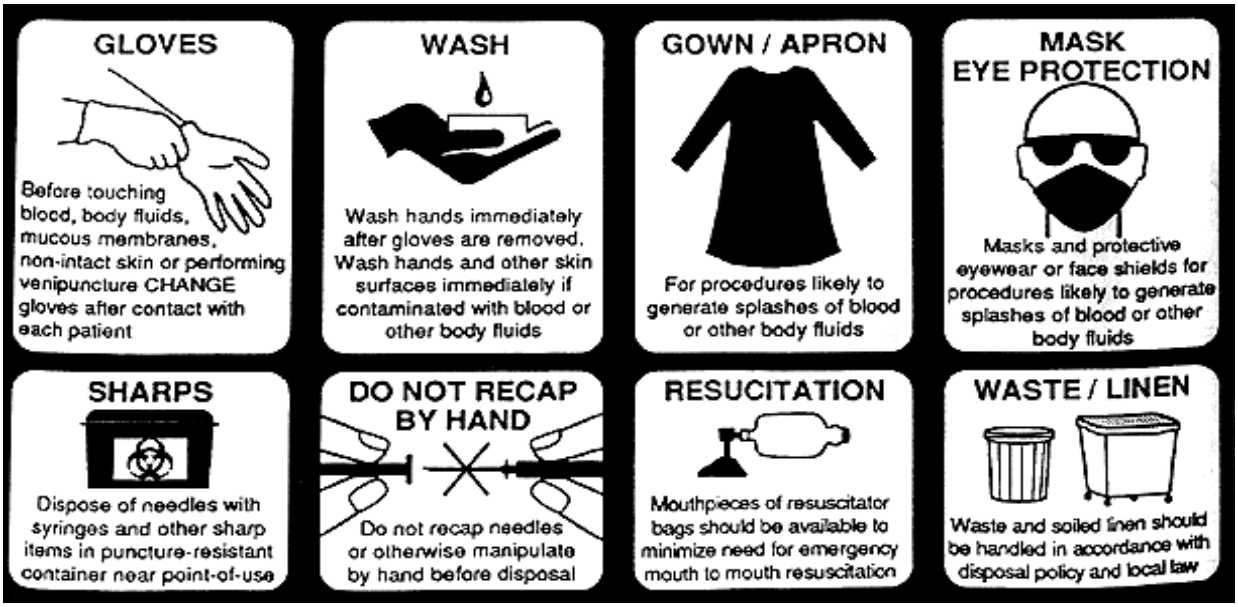
- Use a pair of tongs or pliers, or a pair of sturdy gloves to pick up these items.
- Discard condoms in a plastic bag.
- Discard syringes or needles in a puncture-proof container, preferably one intended for such purposes. Preferably a Sharps collector container, or plastic or metal container with a lid.
- When you have finished, wash your hands carefully with soap and water.

What should you do if you accidentally prick yourself with a dirty needle?

- If possible, put the pricked area low to the ground to promote bleeding.
- Wash the area well with soap and water.

- Go to the nearest local health unit or hospital emergency department immediately for treatment and/or assessment.

REMEMBER – ALL BLOOD AND BODY FLUIDS ARE POTENTIALLY INFECTIOUS.



The international biological hazard symbol

A **biological hazard** or **biohazard** is a biological substance that poses a threat to (primarily) human health. This can include medical waste, samples of a microorganism, virus or toxin (from a biological source) that can impact human health. It can also include substances harmful to animals. The term and its associated symbol are generally used as a warning, so that those potentially exposed to the substances will know to take precautions. There is also a biohazard

HCS/WHMIS logo which utilizes the same symbol.

Biohazardous agents are classified for transportation by UN number:

- UN 2814 (Infectious substance to Humans)
- UN 2900 (Infectious substance to Animals)
- UN 3291 (Medical Waste)

Levels of biohazard

Level 1 being minimum risk and Level 4 being extreme risk.

- **Biohazard Level 1:** Several kinds of bacteria including Bacillus subtilis, canine hepatitis, E. coli, varicella (chicken pox), as well as some cell cultures and non-infectious bacteria. At this level precautions against the biohazardous materials in question are minimal, most likely involving gloves and some sort of facial protection. Usually, contaminated materials are left in open (but separately indicated) trash receptacles. Decontamination procedures for this level are similar in most respects to modern precautions against everyday viruses (i.e.: washing one's hands with anti-bacterial soap, washing all exposed surfaces of the lab with disinfectants, etc). In a lab environment, all materials used for cell and/or bacteria cultures are decontaminated via autoclave.
- **Biohazard Level 2:** Hepatitis B, hepatitis C, influenza, Lyme disease, salmonella, scrapie.
- **Biohazard Level 3:** Anthrax, BSE, HIV, mumps, West Nile virus, SARS, smallpox, tuberculosis, typhus, Yellow fever.
- **Biohazard Level 4:** Bolivian fever, Dengue fever, Marburg Virus, Ebola, Hanta virus, Lassa virus, and other various hemorrhagic diseases (mostly of African descent). When dealing with biological hazards at this level the use of a Hazmat suit and a self-contained oxygen supply is mandatory. The entrance and exit of a level four biolab will contain multiple showers, a vacuum room, an ultraviolet light room, and other safety precautions designed to destroy all traces of the biohazard. Multiple airlocks are employed and are electronically secured to prevent both doors opening at the same time. All air and water service going to and coming from a level 4 biolab will undergo similar decontamination procedures to eliminate the possibility of an accidental release.

Hepatitis B

In the case of Hepatitis B, signs of illness may be tiredness, fever, loss of appetite, nausea,

tenderness in the upper right side of the stomach area, dark coloured urine, clay-coloured stools and a yellowing of the skin and eyeballs.
Sneezing, coughing, hugging or using the same dishes or cutlery does ***not*** spread Hep B.

Where the Ita Wegman Association is *aware* of an infectious Individual, a vaccine will be offered as a preventative measure to all persons who may be in close contact with the infected Individual and thus at risk of contracting the disease.

"Aware" is defined as conclusive evidence, as determined by a blood test ordered by the Individual's physician, and brought to the attention of the Facility Manager. When knowledge of the presence of Hep B is the result of a self-disclosure or a disclosure is made for or on behalf of the Individual, a Coworker will notify the Facility Manager immediately. Furthermore, it is expected that new Individuals to the Ita Wegman Association will openly provide a comprehensive medical history prior to entering support.

The approval for reimbursement of vaccines will only be made upon prior written approval of the Business Administrator and in keeping with the above policy.

If an Individual was accidentally exposed to the disease, without having been vaccinated prior to exposure, an Immunoglobulin shot is to be given within 24 hours (followed by the 3 shots regimen).

While Hep B is a "Reportable Disease", meaning by law all sources *must* report Individuals known to have the disease to the local health authorities, this policy shall be carried out with the maximum respect possible pertaining to the privacy and dignity of the Individual.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Joint Health and Safety Committee

HSP28: VEHICLE USE, INCIDENTS, AND ACCIDENTS

Associated standard 1.H. 13 a, b, c (1, 2), d, e, f, g (1, 2), h, I, j, k, l

**Please note that all points in the policies below apply to Association-owned vehicles and personal vehicles being used for Association business.*

The Ita Wegman Association
of British Columbia

POLICY

The Ita Wegman Association vehicles must be operated safely and maintained in clean and acceptable condition at all times. The use of vehicles owned or leased by the Ita Wegman Association is restricted to qualified Ita Wegman Association drivers.

PROCEDURE

VEHICLE OPERATION & SAFETY

- Any approved Coworker operating an Ita Wegman Association vehicle must do so in accordance with the laws as prescribed by the BC Ministry of Transportation and ICBC (Insurance Corporation of British Columbia).
- It is the responsibility of the driver to ensure that all passengers are wearing seat belts.
- At no time should the number of passengers in the vehicle exceed the number of available seat belts.
- Unsafe operation of an Ita Wegman Association vehicle will result in the loss of the driver's qualifications as an Ita Wegman Association driver.
- There is no smoking, drinking alcohol, using cannabis, or consumption of illegal substances allowed in any Ita Wegman Association vehicle, or personal vehicle used for Ita Wegman Association business.
- Adults can operate a vehicle with cannabis in it as long as the cannabis is:

In its original, never-opened packaging from a federally licensed producer; and

Not readily accessible to the driver and any passengers (for example, in the trunk).

- Any incidents of traffic violations, accidents, or other serious occurrences must be brought to the immediate attention of the Executive Director or Facility Manager.
- Vehicles are not to be left running and unattended for any reason. Individuals are not to start vehicles unless they have a valid driver's license. Unoccupied vehicles are to be locked when on and off Glenora Farm property.
- All association vehicles have the associated vehicle use policies and procedures in the vehicles.

The Ita Wegman Association
of British Columbia

QUALIFICATIONS AND RESPONSIBILITIES OF ITA WEGMAN ASSOCIATION DRIVERS

- All drivers of Ita Wegman Association vehicles must hold a valid BC or international Driver's License.
- Drivers of Ita Wegman Association vehicles must be at least 18 years old and have held a valid drivers license for at least 6 months.
- IWA vehicle orientation is required for approved Coworkers. A supervised test drive and orientation will be performed before an approved Coworker is permitted to drive an Ita Wegman Association vehicle. An official driving test with a licensed instructor is required before a driver is permitted to drive Companions in an IWA or personal vehicle.
- The Executive Group may revoke any person's status as a qualified Ita Wegman Association driver at any time.
- If a Partially Paid Volunteer (STCW) has an at-fault incident/accident while driving the STCW vehicle, the STCW's driving privileges will be revoked for the remainder of their time at the Farm, depending on the severity of the incident. The Executive Group will determine severity.
- Driving privileges will be reviewed and possibly revoked for any Ita Wegman Association driver who violates the laws as prescribed by the BC Ministry of Transportation.
- Once the privilege to drive has been revoked, a re-testing will be required before the Coworker can resume driving any Ita Wegman Association vehicles.
- At-fault incidents that require towing or other breakdown expenses will result in driving restrictions being applied to the Coworker at fault. This could include having driving privileges revoked.
- Practicum students are not eligible to drive any IWA vehicles.

Please Note:
A Coworker will not qualify for driving any Ita Wegman Association vehicle if, during the last 36 months, the driver has had any of the following experiences:

• Been convicted of a felony.

• Been convicted of sale, handling, or use of illicit drugs.

• Has automobile insurance canceled, declined, or not renewed.

• Been convicted of an alcohol- or drug-related offense while driving.

• Had a driver's license suspended or revoked.

• Been convicted of two or more speeding violations or one or more other motor vehicle violations.

• Been involved in two or more at-fault accidents.

DRIVERS PROVIDING TRANSPORTATION FOR COMPANIONS

- It is the responsibility of the Ita Wegman Association, in conjunction with the driver, to ensure that Companions have safe and appropriate accompaniment when traveling in an IWA or personal vehicle. For example, Companions with special medical needs may require accompaniment by a Coworker with special medical training.
- Drivers must have valid First Aid training, and First Aid kits must be accessible in the vehicle when transporting Companions.
- Emergency Kits must be accessible in all IWA-owned vehicles - blanket, granola bars, water bottles.
- Drivers must carry a **cell phone** with them. It **must be kept on** for the duration of the trip. As a safety check, drivers must make sure the cell phone is on before departing for the trip. Drivers are not permitted to use any cell phone while driving except in emergencies. If calls need to be made or answered, the driver must pull off the road, come to a complete stop, and put the vehicle in park before making a call.
- Companions are not to be left unattended in an Ita Wegman Association vehicle or a personal vehicle used for Ita Wegman Association business.

OUT OF TOWN TRIPS & VACATION TRIPS (RELEVANT ONLY TO STCW CAR)

- All “Transportation Policies” listed thus far also apply to out-of-town trips.
- The STCW vehicle is intended for STCWs to use on their days off. If a STCW wishes to use the STCW car for a holiday/vacation trip, the trip must be approved by all other STCWs that may need access to the vehicle for their days off. Upon approval, the holiday/vacation trip must not exceed 4 nights and 5 days. Vacations/holidays longer than this time frame can be engaged with by accessing public transportation.

- All trips North of Nanaimo or off Vancouver Island are considered 'out of area' and need to be registered and approved by the Facility Manager and Executive Director (Registered Travel Plan - to include a map) at least 5 days before the planned trip. Failure to register travel further north than Nanaimo will result in the loss of driving privileges. Out of area travel plans will be reviewed, and the following factors will be taken into consideration when approving or declining a proposed out of area travel plan: distance, road quality, cell reception, length of the trip, driving experience, driving record, age and condition of the vehicle, and number of people travelling in the vehicle.
- No-go zones: The Ita Wegman Association prohibits Partially Paid Volunteers (STCWs) from using Ita Wegman Association vehicles on all gravel roads (the Farm driveway is an exception).
- Bus service to remote areas (Bamfield, Tofino, Cape Scott, Strathcona, etc) is available by way of booking directly with IslandLinkBus, Vancouver Island Connector, or Tofino Bus

VEHICLE MAINTENANCE

- A pre-trip inspection, noting any damage and odometer reading, needs to be done and signed off on before every trip for all IWA vehicles.
- All vehicles owned or leased by the Ita Wegman Association will comply with maintenance procedures and schedules as outlined by the vehicle manufacturer's recommendations. To ensure that Ita Wegman Association vehicles are in safe working order at all times, the Ita Wegman Association maintains written documentation regarding these procedures, inclusive of preventative maintenance and detailed inspections/repair records.
- The Ita Wegman Association Maintenance Manager will keep track of service dates for the vehicles as well as incidents of recalls, tire changes, and inspections. A monthly vehicle inspection is completed by the Maintenance Manager or designate. If there are any problems with the vehicle(s), the Maintenance Manager must be notified immediately.
- Before getting in an IWA vehicle, a walk-around will be completed to ensure the vehicle is safe to drive. Report any damage to the Maintenance Manager or designate.
- Ita Wegman Association drivers are responsible for cleaning IWA vehicles, including the interior and exterior. All garbage is to be removed from the vehicle(s) after each use.

- When purchasing gas, use the provided CoOp gas card(s) and submit the receipt to the administration office for processing. The Ita Wegman Association farm truck will be filled with marked farm gas, located on site.
- The above point does not apply to the Partially Paid Volunteer (STCW) vehicle. Gas for the STCW vehicle is the financial responsibility of the STCW(s).

VEHICLE INSURANCE

Associated standard 1.H. 13 a, b, c (1, 2), d, e, f, g (1, 2), h, I, j, k, l

POLICY

All leased and owned vehicles used to support Ita Wegman Association / Glenora Farm Community transportation needs must maintain adequate auto insurance to cover all business purposes for which they are used. This includes:

- The vehicle is properly licensed;
- The operator of the vehicle holds a valid driver's license;
- The operator of the vehicle has a current drivers abstract on file (updated annually);
- The vehicle is properly maintained in a safe and operable condition;
- The vehicle is adequately insured for business use (minimum 3 million liability);
- Companions do not drive IWA vehicles.

Vehicles leased or owned by the Ita Wegman Association are insured through The Ita Wegman Association. The vehicle fleet insurance policy is reviewed and updated as necessary to ensure insurance coverage fully meets The Ita Wegman Association's needs and all provincial and federal regulations related to transporting Companions and Companion safety.

All vehicles, whether privately owned or owned by the Ita Wegman Association, need valid insurance to be parked or stored at Glenora Farm.

PROCEDURE

The Executive Director reviews the insurance policy with an insurance representative on an annual basis to ensure the policy meets all Ita Wegman Association transportation needs and is financially viable. Policy updates occur to ensure coverage addresses provincial or federal safety regulations when applicable.

Responsibility of: Executive Director**/** /Maintenance Manager/Finance Group

Monitored by: Executive Director **/** Maintenance Manager

VEHICLE ACCIDENTS

Associated standard 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

It is the priority of the Ita Wegman Association to maintain the health, safety, and security of all Coworkers and Companions in the event of a vehicle accident. Any accidents involving IWA vehicles must be reported by the driver (when it is safe to do so) to the Executive Director, Facility Manager, or designate.

This includes accidents occurring in vehicles owned, leased or operated by The Ita Wegman Association - and accidents occurring in personal vehicles when they are being used for Ita Wegman Association business.

Coworkers must follow established Ita Wegman Association guidelines for documenting and reporting vehicle accidents. Documentation will take place at the earliest opportunity, when it is safe to do so. Documentation will be reviewed by the Executive Director and the Facility Manager, then forwarded to identified authorities i.e., licensing regulators, as required.

PROCEDURE

Coworkers involved in a vehicle accident must respond immediately on-site, with First Aid or assistance as required to ensure the safety of Ita Wegman Association Companions, Coworkers, and bystanders. This includes:

- Calling 911, requesting medical assistance (if required), and using the Companion emergency information as a reference to provide pertinent medical information to emergency medical personnel.
- Providing First Aid as required until emergency medical personnel arrive on the scene.
- Ensuring that Companions, Coworkers, or bystanders at the scene are reassured and are being well cared for.
- Accompany the injured Companion or Coworker if possible, in the ambulance during transit to a hospital.
- All follow-up medical procedures for a Companion injured in a vehicle accident will be managed by a designated Coworker.
- As soon as it is safe and the situation has been secured, the Coworker must call the Ita Wegman Association to report the accident. If vehicle occupants have sustained injuries, the Executive Director or Facility Manager will notify the Companion / Coworker emergency contacts and make plans for further support.
- In the event of an injury that requires external medical attention, the Ita Wegman Association Facility Manager will document and report the accident immediately to licensing authorities, including Island Health and Community Living British Columbia.

EMERGENCY NUMBERS:

***Ambulance / Police / Fire Department* - 911**

(If not in a 911 calling area, call the RCMP for emergency assistance)

Responsibility of: All Approved Driving Coworkers

Monitored by: Maintenance Manager, Executive Director, Facility Manager, Finance Committee, Executive Group, Board of Directors

Accident Checklist

- **Call 911 if anyone is injured.**

- **If safe, move the vehicle to the side of the road.**
- **Use the IWA vehicle cell phone or your cell phone to take photos of all vehicle damage on any vehicles involved in the accident.**
- **If any witnesses are present, gather their names, phone numbers, emails, and mailing addresses.**
- **Avoid discussing who is responsible for the accident with the other drivers.**
- **Take a photo of the insurance for all vehicles involved in the accident.**
- **Take a photo of the license plates of all vehicles involved in the accident.**
- **Take a photo of the driver's license of all other drivers involved in the accident.**
- **Record contact information (telephone and email) for all other drivers involved in the accident.**
- **Record the time, date, and precise location of the accident. Indicate the names of the streets at the closest intersection.**
- **Record what happened leading up to the accident.**
- **List all passengers in the IWA vehicle (Companions and Coworkers).**
- **Fill out the printed ICBC accident forms located in each vehicle.**
- **https://assets.ctfassets.net/nnc41duedoho/72Je4sNObH4LCHFOSNbIbe/724fb2897f996b1e00d10caf1ac63a46/what-to-do-after-crash.pdf**

VEHICLE ACCIDENT INVESTIGATION AND REPORTING

Associated standard 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

All vehicle accidents, incidents, injuries, and fatalities must be reported and investigated immediately.

PROCEDURES REPORTS

Immediately following a vehicle incident or accident that results in medical attention from an external medical professional, a Critical **Incident Report** must be prepared by the Coworker involved and the Facility Manager. The Facility Manager is responsible for completing a follow-up report, including recommendations to prevent recurrence.

The Facility Manager and Executive Director will review the report and determine if an investigation is required. If such, the Executive Group will collect information to determine a course of action. A report will be compiled within 5 business days and will include action(s) to be taken and recommendations to be implemented. The Executive Group will oversee the implementation of recommendations identified in the report. To support quality assurance efforts, information on incidents, injuries, and fatalities will be analyzed annually.

ACCIDENT PAY FOR EMPLOYEES

Concerning accident pay:

If a Coworker is injured on the job and has to leave the premises for medical treatment, the Coworker will receive full pay for that workday.

If the injured Coworker is unable to return to work or modified duties, they will receive WorkSafe BC wage loss benefits until they can return to work.

Responsibility of: All Coworkers

Monitored by: Executive Group

HSP29: PANDEMIC EVENT

Associated standard 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5) and 1.H.12 a (1, 2, 3, 4, 5), b (1, 2, 3)

POLICY

The Ita Wegman Association promotes a safe and healthy environment for all its Coworkers, Companions, and visitors. The Ita Wegman remains open in all but the most extreme circumstances. Unless an emergency closing is announced, all Coworkers are expected to report to work.

PROCEDURE

Personal Hygiene and Good Health Practices to Maximize Health

It is very important that everyone vigilantly practice standard influenza prevention. These practices include frequent hand washing, respiratory hygiene (covering your mouth and nose with a tissue when you cough or sneeze. Throw tissues away immediately, then wash or sanitize your hands. If you don't have a tissue, cough or sneeze into the bend of your elbow, or into your upper arm or sleeve, not your hands).
Individuals should wash hands regularly and use alcohol hand gel, avoid touching eyes, nose, and mouth.
Full information on these and other steps to help avoid infection is available online at https://www.canada.ca/en/public-health/services/diseases/flu-influenza.html?utm_source=canada-ca-flu-en&utm_medium=vurl&utm_campaign=flu

For information specific to COVID-19, please review ***HSP47 COVID-19 Safety Plan*** and ***HSP27 Infection Control and Standard Universal Precautions***.

If a Companion, Coworker or other person connected with The Ita Wegman Association develops a fever or cough illness, regardless of where any may have travelled, this needs to be reported and the individual must self isolate for a minimum of 10 days.

Any concerns or questions can be addressed initially by calling HealthLink BC at 811, anytime day or night.

Health and Safety Committee

The Facility Manager with the Ita Wegman Association Joint Health and Safety Committee , will be responsible for monitoring emergency conditions for the purposes of communicating and implementing emergency plans to maintain the safety and security of Ita Wegman premises during emergency conditions.

Designation of Emergency Closing

Only by the authorization of the Executive Group, or management designate, in consultation with the Joint Health and Safety Committee will The Ita Wegman Association cease operations due to emergency circumstances. If an emergency evacuation is ordered, all Coworker and Companions should calmly and quickly follow their established evacuation procedures and routes.

Business Continuity

Unless Coworker have been identified as having a pandemic disease (as defined by the Ministry of Health), then they are expected to report to work. If emergency conditions prevent Coworker from reporting to work or on time, they are responsible for notifying their Supervisor or designate, if feasible, within the first hour of the workday. If possible, such notification should be made by a telephone conversation directly with the Supervisor or designate. If direct contact is not possible, leaving a detailed voicemail message or message with the administration offices is the preferred alternative. Coworker should leave a phone number where they can be reached (if not residing on the farm).

For example, if reporting to work, and common flu symptoms appear, including fever, sneezing, runny nose, coughing, sore throat, headache, muscle aches, and feeling tired and weak, the Coworker will be sent home and may be required to have an evaluation by a trained medical professional. If a pandemic influenza is severe enough, then The Ita Wegman Association may decide to reduce Coworker face-to-face exposure by encouraging the practice of social distancing by telecommuting, teleconferencing, remaining at least two meters (six feet) apart from other individuals, and limiting or banning business travel to regions affected by flu outbreaks.

Definitions

Pandemic Event: A new strain of disease/virus that spreads quickly worldwide; is carried and spread among humans; humans have little or no immunity to it. (www.fightflu.ca)

Responsibility of: All Coworkers

Monitored by: Facility Manager and **Joint** Health and Safety Committee

The Ita Wegman Association
of British Columbia

HSP30: AWOL OR COMPANION MISSING

Associated standard 1.H.2 (a, b) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

In all cases of Companions being absent without notification, the Glenora Farm Coworker will evaluate the circumstances, define the degree of risk or danger to the missing Companion, and make every attempt to locate the Companion.

A Companion is considered absent without notification if they leave the residence or day program without notification and their whereabouts are unknown. If the Companion is considered to be at high risk of harming themselves or others, and is absent without notification, they will immediately be reported to the Police.
Overnight Coworkers who find a Companion missing will follow the procedures listed below specific to completing an internal search of the residence but will not go out of the residence to complete an external search, unless the house has adequate Coworker coverage. If the Companion is not found during the internal search, Coworkers will contact the Facility Manager to report and for further direction.

PROCEDURES

A Companion may be considered “Absent without notification” if:

- A Companion leaves Glenora Farm property without notifying a Coworker.
- A Companion is missing.
- A Companion leaves in crisis.
- A Companion does not return after an overnight or off-site visit.

WHERE A COMPANION IS DEEMED TO BE MISSING

If a Companion is determined to be missing, Coworkers determine the level of risk by asking:

- Does the Companion have a history of high-risk behavior and/or suicide behavior?

(No=low risk, yes=high risk)

- Are the Companion's whereabouts known?

(Yes=low risk, no=high risk)

- Can the Companion's absence be explained?

(Yes=low risk, no=high risk)

- Are there current concerns for the Companion's emotional state?

(No=low risk, yes=high risk)

- Is the Companion at risk from any known aggressors?

(No=low risk, yes=high risk)

PROCEDURE TO FOLLOW

Remember: Any decision should be made by two Coworkers. Please call 911 as needed.

As soon as a Companion is noted absent without notification, the Coworker responsible will:

- Notify the House Coordinator, Coworkers on site, the Facility Manager, and the Executive Director. Ask all Coworkers if they have information as to the whereabouts of the missing Companion.
- The Facility Manager and Executive Director will assign a search coordinator who will assign tasks.
- Conduct a search of the property.
- Check emergency contact and call them. Make inquiries through known friends and family.
- Contact the Police (911) if deemed necessary.

Before contacting the police to report a missing person, please adhere to the following protocol:

- Confirm that the Companion is missing by assigning others to check bedrooms, bathrooms, workplaces, vehicles, other groups of individuals, and outdoor premises.
- Walk or drive any suspected routes as assigned by the search coordinator. Be sure to take a communication device (cell phone, walkie talkie, etc.).

When to call the police:

- If it is possible that the missing Companion will have been involved in an accident contact 911.
- If no result, and within 20-30 minutes of the initial alarm, contact 911.

Information to be provided to the police:

- Detailed physical description (age, height, weight, hair color, eye color, marks, scars, tattoos, piercings).
- Photograph (including age of the photograph and any changes since photo was taken).
- What the Companion was wearing (clothing/shoe descriptor/size, jewellery, accessories, personal effects on their person).
- Where and when the missing person was last seen or last known to be.
- Possible reason(s) why the Companion may have gone missing. Is it out of character for the person to go missing?
- Possible destination or location(s) where the missing Companion may be found.
- Missing Companion's mode of transportation.
- Does the Companion have a history of wandering? Will they respond to their name?
- Is the Companion a danger to themselves or others? Has a Mental Health Act Warrant been issued?
- Does the Companion require medication? What is their level of mobility?
- The Companion's ability to communicate effectively (limitations of verbal communications).
- Support approach for Companion with proximity / contact reactions.

Coworkers can use the Companion's Care Plan, Risk Assessment, or information from the database to craft a list of relevant information about the Companion and their needs to provide the police with as much information as possible

RETURN OF COMPANION

Contact the police to cancel the missing person's registry and provide the Police with any pertinent details and:

- Notify all Coworkers and anyone else informed including family and friends
- Make a database entry of the events that took place
- Work with the Facility Manager or designate to immediately file a critical incident report with Island Health and CLBC

Responsibility of: All Coworkers

Monitored by: Facility Manager

HSP31: DENTAL CARE AND MEDICAL EXAMINATIONS

Associated standard 1.H.2 (a, b)

POLICY

The House Coordinators will ensure that health-related needs are met by scheduling appointments, supporting Companions to attend appointments, and ensuring accurately and timely documentation is included in the online database.

PROCEDURES

RESPONSIBILITIES

The House Coordinator or designate will ensure that:

- Each residential Companion completes a physical examination, annually or as needed.
- Each residential Companion completes a dental examination, bi-annually or as needed.
- Completed assessments or recommendations from medical professionals are used to support Companion medical and support needs, activity planning, etc.

DOCUMENTATION

The House Coordinator or designate will ensure that the following information is included in the online database:

- The date of the last medical/dental examination (when available).
- The date of the next examination required.

If the examination is delayed, the House Coordinator or designate will:

- Record the circumstances on the online database and re-schedule an examination as soon as possible.

Responsibility of: House Coordinators

Monitored by: Facility Manager

HSP32: FOOD AND NUTRITION SAFETY

Associated standard 1.H.2 (a, b)

POLICY

The House Coordinators will ensure that Companions receive: 1) Well-balanced meals and snacks that are nutritionally adequate and meet Canada food guidelines, 2) Where possible, foods that are culturally sensitive, recommended by a physician, support dietary or allergic issues and respect their individual preferences will be made available and 3) Residences kitchens will adhere to the local standards of health and safety regarding the sanitation, maintenance, as well as food storage & preparation.

PROCEDURES CANADA FOOD GUIDE

Meals and snacks will be prepared in accordance with Canada's Food Guide and Health requirements. Menu plans will be developed and maintained by the House Coordinators.

FOOD PREPARATION AND HANDLING

The House Coordinators must ensure that conditions for food preparation and handling are

sanitary and in accordance with local health regulations. All kitchen Coworkers are required to wash their hands before handling any food and before each meal. All dishware will be washed and dried by a dishwasher on a daily basis. If washed by hand, dishes must be dried immediately. All sharp utensils are monitored.

SPECIAL NEEDS – DIETARY, ALLERGY OR CULTURAL REQUESTS

The House Coordinators will ensure that special menus are provided, in accordance with health guidelines, for Companions with food allergies, medical, cultural, or religious requirements. Companions will be expected to identify any dietary, food allergies, medical, cultural or religious requirements upon intake to ensure food served meets restrictions identified. Companions will be expected to sign the Ita Wegman Association food allergy and medical waiver, which includes a questionnaire noting any and all issues that require attention and support.

STORAGE OF FOOD

All kitchen Coworkers must ensure that the manner in which food is stored is adequate to retain nutritional value and to prevent contamination. Fresh vegetables and fruit will be purchased on a weekly basis. Dry goods will be stored in a cool dry place. All opened dry goods will be clearly labeled and stored in plastic containers with lids secured. Leftover food will be labeled in plastic containers and stored in the fridge with lids secured. Leftover food will be discarded after 48 hours except for those foods that can be/are frozen.

Responsibility: All Coworkers

Monitored by: House Coordinators

HSP33: MENU PLANNING

Associated standard 1.H.2 (a, b)

POLICY

All food menu planning must ensure that Companions are provided with nutritious meals and snacks that meet or exceed the nutrition standards listed by the Canada Food Guide.

Menu planning must take into account:

- The needs of the Companions, their ages, level of activity, requirements of special diets and any matter that may affect the ability of persons in care to consume or safely consume food and drink.
- Food preferences and cultural backgrounds.
- Seasonal variations in food and diversity of food texture and color.

Sufficient time must be given to companions to enable them to comfortably consume meals and snacks.

PROCEDURES

- Upon intake, general information is obtained and recorded that lists the food and snack/menu planning needs of each Companion.
- Information obtained includes cultural, religious and other special dietary needs and/or requests.
- The House Coordinators develop snack/menu plans in collaboration with information collected on each Companion as applicable.
- Snack/menu plans are posted in a common area on a weekly basis.
- Requests for food choices can be made to the House Coordinator as necessary.

Responsibility of: House Coordinators

Monitored by: Facility Manager

The Ita Wegman Association
of British Columbia

HSP34: HEALTH HIRING REQUIREMENTS

Associated standard 1.H.2 (a, b)

POLICY

All Coworkers must be in good health, as determined by the requirements of their job or contract. Pre-employment medical assessments may be requested as a condition of employment approval.

CONDITIONS

Prior to hire and commencing work, must fulfill the following requirements:

1. Complete and produce a written Doctor's certification of physical and mental fitness (when applicable);
2. Have a current TB test results or acquire documentation;
3. Complete a current Criminal Records Check (CRC);
4. Produce a Driver's License Profile (when applicable).

All Coworker shall possess and maintain the following requirements:

1. A current First Aid Certificate which meets or exceeds the level required by the Ministry of Health in compliance with WCB.

PROCEDURE

- Coworkers may be asked to provide a "Doctor's Certificate of Fitness" form to the Facility Manager prior to commencing work and at any other time as required by The Ita Wegman Association or the Medical Health Officer.
- In certain workplaces, preventative vaccinations are an important safety measure for all Coworkers and are provided without charge by the local Public Health Department.
- All Coworkers must undergo testing for tuberculosis (TB) prior to start date and as required during their time with The Ita Wegman Association, as prescribed by provincial regulations

- It is recommended that all Coworkers be immunized against Diphtheria, Tetanus, Poliomyelitis, Measles and Rubella.
- Coworkers assigned to designated "high risk" areas will be offered the Hepatitis B Vaccine, provided free of charge by the Ministry of Health. Information regarding Hepatitis B will be provided.
- Coworkers who are regularly involved in the preparation and/or handling of food are to report all incidences of illness, particularly those involving digestive upsets (e.g. diarrhea, vomiting, nausea, or infections) to their immediate supervisor.
- Any incidence of communicable disease is to be immediately reported to the House Coordinator and/ or Facility Manager.
- Any Coworker with a rash, lesion, suture line, burn, or other skin condition may be required to obtain medical approval prior to working. All such conditions must be reported to the House Coordinator and/ or Facility Manager.
- All Coworkers must observe general rules of hygiene and maintain a high level of personal cleanliness.
- Coworkers providing direct care must wash their hands before and after, and wear gloves during providing such care.
- Coworkers are required to follow safe working procedures and to reduce the risk of exposure to blood/ body fluids by properly disposing of sharp objects and wearing adequate protective equipment when required.
- Any Coworker who refuses to provide required health/ medical confirmations will be subject to corrective action, up to and including dismissal.

Responsibility of: All Coworkers

Monitored by: Facility Manager

The Ita Wegman Association
of British Columbia

HSP35: INCIDENT/ ACCIDENT INVESTIGATION REPORTING GUIDELINES

Associated standard 1.H.2. (a, b) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

The Ita Wegman Association ensures that any incident, which involves violence or perceived violence towards a Coworker, must be investigated to identify root causes (e.g. triggers and events that led up to the incident) and the development of control measures (e.g. additional training or supervision) to prevent such incidents from reoccurring.

PROCEDURES

The Facility Manager and Quality Assurance Coordinator or designate will conduct all incident investigations.

The Ita Wegman Association will conduct incident investigations into all incidents that:

(a) Are required to be reported by Section 175 of the Workers Compensation Act which sets out the requirements for an employer to conduct a preliminary investigation of a section 173 incident within 48 hours of the incident; https://www.bclaws.gov.bc.ca/civix/document/id/complete/statreg/19001_02#division_d1e5900

(b) Resulted in injury to a Coworker requiring medical treatment;

(c) Did not involve injury to a Coworker, or involved only minor injury not requiring medical treatment, but had a potential for causing serious injury to a Coworker; or

(d) Was an incident required by regulation to be investigated.

The Ita Wegman Association will perform a preliminary incident investigation within 48 hours of an incident's occurrence to identify:

(a) Any unsafe conditions, acts or procedures that significantly contributed to the incident, and

(b) If unsafe conditions, acts or procedures are identified to determine corrective action is necessary to prevent the recurrence of similar incidents.

The Ita Wegman Association will perform a full incident investigation within 30 days to:

(a) Determine the cause or causes of the incident investigated,

(b) Identify any unsafe conditions, acts, or procedures that significantly contributed to the incident, and

(c) If unsafe conditions, acts or procedures are identified to determine corrective action

necessary to prevent the recurrence of similar incidents.

For reportable investigations to Worksafe BC, investigations will involve the completion of a written report following the guidelines listed below:

(a) The place, date and time of the incident;

(b) The names and job titles of persons injured in the incident;

(c) The names and job titles of witnesses;

(d) The names and job titles of any other persons whose presence might be necessary for a proper investigation of the incident;

(e) A statement of the sequence of events that preceded the incident;

(f) Identification of any unsafe conditions, acts or procedures that significantly contributed to the incident;

(g) A brief description of the incident;

(h) The names and job titles of the persons who conducted the preliminary investigation of the incident;

(i) Interim corrective actions the employer has determined to prevent the recurrence of similar incidents, for the interim period between the occurrence of the incident and the submission of the full investigation report;

(j) Information about what interim corrective action has been taken and when any corrective actions not yet implemented will be taken; and

(k) The circumstances of the accident or incident that preclude the employer from addressing a particular element of the above-listed elements during the preliminary investigation period.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Group, Board of Directors

The Ita Wegman Association
of British Columbia

HSP36: WORK ACCIDENT / INCIDENT/ INJURY

Associated standards 1.H.2 (a, b) - 1.H.5 a (1, 2, 3, 4, 5, 6), b (1, 2), c (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11) and 1.H.10 a (1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19), b (1, 2, 3, 4, 5)

POLICY

The Ita Wegman Association maintains a safe and secure workplace. The Association adheres to all WorkSafe BC regulations to limit the occurrence of any work-related accidents, incidents, and injuries. https://www.worksafebc.com/en

FIRST AID/ CPR/ MANDT

The Ita Wegman Association will ensure all Coworkers are trained and qualified to perform first aid and CPR. Additionally, all Coworkers have received MANDT training.

REPORTING ACCIDENTS / INCIDENTS / INJURIES

All accidents, incidents, or injuries occurring at work must be reported. Reporting must include: notification to the Facility Manager, and include documentation of the accident, incident, or injury, including any action taken, and any follow-up action required.

SAFETY PLANNING

When required, Coworkers with physical challenges or pre-existing conditions will be expected to complete safety planning with their supervisor to identify condition/need (s), the circumstances of the condition/need (s), and action(s) required to ensure Coworker and Companion safety.

PROCEDURES

MINOR INJURY

In the case of a minor injury *(defined as an injury not requiring hospital attention)*
The injured person can administer first aid treatment or call on another Coworker if available to assist in treatment and notify their supervisor of the injury.

SERIOUS INJURY

In the case of a serious injury (defined as an injury requiring attention by a medical professional ie: walk-in clinic, hospital, dental emergency visit, etc)
Note: seek medical attention within two hours if poked with a needle or if injured, or bitten by a person with a known or suspected disease.

FIRST RESPONSE
If a person is seriously injured or perceived to be seriously injured, the first person on the scene will adhere to first aid and CPR training, which includes but is not limited to the following:

DO **NOT** move the injured person unless there is an immediate threat of further injury.

Phone the ambulance by dialing “911” and clearly and calmly report:

- Alpha numeric location at Glenora Farm
- Type of injury
- Number of people injured
- Dispatch a guide, if available, to the nearest road to direct the first aid attendant to the scene.

While waiting for the first aid attendant to arrive:

If conscious:

- Keep the injured person warm and reassured

If unconscious:

- Ensure that the air passage is kept clear
- Check for respiration, pulse, and bleeding

- Stop the bleeding
- Commence CPR, if necessary
- Once the first aid attendant arrives, follow their instructions completely.

AMBULATORY CARE

When an ambulance has been called to attend a workplace accident/incident, it is expected that the Coworker considered injured will allow the attending paramedics to provide medical assistance. Failure to allow paramedics to complete a proper examination places the Coworker and The Ita Wegman Association at risk. This risk will be documented, and the Coworker who refuses medical attention and /or advice will be requested to leave The Ita Wegman Association property. Coworkers requested to leave will be assisted (if required) to contact their emergency contact person(s) to secure transport from The Ita Wegman Association. Coworkers will be permitted to return to The Ita Wegman Association once they have been seen by a doctor and provided a note indicating they can return to work.

GENERAL NOTIFICATION

Concerning notification of a serious injury:

The Facility Manager, Executive Director, or designate will be responsible for notifying the injured person's family. The on-scene respondent should notify the Facility Manager, Executive Director, or designate, informing them of the details of the accident.

If a vehicle other than an ambulance transports someone directly to the hospital, the on-scene respondent will notify the Facility Manager, Executive Director, or designate. Information regarding the injured person's condition will be confirmed by the Facility Manager, Executive Director, or designate with the hospital/ doctor before relaying such information to others for general release.

REPORTING

CRITICAL INCIDENT FORM

The Facility Manager, Quality Care Coordinator, Executive Director, or designate will comply with HSP***8 Critical Incidents*** and complete ***HSP9 Critical Incident Report Form***

The Ita Wegman Association has a duty to report - “EMPLOYER’S REPORT OF INJURY OR INDUSTRIAL DISEASE” to WorkSafe BC https://www.worksafebc.com/en

If capable, the injured person will work with the Executive Director to complete and submit an employee and employer report to WorkSafe BC https://www.worksafebc.com/en/claims/report-workplace-injury-illness

NOTE: The Executive Director will complete the required reports if the Coworker is incapable of doing so.

RESPONSIBILITIES OF THE FACILITY MANAGER, EXECUTIVE DIRECTOR, OR DESIGNATE

The Facility Manager or Executive Director is responsible for the following actions:

EMERGENCY CONTACT NOTIFICATION OF HOSPITALIZATION

Concerning notification of the emergency contact:

If a Coworker is hospitalized due to an injury on the job, the Facility Manager, Executive Director, or designate, will:

- Notify the injured person’s emergency contact,
- Offer assistance, and
- Complete the required documentation.

FOLLOW-UP COMMUNICATION

Concerning follow-up communication with the injured person:

- The Facility Manager, Executive Director, or designate will be responsible for follow-up communication with the injured person.
- Communication will be regular and ongoing.
- Initial contact will be made within 24 hours following the injury, and inquiries should be made at this time to determine:
- The severity of the accident,

- If assistance can be provided by the Association and,
- What support is needed in coordinating external services,
- The doctor's assessment of the time required to recover from the injury,
- Information obtained will be shared with other Coworkers and Companions if approved by the injured Coworker and the Facility Manager or Executive Director**,**
- Initial contact will determine the timing of follow-up conversations; however, each injured Coworker should keep the Facility Manager and Executive Director apprised of their medical status and any changes to their medical status.

PHONED-IN INJURY

If a Coworker phones in from home stating they will not be able to work due to injury or accident, the Facility Manager, Executive Director or designate will:

- Ask, "Is your problem (sickness/injury) "work related", and:
- Determine (in the case of injury):
- What happened,
- Where it happened,
- When it happened,
- Why it happened and,
- Who witnessed it (if anybody),
- Determine if they have visited a doctor, or health care professional.

RETURN TO WORK PLAN

Concerning Coworkers returning to work who have been off due to a work-related injury, including a mental stress condition:

The injured Coworker will:

- Contact the Facility Manager or Executive Director when given medical clearance to return to work by either the attending physician or specialist.

- Present documentation from physician or specialist indicating recovery is complete and include any specific accommodations required and any potential concerns for relapse or re-injury.
- Meet with the Facility Manager, Executive Director, or designate to discuss and develop a return-to-work plan which identifies:
- When the Coworker returns to work.
- Identify any special accommodations required to return to work i.e. gradual return, partial job duties, restriction of job duties, intensity of work, physical accommodations.
- Provide medical documentation indicating specific accommodations required to facilitate return to work.
- Determine supervision dates to review related to return-to-work planning, including the safety plan, and support measures to be implemented if a relapse occurs.

The Facility Manager, Executive Director, or Designate will:

- Meet and develop a return-to-work plan and a safety plan in collaboration with the Coworker.
- Review all documentation identifying that the Coworker can return to work.
- Review any special accommodation requests and determine if the Association can facilitate these requests.
- Consult with the Executive Group to ensure special accommodations do not require the Association to allocate resources in a manner that may jeopardize program or financial stability.
- Develop an alternative return to work plan in consultation with the Coworker and Executive if special accommodations exceed Association resources.

The Facility Manager and Executive Director will:

- Review the plan.
- Add any necessary information and forward it to the Executive Group for final review.

The Facility Manager, Executive Director or designate will:

- Review with the Coworker and sign the plan.
- Place the signed work plan in the Coworker's confidential file.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Executive Director, Executive Group

HSP37: REFUSAL TO WORK

Associated standard 1.H.2 (a, b)

POLICY

The Ita Wegman Association ensures all programs and supports adhere to the WCA – Workers Compensation Act, OHSR – Occupational Health and Safety Regulations, and Worksafe BC regulations. Coworkers will not be disciplined for refusing to work at a residence or program location , which does not meet WCA, OHSR, and WorkSafe BC regulations or any other applicable Acts.

PROCEDURES

A. Coworkers must not carry out any work process or operate any tool, appliance, or equipment if that Coworker has reasonable cause to believe that to do so would create an undue hazard to the health and safety of any person.

B. A Coworker who refuses to carry out a work process or operate a tool, appliance, or equipment under Procedure A must immediately report the circumstances of the unsafe condition to the Facility Manager, Maintenance Manager, or Executive Director.

C. The Facility Manager, Maintenance Manager, or Executive Director, receiving a report under Procedure B, must immediately investigate the matter and

1. Ensure that any unsafe condition is remedied without delay, or
2. If the report is invalid, they must inform the person who made the report.
3. Inform the members of the Care Group, Joint Health and Safety Committee, and Executive Group.

D. If the procedure under C does not resolve the matter and the Coworker continues to refuse to carry out the work process or operate the tool, appliance, or equipment, the Facility Manager, Maintenance Manager, or Executive Director must investigate the matter in the presence of the Coworker who made the report and in the presence of

(a) A member of the Joint Health and Safety Committee.

E. If the investigation under procedure D does not resolve the matter and the Coworker continues to refuse to carry out the work process or operate the tool, appliance or equipment, the Facility Manager, Maintenance Manager or Executive Director, and the Coworker must immediately notify WorkSafe BC and an officer will be assigned who will investigate the matter without undue delay and issue whatever orders are deemed necessary.

Note - Coworkers will not be subject to any discriminatory action as defined in section 150 of Part 3 of the Workers Compensation Act because the Coworker has acted in compliance with section 3.12 or with an order made by an officer. If necessary or applicable, the Coworker will be provided a temporary assignment to alternative work at no loss in pay until the matter is resolved.

Resources from WorkSafe BC:

Home and Community Health Worker Handbook

Ensuring Staff are Safe and Healthy: The Role of Health Care Supervisors

Responsibility of: All Coworkers

Monitored by: Joint Health and Safety Committee**,** Facility Manager, Maintenance Manager, Executive Director

The Ita Wegman Association
of British Columbia

HSP38: TRANSFER TO HOSPITAL

Associated standard 1.H.2 (a, b)

POLICY

All Companions supported by Glenora Farm will have access to prompt and effective medical attention, as it is required.

PROCEDURES

If a serious illness/ injury requires prompt or immediate medical attention, the following steps must be followed, depending on the urgency of the situation:

A: SERIOUS ILLNESS/INJURY REQUIRING TRANSFER TO HOSPITAL

When an illness or injury is deemed serious and warrants **immediate** medical attention, the following steps must be taken, in the order given:

1. If medical attention is required immediately, call 911.
2. Provide first aid as needed until emergency services arrive on site.
3. Give the ambulance attendant a copy of all Companion medical information located in the Companion file, including Consent for Medical Care form.
4. A Coworker will accompany the Companion to the hospital in the ambulance or follow the ambulance to the hospital.
5. The House Coordinator, Facility Manager or designate will notify family members or other members of their support network of the emergency and transportation to the hospital. Information provided will include hospital name and contact number(s).
6. Once at the hospital, Coworkers are available to provide hospital personnel with all pertinent and requested information about the Companion.
7. The attending Coworker will inform the House Coordinator and Facility Manager of the Companion's status, and maintain regular communication, as required.
8. The attending Coworker is *NOT* authorized to sign any consent forms on behalf of the Companion.

9. If the Companion is admitted to hospital, the House Coordinator, Facility Manager or designate will consult with the Companion's family and other identified significant people.
10. If the Companion is admitted to the hospital the attending Coworker is there to provide emotional and mental support and is *NOT* to provide any medical care or support.
11. If the Companion is not admitted to the hospital, the attending Coworker will follow all directions given by the medical personnel at the hospital and ensure that the attending nurse/physician completes a "Hospital Discharge" form, prior to discharging the Companion.
12. Regardless of whether the Companion was admitted to the hospital or not, the attending Coworker will complete a database entry and forward the report to the Facility Manager.

B: SERIOUS ILLNESS/INJURY REQUIRING CARE BY A PHYSICIAN

When an illness or injury is deemed serious and warrants **prompt** care, the following steps must be taken, in the order given:

1. The attending Coworker will take the Companion to the doctor, clinic or the closest emergency room. If the program is unable to transport the individual to the medical facility, they will arrange for the Companion to be transferred to the facility via a non-emergency ambulance.
2. Ensure pertinent Companion medical information is available and taken to hospital, including Consent for Medical Care form.
3. The attending Coworker will inform the House Coordinator or Facility Manager who will inform (when applicable) identified family members and other significant people of the incident.
4. The attending Coworker will complete a database entry and forward the report to the Facility Manager.

Responsibility of: All Coworkers

Monitored by: Facility Manager

The Ita Wegman Association
of British Columbia

HSP39: INCLEMENT WEATHER

Associated standard 1.H.2 (a, b)

POLICY

The intent of this policy is to provide guidelines for Coworkers when they are absent, late, or required to remain at work due to inclement weather conditions.

PROCEDURES

Coworkers living off-site

Coworkers who live off-site will be expected to attend work unless it is unsafe to drive. For Coworkers who are late or do not make it to work, they will only be paid for work completed.

In situations where shift changes at a program can not occur based on weather, it will be expected that the Coworker on shift remains at the program until the weather improves and a replacement can be sent to the site.

Time of arrival at work will take into consideration transportation difficulties. Any work-related tasks (i.e. checking roads and attempts to reach work destinations) will be factored as work time.

In order to ensure Coworkers can get home safely and at a reasonable time, the Facility Manager or Executive Director may approve Coworkers to leave work early.

Coworkers living on site

Coworkers who live on site are expected to attend work.

Extreme weather

Outdoor day program activities will be conducted indoors when the weather is below -5 degrees Celsius, and when the weather is above 30 degrees Celsius.

Responsibility of: All Coworkers

Monitored by: Executive Director, Facility Manager

The Ita Wegman Association
of British Columbia

HSP40: SNOW REMOVAL

Associated standard 1.H.2 (a, b)

POLICY

When the weather becomes challenging and there is enough snow on the ground requiring removal, it is expected Ita Wegman Association Coworkers will work to clear driveways and pathways. The snow removal team are as follows:

* Heavy machinery operators for driveways - Maintenance, farm/garden Coworkers
* Shoveling around residences - Coworkers
* Shoveling / sanding pathways - Coworkers and Maintenance

Responsibility of: All Coworkers

Monitored by: Facility Manager

HSP41: BED BUGS

Associated standard 1.H.2 (a, b)

POLICY

The Ita Wegman Association makes every effort to ensure residential program and office areas maintain a bed bug free environment. As such, when bed bugs are discovered, protocols are immediately implemented to remove the threat and ensure all Coworkers and Companions are safe and free from the spread of bed bugs.

BED BUG CHARACTERISTICS

- Adults are 5-6 mm unfed (1/4 inch) and up to 10 mm when engorged (3/8 inch or so).
- Immature insects can range from 1mm to 4 mm (about 1/16” - 1/4”). They take about a month to mature.

- The adult is reddish-brown in color and wingless. The head is distinct from the abdomen, unlike roaches (see below).
- They can live for up to 6 months at 22° C without feeding.
- They tend to feed every 5-10 days.
- They are nocturnal and tend to shy from light.
- They are considered "hitchhikers" hiding in personal belongings (i.e. pillows, clothing, luggage, bags etc.) and are carried from one area to another.
- They are resistant to many pest-control chemicals.

REQUIRED ACTIONS IF BED BUGS SUSPECTED OR FOUND

- Companion/Coworker does not require isolation; however Coworkers should wear protection gear such as gloves until bed bugs are contained.
- Mattresses will be sealed in an approved bed bug mattress envelope
- Confine the Companion/Coworker to one area, preferably an area with no fabric furniture or carpet. Spray bed bugs with rubbing alcohol. This kills them on the spot. Use the rubbing alcohol and a dish brush to kill the visible eggs and then call an exterminator.
- Avoid having Companions/Coworkers potentially infested with bed bugs in common areas or cohorting with other Companions/Coworkers until bed bugs are contained.
- The Companion/Coworker must shower and change into clean clothing.
- If a Companion is unable to shower, please provide an alternate choice for bathing and any support required. Ask the Companion to examine their body for bed bug bites and document the number and location of bites on the database.
- Immediately **DOUBLE BAG ALL** Companion/Coworker belongings (i.e. clothing, underwear, shoes, bags, etc.) in belongings bags and **SEAL** the bags with tape or tie the bags tightly.
- If the Companion uses a mobility device such as a cane or crutches, these items must also be checked, cleaned and cleared for use.

- Companion/Coworker valuables (i.e. wallet, pocketbook etc.) should be placed in separate **DOUBLE BAGS**, also **SEAL** the bags with tape or tie the bags tightly.
- Remove contaminated items and keep Companion/Coworker valuables with other Companion/Coworker belongings in their room or a secure location within the home that is locked.
- Remove and **DOUBLE BAG ALL** potentially contaminated linen (i.e. disposable liners, sheets, blankets etc.) do not throw the linen on the floor, immediately put linen in linen bags and **SEAL** the bags with tape or tie the bags tightly.
- **Launder (120°F/48.8ºC minimum)** affected items. Smaller items that cannot be laundered can sometimes be de-infested by heating. Individual items, for example, can be wrapped in plastic and placed in a hot, sunny location for at least a few days (the 120°F/48.8ºC minimum target temperature should be monitored in the center-most location with a thermometer).
- Bedbugs also succumb to cold temperatures below freezing, but the chilling period must be maintained for at least two weeks. Attempts to rid an entire home of bed bugs by raising or lowering the thermostat will be entirely unsuccessful.
- Wash all linen on hot, and dry on a hot setting. Gather all linen, cloth and leather bags, mattress covers, clothing, teddy bears... etc. Machine wash all items on hot, including the laundry bag. Tumble dry on hot. Steam kills bed bugs.
- Some metropolitan areas offer bed bug laundry and dry-cleaning services which have the added benefits of proven methods for killing bed bugs and bagging or storing cleaned items, so they do not become re-infested while the residence, program location or office area is still being exterminated.
- If something cannot be washed or discarded (such as a valuable leather purse) spray with non-toxic bed bug spray, seal in a plastic bag and leave it for 3-4 months.
- Dry clean to remove odor if need be.
- After handling Companion/Coworker belongings, valuables, bed linens, etc., please ensure that bed bugs did not crawl onto your pants and/or shoes. They are considered hitchhikers and can crawl, albeit slow, to another source.

- If bug(s) are seen, please try to capture the bug and put it into a container. Hold for the exterminator to examine.
- If bugs are identified, **please follow protocol listed above** and contact the Facility Manager.
- In order for the exterminator to evaluate the environment and ensure appropriate extermination measures are done, when speaking with the Facility Manager, please provide the location where bugs were seen. If bug(s) were captured, please provide a specimen to the exterminator.

BED BUG CYCLE ADULT BED BUG - UNFED ADULT BED BUG - FED ROACH CYCLE for Comparison

Responsibility of: All Coworkers

Monitored by: Facility Manager, Joint Health and Safety Committee

HSP42: HEAD LICE

Associated standard 1.H.2 (a, b)

PEDICULOSIS - HEAD LICE

Pediculosis (head lice) is a common problem with children and youth; however, it can occur with adults. Head lice pose no real health risk to the population and is viewed as no more than a nuisance by health care professionals. However, since the condition can be transmitted to others, proper and successful treatment is essential.

POLICY

Any Companion/Coworker found to have evidence of head lice infestation will be removed from programming until proper treatment for lice has been completed. Coworker shifts will be cancelled, and Coworkers may use their sick days if they will be missing work.

PROCEDURE

Coworkers must inspect any Companion/Coworker suspected of having head lice.

If the Companion has evidence of head lice the following steps will be taken:

1. All Companions/Coworkers will be checked within their residences by Coworkers.

2. If lice are found, either chemical or non-chemical treatment options will be given.

TREATMENT OF INDIVIDUAL

Chemical treatment is the use of a medicated shampoo. The decision to use chemical treatment will be made after consulting the pharmacy to ensure the Companion has no allergies or potential medical issues with the treatment.
Note - Manual removal is necessary with either treatment option.

Chemical Treatment

- Apply as directed. Follow directions on package insert carefully.

Manual Removal

- Sit in a comfortable chair with a good source of light (natural sunlight is preferred).
- Thoroughly clean and comb out hair removing all tangles and debris.
- Work on one section of the hair at a time.
- Comb each section away from the scalp using a fine-tooth metal comb.
- Clean off the comb after each stroke to remove any caught lice or eggs (nits).

- Remove nits with fingernails or safety scissors if nits remain after several attempts with the
  comb.

TREATMENT OF PERSONAL ARTICLES AND CLOTHING

Heat is lethal to lice and their eggs; therefore, many personal articles can be disinfected by machine-washing in **HOT water** and/or machine drying, using the hot cycle of the dryer.

Non-washable items may be disinfected in the dryer, provided that heat will not harm them. If total reliance is placed on the clothes dryer for disinfection, dry articles for at least 20 minutes at the high heat setting.

Machine wash all washable clothing and bed linens that have been in contact with the infested individual within the previous three days.

Non-washable items can be vacuumed, dry-cleaned or placed in a plastic bag and sealed for 14 days.

Combs, brushes, similar items can be disinfected by soaking them in one of the pediculicide shampoos for one hour or by soaking them in a pan of water heated on the stove to about 150 degrees for 5 – 10 minutes.

Because lice can live only a short time if they fall off the head, environmental clean up is limited to vacuuming of carpets, upholstered furniture, etc. Use of insecticides or fumigants on upholstered furniture, carpets, bedding, etc., is not recommended.

Responsibility of: All Coworkers

Monitored by: House Coordinators and Facility Manager

HSP43: COMPANION FARM SAFETY MONITORING

Associated standard 1.H.2 (a, b)

POLICY

Glenora Farm conducts a variety of farm-related activities, such as animal husbandry and crop growing, at numerous locations on the farm. These activities may involve the use of machinery and equipment that could potentially be dangerous. To ensure Companion and Coworker safety, Glenora Farm implements rigorous safety practices and procedures that follow all applicable municipal, provincial and federal WorkSafe and licensing regulations.

PROCEDURE

Risk assessments are completed for each Companion that participates in farming and gardening activities. This outlines the activities, the level of risk, required support / supervision / monitoring, incident reporting and Companion expectations. Plans are then utilized to ensure proper oversight is provided for each Companion participating in any farm and garden related activities or programs.

Farm and Garden safety plans, which include work site practices, are reviewed annually or as needed.

Before supporting Companions in the farm, garden, or estate program, every Coworker must review Companion risk assessments to ensure all practices are clear and fully understood.

Responsibility of: All Coworkers

Monitored by: Facility Manager & Joint Health and Safety Committee

HSP44: COMPANION RISK ASSESSMENT

Associated standard 2.B.7 a (1, 2, 3, 4, 5), b

POLICY

All Companions supported at Glenora Farm have a Risk Assessment completed which provides Coworkers with information relating to the risks that apply to each Companion, generally or in a specific day program location. Companions are encouraged to participate in the creation of the Risk Assessment. Risk Assessments are updated annually or as needed.

PROCEDURE

The Ita Wegman Association
of British Columbia

The Quality Assurance Coordinator is responsible for overseeing that the House Coordinator or Workshop Leaders complete Companion Risk Assessment for each Companion supported at Glenora Farm.

Risk Assessments include general risks, outing risks, and risks for each day program location. Risk assessments must be reviewed regularly and updated as changes in behaviour occur.

All Coworkers are required to review Companion Risk Assessments upon hire. House Coordinators and Workshop Leaders are responsible for communicating any changes in Risk Assessments to other Coworkers.

All Coworkers will be aware of and adhere to Glenora Farm's Critical Incident policy.

Responsibility of: House Coordinators, Workshop Leader

Monitored by: Facility Manager, Quality Assurance Coordinator

COMPANION RISK ASSESSMENT FORM

Associated standard 2.B.7 a (1, 2, 3, 4, 5), b

Companion name:		Coworker name:	
Date created:		Last updated:	

GENERAL RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

Identified Risk	Level of risk (low, moderate, high)	Frequency/likelihood of risk (daily, weekly, monthly, etc.)	Observable warning signs that someone is at risk	Actions to be taken to minimize risk
Coworker responsible for actions to be taken to minimize risk:				

OUTINGS RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

Identified Risk	Level of risk (low, moderate, high)	Frequency/likelihood of risk (daily, weekly, monthly, etc.)	Observable warning signs that someone is at risk	Actions to be taken to minimize risk

Coworker responsible for actions to be taken to minimize risk:	

GARDEN DAY PROGRAM RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

IDENTIFIED RISK	SAFE	SUPER-VISED	UNSAFE	NOTES ABOUT COMPANION	ACTIONS TO BE TAKEN TO MINIMIZE RISK
Repetitive Strain Injury from bending at the waist/back vs. squatting					
Harvest Hall- Slipping on wet floor					

Exposure to Elements- can this Companion self regulate and verbally express when they maybe too hot or cold, feeling dizzy, or numb fingers/toes					
Hydration- does this Companion need frequent reminders to use their water bottle					
Stings/bites from insects- allergies					
Breathing- allergies to pollen or dust					
Slips. trips, and falls- does this Companion have balance or vision problems					
Proper use of bathroom facilities- does this Companion require assistance when using the washroom facility					
Risk of Wandering- does the Companion stay with their group or is there a risk they could wander off workshop area without checking with workshop leader					
Hygiene- wash hands before handling vegetables when working in Harvest Hall wash and pack					

Injury due to improper use of handheld tools- can this Companion successfully learn how to properly use garden tools, i.e. shovel, harvest cart					

Coworker responsible for actions to be taken to minimize risk:	

FARM DAY PROGRAM RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

IDENTIFIED RISK	SAFE	SUPER-VISED	UNSAFE	NOTES	ACTIONS TO BE TAKEN TO MINIMIZE RISK
Repetitive Strain Injury from bending at the waist/back vs. squatting					
Harvest Hall- Slipping on wet floor					
Exposure to Elements- can this Companion self regulate and verbally express when they maybe too hot or cold, feeling dizzy, or numb fingers/toes					

Hydration- does this Companion need frequent reminders to use their water bottle					
Stings/bites from insects- allergies					
Breathing- allergies to pollen or dust					
Slips. trips, and falls- does this Companion have balance or vision problems					
Proper use of bathroom facilities- does this Companion require assistance when using the washroom facility					
Risk of Wandering- does the Companion stay with their group or is there a risk they could wander off workshop area without checking with workshop leader					
Animals- does the Companion have the emotional and mental capacity to understand the Cycle of Life					
Animals- does the Companion have the proper training and awareness of animal behaviours					

Injury due to improper use of handheld tools- can this Companion successfully learn how to properly use garden tools, i.e. shovel, harvest cart					

Coworker responsible for actions to be taken to minimize risk:	

ESTATE DAY PROGRAM RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

IDENTIFIED RISK	SAFE	SUPER-VISED	UNSAFE	NOTES	ACTIONS TO BE TAKEN TO MINIMIZE RISK
Is the Companion able to squat to work the soil or is adaptive equipment needed					
The ability to remember to drink water frequently					
Have allergies to insect bites					
Have allergies when in contact with certain plant leaves, pollen, or dust					

At risk of wandering off or leaving program area.					
Proper use of hand held tools					
Proper footwear and clothing					
The ability to safely use small equipment, i.e. shovels, rakes, hammer, hand held pruners					
Noise levels- does Companion require sensory adaptive equipment					

Coworker responsible for actions to be taken to minimize risk:	

COOKING DAY PROGRAM RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

IDENTIFIED RISK	SAFE	SUPER-VISED	UNSAFE	NOTES	ACTIONS TO BE TAKEN TO MINIMIZE RISK
Ability to safely operate stove top					
Ability to safely operate oven					

Ability to safely operate small equipment i.e. blenders, mixers, toaster, kettle					
Ability to safely handle sharp items i.e. knives, peelers, slicers					
Ability to safely operate hand grinders					
Ability to safely handle fragile items i.e. glassware					
Ability to handle food in safe/healthy manner					
Sensory sensitivity to small work areas					
Ability to work alonside others in smaller work areas					

Coworker responsible for actions to be taken to minimize risk:	

BELLS/SINGING DAY PROGRAM RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

IDENTIFIED RISK	SAFE	SUPER-VISED	UNSAFE	NOTES	ACTIONS TO BE TAKEN TO MINIMIZE RISK
Location-Trillium- Path Navigation/Mobility					
Sensory overload for sound (sound level)					
Sensory overload /anxiety due to proximity to others					
Repetitive strain injury (Bells)					

Coworker responsible for actions to be taken to minimize risk:	

CANDLES DAY PROGRAM RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

IDENTIFIED RISK	SAFE	SUPER-VISED	UNSAFE	NOTES	ACTIONS TO BE TAKEN TO MINIMIZE RISK

Ability to work with others in smaller areas i.e candle workshop area					
Ability to safely handle sharp items i.e. knives, and scissors					
Ability to stay safe (not to touch or how to work safely with) hot equipment i.e. stove top and iron					
Ability to follow instructions from workshop leader to keep safe					

Coworker responsible for actions to be taken to minimize risk:	

WEAVERY DAY PROGRAM RISK ASSESSMENT

Health risks:

Safety risks:

Inherent risks:

Identify any inherent risks, and how Coworkers decide whether Companions should engage in activities with inherent risks.

IDENTIFIED RISK	SAFE	SUPER-VISED	UNSAFE	NOTES	ACTIONS TO BE TAKEN TO MINIMIZE RISK
Proximity to the road- is the Companion aware of road safety?					

Small workshop space- is Companion sensitive to small spaces, and can keep in their own working area?					
Operating weaving equipment- how safe is Companion with weaving equipment and parts of the loom?					
Scissors, pins and spindles.					
Toileting assistance /hand washing supports.					
Noise sensitivities. Can this Companion feel comfortable with social engagement between Companions and the sound of the looms?					
Glenora Store- can this Companion safely have access to shop at the store during break time without support?					

Coworker responsible for actions to be taken to minimize risk:	

HSP45: GUESTS AND VISITORS

Associated standard 1.H.2 (a, b) - 2.E.1 a (1, 2, 3, 4), b, c and 4.H.2 (a, b, c, d, e, f, g (1, 2, 3, 4, 5, 6, 7, 8, 9), h (1, 2)

POLICY

The Ita Wegman Association welcomes all visitors and guests, ensuring that all visitors, friends, family members and community professionals are treated with respect and kindness. All guests/visitors are expected to adhere to The Ita Wegman Association policies and procedures while on or off site. To ensure the safety and security of all Companions and Coworkers, program and residence areas, overnight guests must sign a **Visitor Code of Conduct** and provide a **Police Certificate**.
Non-overnight visitors must check-in with either The Ita Wegman Association office staff (for general visits) or a House Coordinator (if spending time in a residential house).

PROCEDURE

Pre-arranged visits are encouraged and appreciated. Companions are requested (where possible) to set up visits through Coworkers to ensure adequate time to plan and prepare.

Companions may choose to host visitors privately. It is requested that Companions communicate their wishes as soon as possible to Coworkers so that arrangements can be made.

Overnight guests are dependent on available space and must sign a **Visitor Code of Conduct** as well as provide a **Police Certificate**, to be kept on file in the hosting home.

Companions in a relationship will follow any guidelines to meet relationship needs outlined in the most recent Individual Support Plan.

Responsibility of: All Coworker and Companions

Monitored by: House Coordinators (overnight visitors, house visitors) & Office Staff (general visitors)

HSP46: PETS

Associated standard 1.H.2 (a, b) - 2.E.1 a (1, 2, 3, 4), b, c and 4.H.2 (a, b, c, d, e, f, g (1, 2, 3, 4, 5, 6, 7, 8, 9), h (1, 2)

The Ita Wegman Association
of British Columbia

POLICY

The Ita Wegman Association supports the involvement of pets in life sharing homes, although it is generally not encouraged. It is expected that House Coordinators and Companions agree to keeping Coworkers, Companions and animals safe by adhering to The Ita Wegman Association health and safety standards, especially universal precaution standards.

DEFINITION

The Ita Wegman Association defines a pet as being an animal that is considered domesticated and not endangered. Wildlife is not permitted in homes on Glenora Farm.

PROCEDURE

Companions or Coworkers wanting a pet to visit or stay within an Ita Wegman Association facility or home must first receive approval from both:

1) The House Coordinator and other Companions and Coworkers living in their home

2) The Care Group

3) The Facility Manager

CONSIDERATIONS BEFORE ACCEPTING A PET:

- Does anyone living in the vicinity have allergies?
- Does anyone in the community who may be regularly exposed to the animal have serious allergies?
- Does anyone living in the vicinity or in the community have a fear or phobia of this animal?
- Will the animal cause damage to the property?
- Will the animal be a threat to other and farm animals?
- The individual hosting or owning the pet is responsible for removing excrement, feeding, cleaning, walking, paying for expenses, and taking care of it during holidays.

PETS MAY BE ASKED TO BE REMOVED FROM THE PREMISES IF:

- The pet is a threat or has caused harm to any individual or farm animal.
- If excessive nuisance is caused, e.g., from excrement, damage to property, if the owner lacks the ability to control the pet, etc..
- If health risks arise that put others in the community at risk.

Responsibility of: All Coworkers and Companions

Monitored by: House Coordinator / Care Group

HSP47: COVID 19 SAFETY PLAN

POLICY

This document has been created in response to the COVID 19 (CoronaVirus) Global Pandemic and the risk it poses. Glenora Farm has written this comprehensive plan to communicate and educate the Coworkers, Companions, Staff, Day Volunteers, guests, visitors and contractors in the protocols regarding COVID 19 to allow for the safe operation of Glenora Farm during this time. Glenora Farm has used the following resources in the creation of this plan:

- Government of Canada – Public Health Service
- Ministry of Public Health – British Columbia
- Island Health – British Columbia
- Center for Disease Control and Prevention – British Columbia
- Community Living British Columbia
- WorkSafeBC
- World Health Organization

For more information on The Ita Wegman Association of BC's Covid Safety Plan, including infographics, please see **Covid 19 Safety Plan.**

Dismissal for non-compliance

PROCEDURE

Responsibilities

Care Group

Approve the Glenora Farm COVID 10 Safety Plan

Facility Manager, Business Administrator

- To implement, communicate and train Glenora Farm COVID 19 Safety Plan to all Coworkers, Companions, Staff, Day Volunteers, guests, visitors and contractors
- Provide all material and PPE as outlined in this plan

Coworkers, Companions, contractors, guests, and visitors

- To adheres to the Glenora Farm COVID 19 Safety Plan

Facts

Covid-19 Coronaviruses are a large family of viruses found mostly in animals. In humans, they can cause diseases ranging from the common cold to more severe diseases such as severe acute respiratory syndrome (SARS) and Middle East Respiratory Syndrome (MERS). The disease caused by the coronavirus has been named COVID 19.

While many of the characteristics of COVID 19 are still unknown, mild to severe illness has been reported for confirmed cases.

Symptoms

The symptoms of COVID 19 are similar to other respiratory illnesses, including the flu and common cold. They include cough, sneezing, fever, sore throat and difficulty breathing.

Transmission

COVID 19 is spread by droplet transmission. The mere act of getting the virus airborne in droplets from coughing, sneezing, aggressive talking etc. can be enough to spread the virus by droplet.

Research has shown the virus can live outside the body for many days on most hard surfaces including plastics, steel, copper and cardboard. The length of time the virus can survive varies according to the research source. When a person touches a surface with the virus, the mere act of touching the eyes, nose or mouth (mucous membranes) can be enough to infect the person with the virus.

Risk Identification and Assessment

On March 8, 2020, the Province of BC declared a provincial state of emergency over the growing COVID 19 Pandemic. Daily updates are provided by the Canadian and BC Ministry of Health Departments. These updates will be forwarded to the Glenora Farm Coworkers, Companions, Staff, Day Volunteers, guests, visitors and contractors as they become available.

Health Monitoring/ Self-Assessment

Every resident coworker and Companion must perform the self-assessment of their health daily. Every Coworker living off site, Staff, Day Volunteer, guest, visitor and contractor must perform the self-assessment of their health before coming to Glenora Farm.

1. Are you feeling feverish?
2. Do you have a new cough?
3. Are you sneezing?
4. Do you have a sore throat?
5. Do you have difficulty breathing?
6. Have you travelled within or outside Canada in the last 14 days?
7. Did you provide care or have close contact with a person with suspected or confirmed COVID 19 symptoms while they were ill (cough, fever, sneezing or sore throat)?
8. Have you had a positive COVID test within the last 10 days?

If all questions are answered "NO" → continue to work. If ANY question is answered "YES" → DO NOT continue to work. Notify your House Coordinator, the Facility Manager, the Quality Care Coordinator or Business Administrator. Return to your home immediately to self- isolate.

Note: There may be some exceptions to the above. If you have a documented allergy or pre-existing conditions which may result in a "Yes" answer to the above questions discuss with the House Coordinator, Facility Manager, or Business Administrator.

Education and Training

Due to the social/ physical distancing requirements at this time, we will deliver this COVID 19 Safety Plan to all Glenora Farm Coworkers, Companions, staff, day volunteers, guests, visitors and contractors. Each person will be provided with:

1. A digital copy of this document.
2. The location, description and end use of cleaning supplies.
3. The location of personal protective clothing.

Any questions or concerns will be answered by the Facility Manager and Business Administrator.

COVID 19 Prevention Procedures – Hygiene, Decontamination

Personal Hygiene

Washing your hands regularly with soap and water is the single most effective way of reducing the spread of infection by the COVID 19 virus.

- Wash your hands often with soap and water for at least 20 seconds. Refer to Appendix or posted information in each bathroom.
- If a sink is not available, alcohol-based hand rubs or sanitizer can be used to clean your hands if they are not visibly soiled. If they are visibly soiled, use a wipe and the hand rub to effectively clean them.
- Do not touch your face, eyes, nose or mouth with unwashed hands.
- Cover your mouth and nose with a disposable tissue or the crease of your elbow when you sneeze or cough.
- Regularly clean and disinfect frequently touched surfaces.
- Do not share food, drinks, utensils, work tools, etc.

Anyone who may have been exposed to or contracted COVID 19

- Anyone looking for medical advice should contact their family Doctor or a medical professional.
- In BC, contact 811 or use the self-assessment link http://covid-19.bccdc.ca
- If you have interacted with someone who has tested positive for COVID 19 you must inform your HC, FM, or BA.
- You must inform your HC, FM, or BA if you have tested positive for the virus.
- If you have been away from work after testing positive for COVID 19, you must contact your HC, FM, or BA before returning to work.

Anyone who is sick or suspect they are becoming sick

- If you are feeling unwell, inform your HC, the FM, or BA and do not come to Glenora Farm.
- If you suspect you may have COVID 19, go to your local pharmacist to obtain a rapid COVID-19 test kit or call 811, or use the self-assessment link.

Anyone who may have sick or unwell family members

- If a member of your family has tested positive for COVID 19, you are required to inform the FM, or BA. You must follow the advice of your physician, and self-quarantine or self-isolation as required.
- If a member of your family is ill, please do not come into work until they are well.

Anyone who has recently traveled out of country

- Stay at home for 14 days upon you return / arrival to Canada if you have been outside of the country.
- You are encouraged to avoid all non-essential travel as per the Government of Canada and the Local Health Authorities.
- Check with your HC, the FM, QCC or BA for clearance before returning to work as you may be required to quarantine.

Anyone who tests positive for COVID 19

In the event anyone associated with Glenora Farm tests positive for COVID 19, Glenora Farm will follow the guidelines and direction of the local Public Health Official for response. These items may include:

- Notification of positive test to anyone affected
- Immediate deep cleaning and sanitization of the operation

- Possible curtailment of the operation for a period recommended by the local Public Health Official.

Enhanced Precautionary Measures

Social/Physical Distancing

- Coworkers, Companions, Staff, Day Volunteers, guests, visitors and contractors are required to keep a minimum of 6 feet or 2 meters from each other, whenever possible.
- At times the minimum social / physical distance is not feasible due to the tasks the Coworkers, Companions, Staff or Day Volunteers are completing. In these instances, a hazard assessment will be completed, and the proper controls will be implemented.

Approved Cleaning/ Disinfectant Products

BC Center for Disease Control cleaning protocols have also been used.

Precautionary Cleaning Procedures

- All common surface areas (handrails, doorknobs, faucets, counters etc.) are to be cleaned with an approved disinfectant frequently throughout each shift.
- Vehicles, Equipment and Farm Machines are disinfected by the operator after each use.
- Anyone who is required to use approved disinfectant will be trained in their use. Safety Data Sheets will be readily available to ensure that WHMIS & Hazard Communication protocols are adhered to.

Medical Emergency Cleaning Procedures

- In the event there is a medical emergency, Coworkers responsible for cleaning up follow the established IWA Policy and Procedure for dealing with blood borne Pathogens.

- Follow all waste disposal requirements as outlined in the IWA Policies and Procedures.
- Coworkers, Companions, Staff and Day Volunteers will be provided a face mask if requested as an extra precaution due to COVID 19.
- The use of N95 respirators is only intended for Health Care professionals or Paramedics who are performing advanced respiratory treatment (incubation etc.)

Responsibility of: All Coworkers, Contractors and Supervisors

Monitored by: Business Administrator, Facility Manager

The Ita Wegman Association
of British Columbia

ORGANIZATIONAL POLICIES (OP)

OP1: THE ITA WEGMAN ASSOCIATION OF BC GLENORA FARM: A LIFESHARING COMMUNITY "COMMUNITY LIVING / RESIDENTIAL PROGRAM"

Associated standard 2.A.1 a (1, 2, 3, 4, 5, 6, 7, 8, 9), b (1, 2, 3, 4, 5, 6 (c, d)

PROGRAM DESCRIPTION

The Ita Wegman Association operates Glenora Farm, a certified organic and biodynamic farm, located south of Duncan on Vancouver Island. Glenora Farm is a licensed care facility and life-sharing community, where adults with diverse abilities (Companions) live, work, and learn together with Coworkers (employees, partially paid workers, day volunteers, and practicum students). Glenora Farm is a member of the International Camphill movement and of the Camphill Association of North America (CANA). Cultural, artistic, and therapeutic experiences are provided through residential home support and day program activities. Our primary objective is to allow the potential in each Companion to unfold and to be in harmonious relationship with the environment.

MISSION STATEMENT

The qualities of Generosity, Faithfulness, and Open-mindedness form the foundation of our Community. We endeavour to uphold these qualities in the economic, social, cultural, and spiritual realm of our Community, in how we work together, meet with one another, and strive together. This is reflected in our Mission Statement:

"Glenora Farm is a community where people of diverse abilities live, learn, and work together."

We hold the image of human beings as described in the Western philosophy of Rudolf Steiner and the principles of Anthroposophy and the International Camphill Movement.

GOAL STATEMENT

The Ita Wegman Association is committed to providing a balanced lifestyle in a safe and supportive environment that allows for personal growth and satisfaction.

OUTCOMES STATEMENTS

- Companions will have continued or increased access to integrated support through the program.
- Companions will be fully involved in the shaping of their lives and the process of developing necessary support and care.
- Companions will be assisted in exploring and accessing community programs, resources, and networks.
- Companions will be supported to have positive and healthy relationships and interactions within the community.
- Companions will participate in Glenora Farm programs in safe and appropriate situations.
- Companion support will reflect the intended outcomes listed in the Quality-of-Life Framework.

TARGET POPULATION

The Ita Wegman Association provides residential and day program support to adults 19 years and older with diverse abilities, providing an essential service to a sector of individuals whose needs are best supported in a familiar surrounding.

PROGRAM STRUCTURE

Support Modality and Rationale: The Ita Wegman Association programming employs an asset-based approach and builds upon strength-based and solution-focused theory for the basis of its work with Companions. The Ita Wegman Association utilizes this support modalities based on current research, external professional support, and in-house evaluation of best practice support approaches and delivery.

Coworkers strive to work with Companions *and* their representative(s) (when applicable) in a manner that is warm, caring, and respectful to identified needs. If crisis support is required beyond what the program provides, community and governmental support is available 24 hr. / 7 days a week.

Integrated Case Management: House Managers, Workshop Leaders, Facility Manager, Quality Assurance Coordinator, and the Executive Director collaborate with the CLBC facilitators, analysts, the Companion, identified advocates, representatives, and community professionals to develop and support the attainment of identified goals and resolution of acknowledged problem areas. Planning and review meetings are held regularly as per the agreement between The Ita Wegman Association and stakeholders.

Accessibility: All support is designed to meet the needs of the Companion and referral agents. As such, support is flexible, open, and adaptive. Meeting times and places, along with goal development and planning, are Companion-driven.

Reporting: Coworkers provide ongoing written updates using the Companion database.
The Ita Wegman Association provides progress notes to stakeholders upon request and with Companion consent of release of information.
The Ita Wegman Association has policies with regard to individual support planning, incident reporting, discharge, and transition planning.

Companion and Referral Agent Feedback: Written surveys are distributed and collected from Companions/stakeholders annually; weekly workshop check-ins provide ongoing feedback from Companions, and conversations with both Companions and stakeholders offers more specific and directed input. We encourage and solicit feedback from Companions and stakeholders throughout the continuum of programming and support delivery. Information gathered is utilized to support quality improvement efforts.

Legislature: The Ita Wegman Association Day program operates its support consistently in accordance with principles laid out in the *Child, Family and Community Service Act* of British Columbia and *Health Licensing Regulations* of British Columbia.

COMMUNITY LIVING PROGRAM COWORKERS

The Ita Wegman Association Community Living homes consist of a team of up to 5 Coworkers.

Facility Manager: Provides supervision to the Coworkers; coordinates all liaison efforts with CLBC; assists with recruitment and training efforts, consults on referrals, actively participates in all agency training, and collects support trends, gaps, and statistics to support program maintenance and growth.

House Managers: Oversee and facilitate the support of Companions, assist in solving problems, crisis intervention, conflict mediation, and conflict resolution; enhance communication skills,

connect Companions to community resources; provide opportunities to debrief; monitor and document goals being obtained, support the development of interpersonal skills, and liaise with community professionals.
House Managers are responsible for training and supervising the house Coworker team.

Coworker: Work to assist the House Manager in the support of Companions, solving problems, conflict mediation, and enhancing communication skills, connecting Companions to community resources; providing opportunities to debrief; monitoring and documenting goals being obtained, supporting the development of interpersonal skills, and liaising with community professionals.

REFERRAL PROCESS

Referrals come directly from Community Living British Columbia (CLBC) or are self-referred. The Quality Assurance Coordinator, Executive Director, Facility Manager, and Care Group review referrals. Referrals are then matched based on suitability and compatibility following CLBC guidelines and the Camphill philosophy.

Eligibility: Adults 19 years and older with developmental disabilities who are eligible for funding from Community Living British Columbia. CLBC is responsible for setting eligibility requirements. Glenora Farm Coworkers work collaboratively with CLBC to determine suitability based on personal profile, in-person meetings, and Farm tours.

Ineligibility: Adults are only determined ineligible for the program through consultation with Community Living British Columbia (CLBC) referral agent or self-referral representative. Final determination of ineligibility is held with the Quality Assurance Coordinator, Facility Manager, Executive Director, and CLBC Referring Analyst. Adults determined ineligible are consulted with, and alternate support is secured through CLBC facilitators.

DISCHARGE / TRANSITION PROCESS

The decision to transition (move from one house to another) or discharge (stop living at the Farm) a Companion is a collaborative process involving the Companion, Companion support system (when appropriate), Quality Assurance Coordinator, Facility Manager, Executive Director, referring CLBC Facilitator/Analyst or self-referral representative, House Manager, and Coworkers.

Transition planning (moving from one house to another) might begin based on presenting issues, interpersonal challenges, or personal choice. Transition support includes planning for a

new placement on the Farm, coordinating and making sure everything is going well, and monitoring whether things improve. Companion feedback is collected throughout the term of support, including at discharge. Information is used to support placement requirements and ongoing quality improvement efforts.

Discharge planning (moving off the Farm) might begin based on age-related decline, assessments, presenting issues, or personal choice. Glenora Farm Coworkers work with the Companion, their support system, and CLBC to make sure that discharge is handled in a person-centered way that prioritizes the health, safety, and wellness of the Companion and other people involved.

Discharge/transition reporting identifies areas of progress, areas in need of additional support, any generated referrals, and all recommendations. Companion feedback is collected throughout the term of support, including at discharge. Information is used to support placement requirements and ongoing quality improvement efforts.

Follow-up - Is conducted when applicable. In most instances, follow-up is managed by a CLBC or self-referral representative designated liaison. In situations where The Ita Wegman Association is designated follow-up responsibility, the House Coordinator, or Facility Manager records documentation of follow-up on the Companion's discharge summary and Companion Database.

PLANNING

Program planning is ongoing and linked to plan and review meetings, House Manager, Companion, and Stakeholder feedback, program review meetings, monthly statistical collection, and the completion of quarterly review reports. Information is gathered to assist in identifying barriers, benefits, trends, and support gaps. Internal and external consultations are fostered to explore ideas, needs, and new opportunities with the goal of supporting identified concerns and encouraging preventative actions and forward thinking. This approach encourages all members associated with the Companion and house Coworker team to take an active role in support delivery and innovative programming.

OP2: THE ITA WEGMAN ASSOCIATION OF BC GLENORA FARM: A LIFESHARING COMMUNITY "DAY PROGRAM / COMMUNITY INCLUSION"

Associated standard 2.A.1 a (1, 2, 3, 4, 5, 6, 7, 8, 9), b (1, 2, 3, 4, 5, 6 (c, d)

The Ita Wegman Association
of British Columbia

PROGRAM DESCRIPTION

The Ita Wegman Association operates Glenora Farm, a certified organic and biodynamic farm, located south of Duncan on Vancouver Island. Glenora Farm is a licensed care facility and life-sharing community, where adults with diverse abilities (Companions) live, work, and learn together with Coworkers (employees, partially paid workers, day volunteers, and practicum students). Glenora Farm is a member of the International Camphill movement and of the Camphill Association of North America (CANA). Cultural, artistic, and therapeutic experiences are provided through residential home support and day program activities. Our primary objective is to allow the potential in each Companion to unfold and to be in harmonious relationship with the environment.

MISSION STATEMENT

The qualities of Generosity, Faithfulness, and Open-mindedness form the foundation of our Community. We endeavour to uphold these qualities in the economic, social, cultural, and spiritual realm of our Community, in how we work together, meet with one another, and strive together. This is reflected in our Mission Statement:

"Glenora Farm is a community where people of diverse abilities live, learn, and work together."

We hold the image of human beings as described in the Western philosophy of Rudolf Steiner and the principles of Anthroposophy and the International Camphill Movement.

GOAL STATEMENT

The Ita Wegman Association is committed to providing a balanced lifestyle in a safe and secure environment that allows for personal growth and satisfaction. The Ita Wegman Association Day Program is committed to providing adults with diverse abilities the support they need, with a priority placed on producing meaningful artisan craft products, stability, safety, and positive community relationships.

OUTCOMES STATEMENTS

- Companions will have continued or increased access to integrated support through the program.
- Companions will be fully involved in the shaping of their lives and the process of developing necessary support and care.
- Companions will be assisted in exploring and accessing community programs, resources, and networks.
- Companions will be supported to have positive and healthy relationships and interactions within the community.
- Companions will work in safe and appropriate situations.
- Companions will be assisted in building their independence and self-esteem and improve their social skills and ability to speak for themselves.

TARGET POPULATION

Adults 19 years and older with diverse abilities who are eligible for funding from Community Living British Columbia. The Ita Wegman Association provides an essential service to a sector of individuals whose significant needs are best supported in a familiar setting.

PROGRAM STRUCTURE

Support Modality and Rationale: The Ita Wegman Association programming employs an asset-based approach and builds upon strength-based and solution-focused theory for the basis of its work with Companions. The Ita Wegman Association utilizes this support modalities based on current research and in-house evaluation of best practice support approaches and delivery. Coworkers strive to work with Companions *and* their representatives (when applicable) in a manner that is warm, caring, and respectful to identified needs. If crisis support is required beyond what the program provides, community and governmental support is available 24 hr. / 7 days a week.

The Workshop/Activities Program:

The Ita Wegman Association day program activities are designed to fulfill the need each Companion has for a full and meaningful life and, in doing so, make a contribution to society in general. Each activity has its own array of skills, which engage and challenge participants. Confidence, self-esteem, and the therapeutic value of artistic expression benefit us all.

There are many opportunities to perform “on stage” within the bounds of The Ita Wegman Association as well as in the greater community.

Activities to choose from (depending on season):

- Weaving
- Candle dipping
- Herb Garden
- Farming
- Garden
- Estate, Horticulture & Forestry
- Cooking & Home Making
- Visual Arts
- Drama
- Music
- Singing
- Eurythmy

Companions are actively involved in choosing which activity they will participate in. This schedule is created quarterly.

Below is a summary of the day program schedule – each month has special features, and the day program is committed to providing rich, varied, and stimulating activities.

Our day program complements The Ita Wegman Association’s community living program, where personal care and development, and participation in the greater community are among the skills included.

Schedule:

Monday - Friday

The Ita Wegman Association
of British Columbia

9:00 - 9:15	Morning Gathering
9:15 - 12:00	Workshop Groups
12:00 - 1:00	Lunch & clean-up
1:00 - 2:30	Rest/ supervised self-directed activities
2:30 - 4:30	Workshop Groups

Hours:

Arrival no earlier than 9:00 am. Pick-up time is 3:00 pm.
(Subject to HandiDart schedules).

Holidays:

The Ita Wegman Association observes all statutory holidays i.e. Christmas and New Year's. We observe a one-week Christmas break. We advocate that each Companion have an independently organized annual summer holiday.

Supplies:

The Ita Wegman Association provides all supplies needed for our activities. This includes musical instruments. Personal ID and personal medication should be with Companions at all times, and appropriate clothing for the season and weather conditions. All jackets, hats, etc. should be clearly labeled (name).

Every day dress is casual. Special clothing for events and celebrations may be suggested.

One pair of indoor, non-slip shoes that can stay at Glenora Farm should be provided. House slippers (especially the soft, fuzzy kind) are not recommended as this is a work-like environment. A clean change of clothes is needed to be held at Glenora Farm.

Additional costs – special event fees may be requested as needed. Companions are subject to supply their own workshop-specific clothing and footwear as needed. (PPE is provided by the Ita Wegman Association)

***Extra-Ordinary Situations*:**

In the event of illness, soiling, or disregulated behaviour, the Companion's home residence or primary contact will be reached and asked to accompany the Companion home.

Programming Choices:

Companions review available placements and participate in choosing activities annually in the ISP review (Individual Support Plan).

***Supporting Companions in the Program*:**

An Individual Support Plan is created for each individual and kept on file in the database and on file in the admin office. At the annual ISP meeting, the overall plan is reviewed.

As The Ita Wegman Association workshop schedule restarts every quarter, a schedule for the next 3 months is (re-)created. At this time, all individuals are surveyed and asked for wishes and preferences. The choices are within the skills areas, availability, and compatibility, and each workshop group. Choices for participation in festive celebrations happen during the planning preceding each celebration, and individuals are given many opportunities to try out and participate as they are able and available.

It is the goal of The Ita Wegman Association to create a situation in which each Companion has the opportunity to identify with a workshop/skill.

***The ISP and the PCP*:**

Earlier in these pages, the Individual Support Plan (ISP) was mentioned. This format was developed to ensure person-centered planning (PCP) is at the forefront of support delivery.

***Goals & Social Life*:**

Goals are identified by the workshop leader in consultation with the Companion, House Manager, and family representative, and we strive for continuous progress or the maintenance of goals/skills/abilities. Goals in the artistic sessions are not as readily identifiable. Social goals arise from our shared lives; we spend our time together to build community.

Family Involvement:

Family representatives and chosen families are welcome and encouraged to join in community and special events.

Integrated Case Management: House Managers, Workshop Leaders, Facility Manager, Quality Assurance Coordinators, and the Executive Director collaborate with CLBC facilitators and

analysts, the Companion, identified advocates, representatives, and community professionals to develop and support the attainment of identified goals and resolution of acknowledged growth areas. Planning and review meetings are held regularly as per the agreement between The Ita Wegman Association and stakeholders.

Accessibility: All support is designed to meet the needs of the Companion and referral agents. As such, support is flexible, open, and adaptive. Meeting times and places, along with goal development and planning, is Companion-driven.

Reporting: Coworkers provide ongoing written updates using the Companion database.
The Ita Wegman Association provides progress notes to stakeholders upon request and with the Companion's consent for the release of information.
The Ita Wegman Association has policies with regard to individual support planning, incident reporting, discharge, and transition planning.

Companion/Stakeholder Feedback: Written surveys are distributed and collected from Companions/stakeholders annually; weekly workshop check-ins provide ongoing feedback from Companions, and conversations with both Companions and stakeholders offer more specific and directed input. We encourage feedback from Companions and stakeholders throughout the continuum of programming and support delivery. Information gathered is utilized to support quality improvement efforts.

Legislature: The Ita Wegman Association day program operates its supports in accordance with principles laid out in the *Child, Family and Community Service Act* of British Columbia and the *Health Licensing Regulations* of British Columbia.

DAY PROGRAM COWORKERS

Coworkers: leading a variety of skill-building activities, assisting in solving problems, conflict mediation, and enhancing communication skills, connecting Companions to community resources; providing opportunities to debrief; monitoring and documenting goals being worked on, supporting the development of interpersonal skills, and liaising with community professionals.

REFERRAL PROCESS

Referrals come directly from Community Living British Columbia (CLBC) or are self-referred. The Quality Assurance Coordinator, Facility Manager, Executive Director, and Care Group review

referrals. Referrals are then matched based on suitability and compatibility following the Camphill philosophy.

Eligibility: Adults 19 years and older with diverse abilities who are eligible for funding from Community Living British Columbia. CLBC is responsible for setting eligibility requirements. Glenora Farm Coworkers work collaboratively with CLBC to determine suitability based on personal profile, in-person meetings, and Farm tours.

Ineligibility: Adults are only determined ineligible for the program through consultation with Community Living British Columbia (CLBC) referral agent or self-referral representative. Final determination of ineligibility is held with the Quality Assurance Coordinator, Facility Manager, Executive Director, and CLBC referring facilitator and analysts. Adults determined ineligible are consulted with and directed back to CLBC for other service provision options.

DISCHARGE TRANSITION PROCESS

The decision to transition (move from one day program activity to another) or discharge (stop attending the day program) a Companion is a collaborative process involving the Companion, Companion support system (when appropriate), Quality Assurance Coordinator, Facility Manager, Executive Director, referring CLBC Facilitator/Analyst or self-referral representative, House Manager, and Coworkers.

Transition planning from one day program to another might begin based on presenting issues, interpersonal challenges, or personal choice. Transition support includes planning for a new placement on the Farm, coordinating and making sure everything is going well, and monitoring whether things improve.

Discharge planning might begin based on age-related decline, assessments, presenting issues, or personal choice. Glenora Farm Coworkers work with the Companion, their support system, and CLBC to make sure that discharge is handled in a person-centered way that prioritizes the health, safety, and wellness of the Companion and other people involved.

Discharge/transition reporting identifies areas of progress, areas in need of additional support, any generated referrals, and all recommendations. Companion feedback is collected throughout the term of support, including at discharge. Information is used to support placement requirements and ongoing quality improvement efforts.

Follow – Up: Is conducted when applicable. In most instances, follow-up is managed by a CLBC or self-referral representative designated liaison. In situations where The Ita Wegman

Association is designated follow-up responsibility, the House Manager, Facility Manager, and Quality Assurance Coordinator record documentation of follow-up on the Companion's discharge summary and Companion Database.

PLANNING

Program planning is ongoing and linked to plan and review meetings, House Managers, Companions, and Stakeholder feedback, program review meetings, monthly statistical collection, and the completion of quarterly review reports. Information is gathered to assist in identifying barriers, benefits, trends, and support gaps. Internal and external consultations are fostered to explore ideas, needs, and new opportunities with the goal of supporting identified concerns and encouraging preventative actions and forward thinking. This approach encourages all members associated with the Companion and Coworker team to take an active role in support delivery and innovative programming.

OP3: CORPORATE COMPLIANCE AGREEMENT

Associated standard 1.A.6 a (1, 2, 3, 4, 5, 6 (a - i, ii, iii), b, c, d, e, 7, 8, 9, 10 (a, b, c, d), b (1, 2 - a, b,), c (1, 2), d, e

POLICY

The Ita Wegman Association is a registered charity under the Income Tax Act. The ability to be exempt from income taxes, along with having access to public funding, causes the Association to be held to a high standard by governments and regulatory agencies. Compliance with the various federal, provincial, and local laws and regulations is both mandatory and a vital component of the success and effectiveness of the Association.

Non-compliance refers to an individual's failure to act within stated boundaries or refusal to comply with regulations or rules. Noncompliance in the workplace refers to Coworkers, Board of Directors, and Contractors who do not follow the code of conduct, health and safety regulations, or any other set of guidelines required within our organization. Supervisors and leadership team members are responsible for dealing with the failure or refusal of a Coworker, Director of the Board, or Contractor to conduct themselves in the appropriate manner.

The Ita Wegman Association is committed to the implementation and maintenance of a Corporate Compliance Program that emphasizes:

1. Prevention of wrongdoing – whether intentional or unintentional,

2. Immediate reporting and investigation of questionable activities and practices without consequences to the reporting party,

3. Timely correction of any situation that puts the organization, its leadership, or Coworkers, funding sources, or Companions at risk.

All Coworkers, Board of Directors, and Contractors are responsible for conformance with this policy and for the reporting of any observed or suspected fraud, abuse, neglect, or wrongdoing which could result in harm to individuals receiving services or material risk to the mission or operations of the Ita Wegman Association.

Any discrimination, retaliation, or harassment against any person who reports incidents of questionable accounting or auditing matters, the reporting of fraudulent information, or any other wrongdoing, based on the person's reasonable belief that such misconduct occurred, is absolutely prohibited. Any discrimination, retaliation, or harassment against any employee who participates in an investigation of such matters is also prohibited.

PROCEDURE

THE ITA WEGMAN ASSOCIATION COMMITMENTS

1. **FULFILL ALL LEGAL OBLIGATIONS -** The Ita Wegman Association is committed to full compliance with the federal, provincial, and municipal laws, regulations, and standards that apply to our agency. Coworkers must report suspected wrongdoing and cooperate with investigations. Internal corrective action will be taken if laws, regulations, and standards are not followed and unlawful activities are not reported. All Coworkers are responsible for ensuring the highest standards of ethical behavior.

2. **FULFILL ALL LEGAL OBLIGATIONS RELATED TO GOVERNMENT AND OTHER CONTRACTS -** The Ita Wegman Association does not permit political fundraising or lobbying activities by individuals acting in their official roles representing The Ita Wegman Association.

3. **AVOID CONFLICTS OF INTEREST -** All Coworkers understand that even the appearance of a conflict of interest must be avoided through disclosure and exercising good judgment.

4. **PROMOTE A SAFE AND POSITIVE WORK ENVIRONMENT -** The Ita Wegman Association follows policies that address health and safety issues and promote an alcohol and drug (substance) - and drug-free workplace. Agency policies promote courteous and respectful communication, with harassment and discrimination of any kind unacceptable. The promotion of courteous and respectful communications extends to The Ita Wegman Association marketing activities.

5. **MAINTAINS CONFIDENTIALITY OF CLIENT RECORDS AND COWORKER / CONTRACTOR PERSONNEL RECORDS -** Appropriate release of information is required before disclosure of sensitive or confidential information for Coworkers and Companions.

6. **REPORT SUSPECTED WRONGFUL CONDUCT -** Coworkers are to report suspected violations of The Ita Wegman Association policies and/or violations of the law. Coworkers are assured that they will be free from all reprisal or retaliation for filing good faith reports of suspected wrongdoing.

CORPORATE COMPLIANCE RESPONSIBILITY

1. All Coworkers must be aware of the Corporate Compliance Policy. As such, all new Coworkers will read the Corporate Compliance Policy upon hiring and annually thereafter.
   There will be information on reporting any breaches of this Corporate Compliance Policy at each worksite.

2. Any breaches of this policy (any observed or suspected fraud, abuse, neglect or wrongdoing) which could result in harm to individuals receiving services or material, risk to the mission or operations of The Ita Wegman Association, must be immediately reported to the Executive Director, Quality Assurance Coordinator, Facility Manager, or Board of Directors if the suspected breach involves the Executive Director, Quality Assurance Coordinator, or Facility Manager.

3. The Executive Group will serve as the Corporate Compliance Committee and shall: (1) serve as the organization's primary point of contact for all corporate compliance issues, including making recommendations, (2) develop, implement, and monitor the Association's corporate compliance plan, and (3) prepare and present periodic reports.

4. The Corporate Compliance Committee shall investigate allegations. The individual(s) who are the subject of the allegations will be suspended from any responsibilities that involve the management, disbursement, or tracking of funds or access to sensitive

agency or client information.
Investigations will be conducted as timely as possible, usually within 10 business days.

5. A draft report shall be developed outlining the committee's findings after the investigation is completed. The report will include supporting documentation and recommendations concerning the incident. Any documentation will be held in the centralised file location.

6. The Executive Group shall decide a course of action with all parties. If either of the parties involved in the incident disagrees with the findings and recommendations, that party may file an appeal with the Executive Group in writing within 5 days after the findings have been presented.

7. If the committee finds that the allegations have merit, the Executive Group shall decide on disciplinary actions to be taken. If the Executive Group is the subject of the allegation, the rest of the Corporate Compliance Committee will assume responsibility for determining appropriate disciplinary action.

8. Legal counsel will be sought in circumstances where such laws or regulations are unclear. If the committee finds merit in the allegations, The Ita Wegman Association may seek legal action, criminal, and/or civil depending on the nature of the violation.

AUDIT:

1. All violations of the Corporate Compliance Policy will be reported to the Board of Directors.

Responsibility of: All Coworkers

Monitored by: Executive Group, Board of Directors

OP4: RECORDS MANAGEMENT

Standard associated 1.E.3 (a, b, c, d, e, f)

POLICY

Records are maintained to preserve evidence of the Ita Wegman Association activities in all formats and to support accountability and promote efficiency and economy. Responsible

management of our records and record-keeping system protects records as valuable resources and assets.

PROCEDURES

We secure and preserve all records used for operational and administrative purposes, including paper records, computer files, photographs, audio, video, and other electronically produced records. Records are maintained in two general groupings: administration and business records, such as legal, insurance, accounting, maintenance, and other documents related to carrying out our activities; and program operational records, such as case files, data files, and reports.

Anything time-sensitive must be documented as soon as possible but within 24 hours.

1. **CLASSIFICATION**

- Records are organized to facilitate access and retrieval throughout the life cycle of the records. Files are organized to ensure a consistent standard for description and inventory of records and to improve control, accessibility, and use of information.
- Records are maintained in locations secure from theft and unauthorized access and protected from damage by fire and water.
- Ensuring that all information is processed, maintained, and stored without unauthorized alteration of its original form and content protects records.
- Case files are stored according to the Companion name (alphabetical) to facilitate their retrieval.

2. **CONTROL OF RECORDS**

- Only authorized personnel have the authority to manage, restrict, regulate, and administer access to records.
- Companions and Coworkers have a right to review their files. The Companion representative or Coworker will engage with the review process once a request has been made to and approved by the Facility Manager, Quality Assurance Coordinator, or Executive Director.

- Working files, reports, and records that are temporarily removed from the source locations must be signed out verbally or by using ***OP5 Working File – Record Removal***

Form by authorized Coworkers only and must be returned on an agreed-upon date. Coworkers must identify how they will keep working files, reports, or records secure, i.e., locked office, etc., and unavailable for anyone not approved to review. No working file, report, or record will be removed from the Ita Wegman Association without documentation indicating how the material will be held securely and away from unauthorized individuals to review.

3. SECURITY OF RECORDS

- All records shall be maintained in a secure and weather/fire-sensitive storage location at each program. Security means each program will store its records in a locked filing cabinet and in a room that has secure locks. Each cabinet and or office is closed and locked after working hours.
- Daily, contractors must recognize that file information is confidential and must not be left unattended or unsecured.
- It is expected that the main records be kept at each approved central location and not be removed from the premises. However, from time to time, it will be necessary to create working files to manage the program services. The working file is limited to only that information which is required to complete the job at hand and no more.
- Main records must be kept current and complete. Any working file is considered a secondary document, and the main file must receive priority.

4**. ELECTRONICALLY GENERATED DOCUMENTS**

- Information maintained electronically will be backed up on a regular basis - minimally weekly for safekeeping. Financial information is backed up daily, and a duplicate copy of all data is kept off-site.
- All IWA computers that access the Internet must maintain an updated antivirus protection system. **All Coworkers who use their home computers will exercise caution to prevent unauthorized access to their computers. Confidential information is kept on external hard drives and will be secured in the same fashion as paper documents.**

5**. RETENTION AND DESTRUCTION OF RECORDS**

- The Ita Wegman Association follows all federal and provincial retention and disposal regulations and guidelines for Coworker and Companion files - currently a 7-year retention rate.
- No files or supporting materials will be destroyed if a legal process is initiated against the Ita Wegman Association.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director

OP5: WORKING FILE – RECORD REMOVAL FORM

Standard associated 1.E.3 (a, b, c, d, e, f)

Name of Coworker:
Position of Coworker:

Date and time and name of file removed:

Date and time file to be returned:

Please describe how you will keep removed documentation secure, safe and unavailable for any unauthorized individual to view material i.e. locked filing cabinet, locked office, secure in safe etc.

I agree that information removed from the Ita Wegman Association will not be viewed by anyone else but me and held in a secure and safe location while in my charge. Additionally, I will return all material to the Ita Wegman Association by the agreed-upon date.

The Ita Wegman Association
of British Columbia

Coworker Signature

_____

Witness Name

_____

Date

_____

Witness Signature

_____

Date

_____

OP6: ELECTRONIC RECORDS MANAGEMENT

Associated standard 1.E.3 (a, b, c, d, e, f)

POLICY

Documentation produced or stored electronically must meet all applicable confidential and legislative regulations. The Ita Wegman Association establishes and maintains a records management system, which complies with the guidelines of all applicable provincial and federal legislation. Electronic files and records are held securely and confidentially, except with respect to authorized access through policy or by statutory authority. All pertinent files concerning Companions or Coworkers are stored electronically for a specified period of time. Confidential electronic records of Companions or Coworkers are backed up on the network and stored off-site. Creation, access, removal, or destruction of records or files adheres to established policies and procedures.

PROCEDURES

ARCHIVING

Material deemed archived is 1) backed up on server, cloud, or external hard drive where possible, and 2) if hard copy (paper), transferred to a storage facility off-site from the main office. Information is catalogued and indexed according to date and file name.

DESTRUCTION OR DISPOSAL OF FILES

Material deemed to be ready for destruction is deleted from the system. Only designated files can be deleted.

LOCATION OF FILES

Companion and Coworker files are kept in a secure database. Access is controlled through permission rights. Companion and Coworker financial information is backed up on the Ita Wegman Association data system.

REVIEW

Electronic records are reviewed as needed by authorized personnel. Archival of removed material follows established guidelines to ensure the security and safety of all confidential information.

SECURITY

All files and passwords are regularly backed up on-site. All hardware i.e., USB sticks used to access material, is secure and complies with statutory requirements. Coworkers are responsible for the opening, maintenance, closure, and disposal of files related to the operation of programs; Companion reporting, site maintenance, and incident reports. Removal of records, without adherence to established policies, is strictly forbidden.

STORAGE

Material is catalogued and indexed according to date of file closure and maintained at a storage facility separate from the administration office. Stored documents will have documentation to indicate specifics of the information and confirm who had access to the stored information.

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director

The Ita Wegman Association
of British Columbia

OP7: ORGANIZATION, PROGRAM, AND LEADERSHIP STRUCTURE

Standard associated 1.A.1 a and b

POLICY

The Ita Wegman Association will maintain current organization and program charts that clearly demonstrate to Companions, Coworkers, and other stakeholders the relationship between all program and leadership groups, and residences associated with the Ita Wegman Association.

PROCEDURES

CURRENT ORGANIZATION, PROGRAM, AND LEADERSHIP CHARTS

The Ita Wegman Association's current organization, program, and leadership charts can be viewed on the following page (See Appendix for copy of chart with names OP8 and OP8.1).

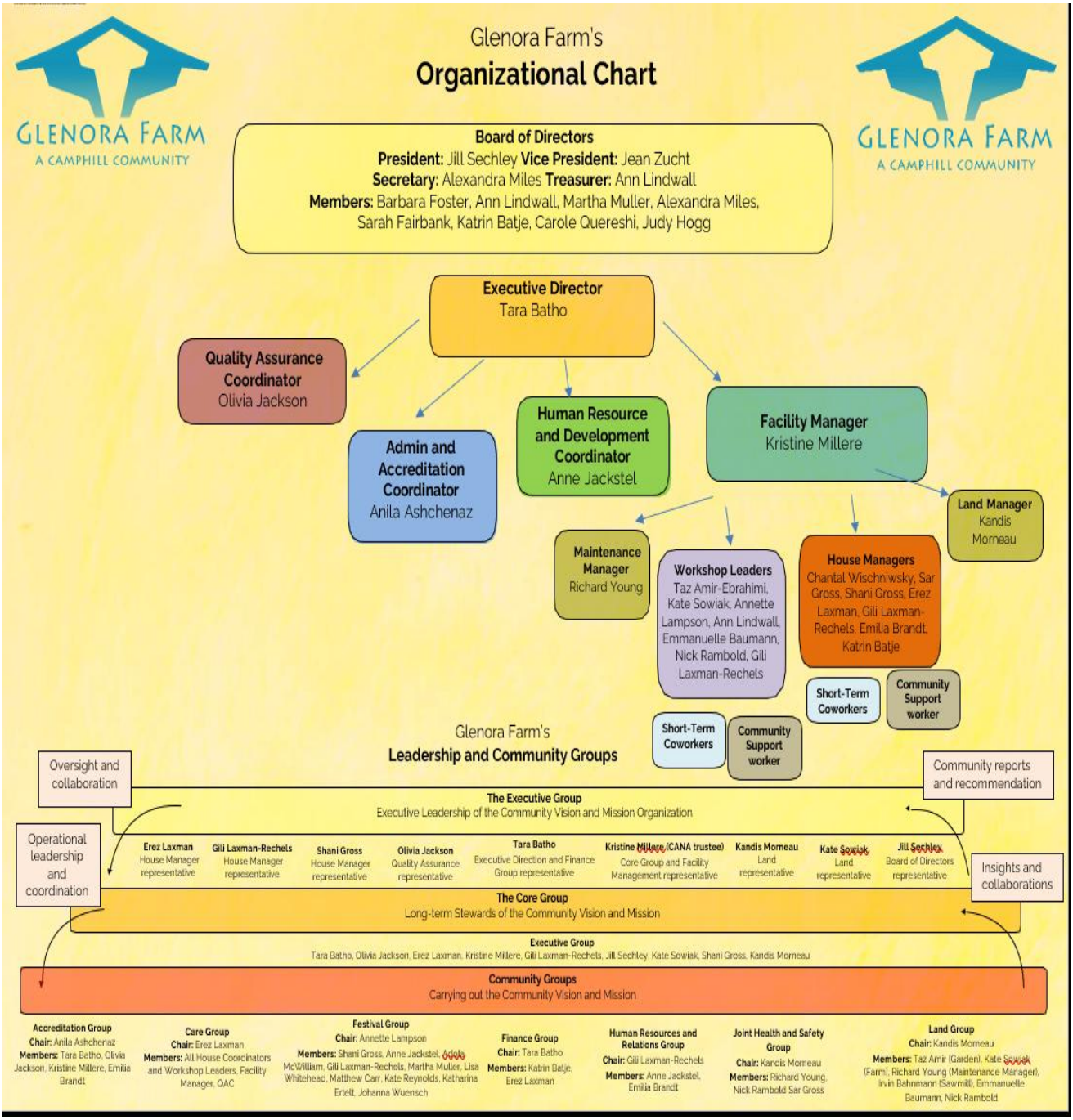
REVIEW OF THE ORGANIZATION, PROGRAM, AND LEADERSHIP CHARTS

The organization, program, and leadership charts will be reviewed annually, in conjunction with the Mission Statement/Philosophy, and more frequently if the circumstances dictate by the Executive Group.

Responsibility of: Executive Group and Accreditation Group

Monitored by: Executive Group and Board of Directors

OP8: ORGANIZATION AND LEADERSHIP FLOW CHART



OP8.1: DEFINITIONS and MANDATES

Associated standard 1.A.1 a and b

DEFINITIONS

Companions - Individuals with diverse abilities who participate in Glenora Farm Community Housing (C.H.) and Community Integration (C.I.) programs.

Coworkers - Individuals who are employed by Glenora Farm.

Short-Term Coworker (Partially Paid Volunteers) - Domestic and International individuals who live at Glenora Farm and support Glenora Farm C.H. and C.I. programming.

Practicum Student - Students who are participating in a practicum placement at Glenora Farm through their educational institution.

Day Volunteers - Individuals that do not live at Glenora Farm and volunteer with C.H and C.I. programs.

WWOOFers - Seasonal workers who support land-based activities in exchange for room and food.

Residential Care Worker (House Manager) - A Residential Care Worker (RCW) is responsible for managing one of the Glenora Farm residential care homes.

Community Support Worker (CSW) - A Coworker who is responsible for supporting Companions in the C.I. program. Some Community Support Workers have a speciality area and management duties which are identified in their job title and role description (Farm Manager, Garden Manager, Herb Garden Manager).

Licensed Care Homes

Corwyn House - Licensed care facility supporting a maximum of 4 Companions. Located at A-4766 Waters Rd.

Helios House - Licensed care facility supporting a maximum of 4 Companions. Located at B-4766 Waters Rd.

Big House - Licensed care facility supporting a maximum of 6 Companions located at 4766 Waters Rd.

Farmhouse/Deerholme - Licensed care facility supporting a maximum of 5 Companions located at P-4766 Waters Rd.

Land-based day program activities:

Garden - C.I. Program activity. Located at I-4766 Waters Rd,a Certified Organic vegetable garden.

Herb Garden - C.I. Program activity. Located at the herb garden near the Big House.

Farm - C.I. Program activity. Located at N-4766 Waters Rd.

Non-land-based day program activities:

Cooking - C.I. Program activity. Takes place in all residential care homes and the processing kitchen in Harvest Hall.

Weaving - C.I. Program activity. Located at a satellite location, 5090 Indian Rd.

Candles - C.I Program activity. Located at D-4766 Waters Rd.

Music - C.I Program activity. Takes place at 4766 Waters Rd. or in Trillium at H-4766 Waters Rd.

Recreational activities - C.I Program activity (arts and crafts, bowling, folk dancing, games). Takes place at various locations at 4766 Waters Rd.

Affiliated Locations:

Wider-community activities - C.I Program activity (swimming, library, grocery shopping, etc.) Takes place at various locations in the Cowichan Valley.

Glenora Store and Cafe - Property owned by Glenora Farm. Rented by a business that operates the Glenora Store & Cafe.

Apartment above the weaving workshop - Private rental.

Sawmill - Property owned by Glenora Farm. Sawmill owned and operated by Bahnmann Timber.

GROUP PARTICIPATION

- Groups without agendas or minutes are not reflected on OP8.1 and are completely voluntary (not paid hours of work). Voluntary group participation should only occur when all essential tasks and duties are completed. If participating in a voluntary group, Coworkers are not eligible for overtime (any hours above 40 per week).
- The number of participants (min and max) per Group is listed on OP8.1
- Group participation can be reviewed by the ATF on a case-by-case basis.

GROUP MANDATES

ACCREDITATION GROUP - MANDATE

CHAIR: Anila Aschenaz

MEMBERS: Kristine Millere (Facility Manager), Olivia Jackson (Quality Assurance Coordinator), Anila Ashchenaz (Admin and Accreditation Coordinator), Emilia Brandt (House Manager), and Tara Batho (Executive Director).

COMPOSITION: Executive Director (participation required), Facility Manager (participation required), Quality Assurance Coordinator (participation required), House Coordinator. Representation from the administrative team and the residential team. On occasion, other Coworkers may be requested to join specific Accreditation Group meetings.

NUMBER OF PARTICIPANTS: The minimum number of participants is 3, and the maximum number of participants is 5. Currently, there are 4 participating members.

AREAS OF RESPONSIBILITY:

Compliance

- The Accreditation Group is responsible for ensuring all CARF standards are understood and complied with.
- The Accreditation Group is responsible for ensuring that any organizational changes and changes to the standards manual are reflected in the organization's policies & procedures and plans & reports.
- Members will provide direct support and training to Coworkers, ensuring CARF standards are implemented.

Communication

- Attend different groups and meetings to ensure accurate and timely communication between all Coworkers regarding policies and procedures/plans & reports.

Task Calendar

- Create, maintain, and share the annual and monthly task calendar to ensure Coworkers are aware of all time-bound obligations.
- Follow up with Coworkers who have not completed tasks as outlined in the task calendar.

Legal and Regulatory

- Ensure all program and business operations meet CARF regulatory standards, as well as any external stakeholder standards, contracts, and all licensing obligations.
- Ensure timely reporting to CARF and all external and internal stakeholders and licensing bodies.

Policy and Plan Creation

- The Accreditation Group is responsible for creating policies & procedures and plans & reports.
- The Accreditation Group ensures all policies & procedures and plans & reports are reviewed annually, updated as needed, and comply with CARF and all external standards.

RESPONSIBILITIES OF THE CHAIR:

- Set agendas for regular meetings.
- Communicate/coordinate information transfer between the Accreditation Group and all other individuals and groups.
- Ensure that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE MEMBERS:

- Commit to being informed and actively involved in their Accreditation Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.
- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.
- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.

LOCATION & TIME:

- Tuesdays 10:00 am - 12:00 pm or as needed.
- Location: Music Room and Zoom.

COOPERATING WITH: All Coworkers, all Groups, Board of Directors, External Stakeholders.

REPORTING TO:

- Members report to the Chair.
- The Chair, or a designated member, reports to the appropriate individuals and groups.

BOARD OF DIRECTORS - MANDATE

PRESIDENT: Jill Sechley

MEMBERS: Jean Zucht (Vice President), Alexandra Miles (Secretary), Ann Lindwall (Treasurer).

MEMBERS AT LARGE: Barbara Foster, Carole Quershi, Katrin Batje, Martha Muller, Sarah Fairbank, Judy Hogg, and Tara Batho (Ex-Officio).

COMPOSITION: Board involvement is voluntary. The Board of Directors is elected annually at the AGM. Board members serve a set term as identified in the Bylaws.

NUMBER OF PARTICIPANTS: The minimum number of participants is 5, and the maximum number of participants is 12. Currently, there are 10 participating members.

AREAS OF RESPONSIBILITY:

Overall Responsibility of the Board of Directors

- Provides operational leadership and coordination, oversight, collaboration, and recommendations.
- This includes, but is not limited to, ensuring the Association's activities are compliant and in furtherance of its mission.
- Collaborates with Executive and Core Groups to further the development of the Association's programs.
- Monitoring and assessing sound and compliant financial management practices (including budgeting).
- Is responsible for monitoring and assessing sound and compliant fundraising practices, developing and maintaining beneficial relationships with donors, funders, supporters, collaborators, allies, vendors, and other stakeholders.
- Is responsible for informing, supporting, monitoring, and assessing the Board of Directors Working Committees, ensuring they carry out their functions.
- Are committed to the stewardship and safeguarding of effective and accurate external communications about the Association and its mission, priorities, importance, programs, and activities.
- Supports the Association's planning processes and engages with governance tasks. Ensures legal compliance (including all required filings) and sound risk management practices.
- Are committed to continuous professional development within the Member's sphere/area of responsibility.
- All Board Members contribute agenda points.

RESPONSIBILITIES OF THE PRESIDENT (CHAIR):

- The Board President is responsible for oversight of the Board, general supervision, and direction of the Association.
- Chairs the bi-monthly Board meetings.

- The Board President works closely with the Association's Executive and Core Groups to carry out The Ita Wegman Association's vision and directives.
- The Board President partners with other Board members to help ensure the Board's directives, policies, and resolutions are carried out.
- The Board President ensures that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE VICE PRESIDENT:

- The Vice President of the Board is prepared and capable at all times to assume the role of Board President on a temporary or interim basis, if necessary.

RESPONSIBILITIES OF THE SECRETARY:

- The Board Secretary provides members with required meeting notices, prepares agendas, and provides guidance on proper meeting procedures.
- The Secretary takes minutes at Board meetings, or designates a person for the task, and reviews and distributes the approved minutes.
- The Secretary is prepared to assume a leadership role when the President and Vice President are unavailable on a temporary or interim basis, if necessary.
- The Board Secretary is sufficiently familiar with legal documents (articles, by-laws, CRA letters, etc.) to note applicability during meetings.

RESPONSIBILITIES OF THE TREASURER:

- The Treasurer serves as the Financial Officer of the Board of Directors. The Treasurer may be asked to participate in Finance Group meetings on an as-needed basis. The Treasurer applies their knowledge of accounting and finances in monitoring and reviewing financial reports.
- The Treasurer works with other Board members and the Executive Director to review financial plans and approve the organization's budget.
- The treasurer reviews the annual audit and tax forms and presents the financial material to the Board at the AGM.
- Ensures financial policies and procedures are compliant with all external regulations.

LOCATION & TIME:

- The last Tuesday of every other month at 6:30 pm.
- Location: Music Room and zoom.

COOPERATING WITH: All Coworkers, all Groups, External Stakeholders.

REPORTING TO: Executive Group, Core Group, and external stakeholders.

CARE GROUP - MANDATE

CHAIR: Erez Laxman

SECRETARY: Olivia Jackson

MEMBERS: Katrin Batje (Farm House Manager), Emilia Brandt (Deerholme Manager), Gili Laxman-Rechels (Big House Manager/Candle Workshop Leader), Erez Laxman (Big House Manager/Scheduler), Shani Gross (Helios Manager), Sar Gross (Helios Manager/ JHSC Chair), Chantal Wischniwsky (Corwyn Manager), Kate Sowiak (Farm Workshop Leader), Tannaz Amir-Ebrahimi(Garden Workshop Leader), Kristine Millere (Facility Manager/Admissions Coordinator), Olivia Jackson (Quality Assurance Coordinator), Nick Rambold (Community Support Worker), Emmanuelle Baumann and other Coworkers as requested.

COMPOSITION:

All House Managers, all Workshop Leaders, Admissions representative, Facility Manager, and Quality Assurance Coordinator. On occasion, other Coworkers may be requested to join specific Care Group meetings. Meeting minutes are shared with all paid Glenora Farm Coworkers regardless of their roles.

NUMBER OF PARTICIPANTS: All House Managers and Workshop Leaders are required to attend. All direct-support Coworkers are required to review the weekly meeting minutes. Currently, there are 12 participating members.

AREAS OF RESPONSIBILITY:

Care-related topics

- The Care Group is responsible for bringing awareness of concerns for Companions well-being, health, social engagement, and behavioural challenges. The Care Group reviews issues and makes decisions regarding the best course of action to support Companions within the Quality-of-Life Framework, and support Coworkers in their work with Companions.
- Support individuals within the scope of our policies and external regulations (CLBC, Island Health, CARF, etc.).

Orientation & Training

- The Care Group provides input and suggestions regarding Coworker constellations in all Glenora Farm programming.
- The Care Group discusses new Companion applications, suitability, and program placement as presented by the Facility Manager and Quality Assurance Coordinator.
- The Care Group is responsible for reviewing and understanding IWA policies and current CLBC, Island Health, CARF, etc. regulations and policies.
- The Care Group is informed of Joint Health and Safety Group initiatives and complies to JHSC Group requests.

Governance and decision-making

- Glenora Farm Coworkers and Groups are committed to making decisions by consensus. The Care Group may request input from other Groups to help achieve a decision.

RESPONSIBILITIES OF THE CHAIR:

- Set agendas for regular meetings.
- Make sure that time is used effectively and efficiently to ensure all agenda points are addressed (i.e. minimize side conversations, keep the conversation on track, ensure the meeting begins on time, etc.).

- Communicate/coordinate information transfer about agenda points between all Groups and Coworkers.
- Ensure that satisfactory follow-up/actions are taken.
- Address member absences and follow up if needed with the Coworker's supervisor.
- Reviews the agenda before the meeting to ensure all points on the agenda align with the Care Group mandate.

RESPONSIBILITIES OF THE MEMBERS:

- Commit to being informed and actively involved in their Care Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.
- Contribute agenda points and review meeting minutes at least 24 hours before the meeting.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.
- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week.

LOCATION & TIME:

- Tuesdays: 1:00pm - 2:20pm
- Location: Music Room

COOPERATING WITH: All Coworkers, all Groups, Board of Directors, External Stakeholders.

REPORTING TO:

- Members report to the Chair.
- The Chair, or a designated member, reports to the appropriate individuals and Groups.

CORE GROUP - MANDATE

NAME OF THE GROUP: The Core Group.

COOPERATING WITH: Festival Group, Care Group, Executive Group, Land Group, Finance Committee, and Board of Directors.

CHAIR: Kristine Millere

SECRETARY: Olivia Jackson

MEMBERS: Adola McWilliam, Martha Muller, Katrin Batje, Ann Lindwall, Olaf Lampson, Kristine Millere, Olivia Jackson, Gili Laxman-Rechels, Erez Laxman, Shani Gross, Kandis Morneau, Kate Sowiak, Jill Sechley, and Tara Batho

COMPOSITION:

The Core Group will be composed of Executive Group members and senior Coworkers or founding members who carry the cultural and anthroposophical impulse for the community.

NUMBER OF PARTICIPANTS: All Executive Group members and 5 Thursday Group members are required to attend. The minimum number of participants is 10, and the maximum number of participants is 12. Currently, there are 12 participating members.

AREAS OF RESPONSIBILITY:

● The Core Group is responsible for upholding The Ita Wegman Association's mission and vision. It works to enliven the awareness of Anthroposophy and its role in nourishing and informing the work of Camphill in the Glenora Farm Community.

● The Core Group carries the cultural life of Glenora Farm and oversees the Festival Committee. It provides training to the new Coworkers regarding the impulse and history of Camphill and Glenora Farm.

● The Core Group supports The IWA's membership of the Camphill Association of North America (CANA) by upholding its principles and requirements.

● The Core Group organizes and oversees mentorship and support groups, and in collaboration with The Executive Group and The Ita Wegman Association Board of Directors, The Core Group supports The Executive Group in addressing Human Resource matters.

Governance and Decision Making

- Glenora Farm Coworkers and Groups are committed to making decisions by consensus. The Core Group may request input from other Groups to help achieve a decision.
- The IWA is committed to making collaborative and informed decisions. At times, the Core Group may be called to make decisions regarding various issues (administrative, human resource, legal, etc.). The Core Group will gather feedback from those affected by the decision; however, some decisions are time-sensitive and will require a decision before obtaining feedback from all individuals/groups affected.
- Decision-making capacity: The Core Group makes decisions in one of three ways: with feedback from the entire community, with feedback from groups or individuals, and without feedback.

RESPONSIBILITIES OF THE CHAIR:

● Set and communicate agendas for regular meetings.

● Communicate/coordinate information transfer between the Core Group and Executive Group.

● Ensure that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE SECRETARY:

- Take accurate and timely minutes, pay attention to the conversation, and ask questions for clarity.

RESPONSIBILITIES OF THE MEMBERS:

- A minimum of one year as a Coworker at Glenora Farm is recommended before becoming a member of The Core Group.
- Understanding of the principles of CANA.
- Willingness to work with your Coworkers in the spirit of Faithfulness (refer to Rudolf Steiner's verse on Faithfulness).
- Commitment to the growth and well-being of the Glenora Farm Community.
- Commitment to protecting and developing the values and ideals of the Glenora Farm Community.
- Commitment to being part of the future of the Glenora Farm Community.
- Openness and willingness to the study of Anthroposophy.
- Members of this Group must be able to work harmoniously and think creatively together to rediscover seeds from which new viable ideas can grow for a new and stronger life.
- Commit to continuous professional development within the member's sphere/area of responsibility.

- Contribute agenda points.
- Ensure that satisfactory follow-up/actions are taken.
- Commit to being informed and actively involved in their Accreditation Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.
- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.
- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.

LOCATION & TIME:

● First Friday of the month from 1 pm - 2:30 pm.

● Location: Music Room

REPORTS (what to report and to whom):

● Members report to the Chair, and Chair reports to other groups as needed.

EXECUTIVE GROUP - MANDATE

NAME OF THE GROUP: Executive Group

COOPERATING WITH: Cooperating with all Groups, the Board of Directors, Coworkers, and Companions as needed or requested.

CHAIR: Tara Batho

MEMBERS: Gili Laxman-Rechels, Jill Sechley, Kristine Millere, Kate Sowiak (attends the first meeting of the month), Erez Laxman, Kandis Morneau, Shani Gross, and Olivia Jackson.

COMPOSITION:

At least one member of the Board of Directors, Thursday Group, Finance Group, Human Resource and Relations Group, Land Group, and Care Group (live-in representative).

Ad-hoc participants will be requested on an as-needed basis. 40% of the members must be live-in Coworkers.

The composition of the Executive Group, including the chair and members, will be reviewed annually (February), or as needed.

NUMBER OF PARTICIPANTS: The minimum number of participants is 6, and the maximum number of participants is 9. Currently, there are 9 participating members.

AREAS OF RESPONSIBILITY:

Organizational Operations

- The Executive Group is committed to working within the Camphill model, or a hybrid model where Camphill values govern who we are, what we do, and how we do it.
- The Executive Group is responsible for overseeing the organizational and operational functions of Glenora Farm. The Executive Group contributes to the overall success of the organization by effectively monitoring the day-to-day operations of Glenora Farm, including financial oversight, administrative and regulatory obligations, contract management, internal and external reporting, human resources, support delivery, fundraising, business development, and maintenance operations at Glenora Farm.
- The Executive Group understands, endorses, and adheres to IWA policies and procedures and plans, and reports.
- The Executive Group ensures compliance with all IWA ethical codes of conduct and corporate compliance practices.

Care and Support

- The Executive Group is responsible for overseeing all program development, management, and support delivery.
- The Executive Group oversees and engages with information and feedback from the Care Group. This includes but is not limited to support delivery, advocacy initiatives, professional development, recruitment and retention needs, and health & safety issues/concerns.
- The Executive Group supports the Executive Director, Facility Manager, and Quality Assurance Coordinator in addressing concerns brought forth by all internal and external stakeholders.

Financial Operations

- The Executive Group is responsible for ensuring the financial stability and maintaining financial oversight for the Association.
- The Executive Group reviews and engages with budgets, reports, policies, and plans from the Finance Group.

Human Resources and Relations

- The Executive Group oversees and engages with feedback and information from the Human Resource and Relations Group (HRR Group). This includes but is not limited to interpersonal matters, recruitment needs, Coworker development, corrective actions, and complaints.

Legal and Regulatory

- The Executive Group oversees and manages issues that could have legal and/or financial impact on IWA programs, Companions, and Coworkers.
- The Executive Group reviews, understands, and endorses the IWA mission statement and bylaws.
- The Executive Group ensures Glenora Farm operations meet all regulatory standards, external stakeholder requirements, and contract obligations.

Crisis Management & Grievances

- The Executive Group acts as a decision-making body supporting the HRR Chair after the issue has been escalated through the HRR Group. The Executive Group will provide intervention or support due to grievances, policy noncompliance, Coworker needs, etc., as requested by the HRR Group.

Governance and Decision Making

- Glenora Farm Coworkers and Groups are committed to making decisions by consensus. The Executive Group may request input from other Groups to help achieve a decision.
- The IWA is committed to making collaborative and informed decisions. At times, the Executive Group may be called to make decisions regarding various issues (administrative, human resource, legal, etc.) without collaboration. The Executive Group will gather feedback from those affected by the decision; however, some decisions are time-sensitive and will require a decision before obtaining feedback from all individuals/groups affected.

- Decision-making capacity: The Executive Group makes decisions in one of three ways: with feedback from the entire community, with feedback from groups or individuals, and without feedback.

RESPONSIBILITIES OF THE CHAIR:

- Set and communicate agendas for regular meetings.
- Communicate/coordinate information transfer between the Executive Group and all other Groups, Working Committees, Board, Coworkers, and Companions.
- Ensure that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE SECRETARY:

- Take accurate and timely minutes, pay attention to the conversation, and ask questions for clarity.

RESPONSIBILITIES OF THE MEMBERS:

- Commit to being informed and actively involved in their Executive Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.
- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.

- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.
- Group members develop an understanding and oversight of the day-to-day operations of the IWA. Executive Group members will inform themselves about any issues as they relate to business operations, support delivery, as well as all legal, regulatory, stakeholder, and licensing obligations.
- Executive Group members commit to being informed and actively involved in their Executive Group tasks and responsibilities.
- Executive Group members advocate for and consider the Group they have been tasked to represent.
- All Executive Group members agree to the terms laid out in the IWA confidentiality agreement. All members maintain confidentiality regarding topics discussed during Executive Group meetings. Communication will flow from the Executive Group to other Groups and individuals through members designated by the Executive Group at the meeting.

LOCATION & TIME:

- Fridays 10 am - 12 noon.
- Location: Music Room and zoom.

COMMUNICATIONS (what to communicate and to whom):

- Members report to each other. The Chair or a designated Executive Group member reports to other Groups and individuals as needed.

- Topics listed on the agenda remain there until they are resolved.

FESTIVAL GROUP - MANDATE

CHAIR: Annette Lampson

MEMBERS: Annette Lampson (Chair), Shani Gross, Gili Laxman- Rechels, Martha Muller, Adola McWilliam, Lisa Whitehead, Matthew Carr, Kate Reynolds, Katharina Ertelt, Johanna Wuensch, Anne Jackstel

COMPOSITION:

The Festival Group may be composed of at least one representative from each

household, ideally a combination of House Managers, Short-Term Coworkers, and Companions, including at least two Core Group members. The Festival Group is open to anyone who has a passion for festivals and is interested in enlivening the festival life at Glenora Farm.

NUMBER OF PARTICIPANTS: The minimum number of paid Coworkers is 5, and the maximum number of paid Coworkers is 7. Currently, there are 4 paid Coworkers members.

AREAS OF RESPONSIBILITY:

Festival and Cultural Life and Community

- The Festival Group is responsible for holding awareness and overseeing the organization of the festivals throughout the year to enrich the community with spiritual content.
- To encourage the expression of the arts and cultural diversity.
- To encourage the interest and full participation of the whole community. Source volunteers for different events.

RESPONSIBILITIES OF THE CHAIR:

- Set agendas for regular meetings
- Communicate/coordinate information transfer between the Festival Group, all Coworkers, other Groups, and stakeholders.
- Ensure that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE MEMBERS:

- Commit to being informed and actively involved in their Festival Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.
- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.
- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.

COOPERATING WITH: All Coworkers, all Groups, Board of Directors, External Stakeholders.

REPORTING TO:

● Members report to the Chair.

● The Chair, or a designated member, reports to the appropriate individuals and groups.

LOCATION & TIME:

● Biweekly Wednesday at 3:30pm in Music Room

FINANCE GROUP- MANDATE

CHAIR: Tara Batho

MEMBERS: Katrin Batje, Erez Laxman, Contract Bookkeeper (as requested), IWA Board of Directors Treasurer (as requested).

COMPOSITION:

The Executive Director, at least one member of the Executive Group, and one member of the Thursday Group. It is a requirement for participation with the Group that the participant has financial expertise, or the willingness to be informed on financial best practice standards for charitable organizations, and Generally Accepted Accounting Principles (GAAP) of Canada.

NUMBER OF PARTICIPANTS: The minimum number of participants is 3, and the maximum number of participants is 3. Currently, there are 3 participating members.

AREAS OF RESPONSIBILITY:

Organizational Financial Operations

- The Finance Group is responsible for planning, monitoring, and safeguarding the financial health, security, and viability of The Ita Wegman Association of BC (IWA) in the short, medium, and long term.
- The Finance Group identifies strengths, weaknesses, opportunities, and threats concerning the Association's finances. The Group makes recommendations to the Executive Group and IWA Board of Directors (BOD) on any actions necessary to ensure

the organization is run on a prudent, proactive, and transparent financial basis and that there is an appropriate delegation of authority regarding financial decisions.

Financial Accountability & Responsibility

- The Finance Committee challenges the Executive Group, Leadership Coworkers, administration team members, and BOD to be as efficient and cost-effective as possible to ensure that maximum revenue monies are directed to IWA programs.
- The Finance Group challenges the Executive Group, Leadership Coworkers, administration team members, and BOD to be as efficient and cost-effective as possible to review Association expenses and support financial stability.
- The Finance Group works with all internal and external stakeholders to develop the annual operating budget and capital project budget.
- The Finance Group is responsible for monthly financial report review and the delegation of action items.
- The Group prepares and presents the annual operating budget and capital project budget to the Executive Group and the IWA Board of Directors for review and approval.
- The Group presents the annual operating budget and capital project budget reports to the BOD (bi-monthly).
- The Finance Group engages all internal and external stakeholders in developing a BOD-approved Strategic Plan, which includes ongoing and upcoming program and technology needs, Coworker expenses, facility improvements, and physical infrastructure needs of the Association and Glenora Farm community.
- The Group is responsible for monitoring interim and annual operating results against the annual budget every month and recommends adjustments, as necessary, to the preliminary budget due to actual results, enrollment, and events.
- The Group regularly reviews the management information systems in place to ensure that there is sound record keeping enabling strong financial record management as well as proper written delegation of authority.
- The Group monitors the proper repair and maintenance of the physical assets of Glenora Farm and plans for future needs.

- The Group manages the investment of any surplus, contingency, and investment funds to safeguard the principal while seeking an acceptable return.
- The Group regularly reviews the Association's financial policies, as well as checks and balances in place to ensure that controls are adequate, recorded, and exceptions documented.

RESPONSIBILITIES OF THE CHAIR:

- Set and communicate agendas for regular meetings.
- Communicate/coordinate information transfer between all Groups, Coworkers, the Board of Directors, and all stakeholders.
- Ensure that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE MEMBERS:

- Finance Group members develop and carry awareness and oversight of the financial well-being and stability of the Association now and into the future.
- The Group members ensure they have the financial expertise, or the willingness to be informed on financial best practice standards for charitable organizations, and Generally Accepted Accounting Principles (GAAP) of Canada.
- Finance Group members commit to continuous professional development within the member's sphere/area of responsibility.
- Commit to being informed and actively involved in their Finance Group tasks and responsibilities. Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.

- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.
- All Finance Group members agree to the terms laid out in the IWA confidentiality agreement. All members maintain confidentiality regarding topics discussed during Finance Group meetings. Communication will flow from the Finance Group to other Groups and individuals through members designated by the Finance Group at the meeting.

COOPERATING WITH: All Coworkers, all Groups, Board of Directors, External Stakeholders.

REPORTING TO:

● Members and the Chair report to each other.

● The Chair, or a designated member, reports to the appropriate individuals and Groups.

LOCATION & TIME:

● First and third Thursday of the month 10:00 am - 11:20

● Location: Big House Administration office.

HUMAN RESOURCES AND RELATIONS GROUP - MANDATE

CHAIR: Gili Laxman-Rechels

MEMBERS:

Anne Jackstel, Emilia Brandt

COMPOSITION:

At least one member of the Executive Group and one member of the Care Group.

NUMBER OF PARTICIPANTS: The minimum number of participants is 3, and the maximum number of participants is 4. Currently, there are 3 participating members.

AREAS OF RESPONSIBILITY:

Domestic and International Coworker admissions

- Support the Admissions Coordinator in domestic and international Coworker admissions and onboarding as requested.
- Support the Executive Group in Coworker composition

Coworker Support Program

- Responsible for assigning a Support Person for new Coworkers.
- Responsible for keeping track of Support meetings.
- Responsible for adhering to the ECP47- Coworker Support Program.

Performance Reviews

- Planning and participating in most reviews, including performance evaluations, exit interviews, Coworker feedback, human relations, mediation meetings, and filing/managing all related documentation.
- Works with the Executive Group in the corrective action process.
- Works with the Executive Group in the termination process as requested.

Crisis Management & Grievances

- Point of contact for Coworkers for any needed intervention, or support due to grievances, policy noncompliance, personal needs, etc.
- All members of this group will maintain confidentiality.

- At times, HRR members may need to keep things confidential from other members due to conflict of interest.

Coworker Policies & Documents

- The HRR Group supports the Accreditation Group with the creation and updating of all handbooks and policies (Companion, Coworker, etc.)

RESPONSIBILITIES OF THE CHAIR:

- Set agendas for regular meetings
- Communicate/coordinate information transfer between the Executive Group, Accreditation Group, Finance Committee, Care Group and the Human Resource and Relations Group
- Ensure that satisfactory follow-up/actions are taken

RESPONSIBILITIES OF THE MEMBERS:

- HRR Group members have an awareness of the community and what is going on. When something is noticed, the HRR works to make a recommendation or resolution to the situation.
- Actively strive to cultivate an inner-life and commit to life-long learning and self development to be able to guide others in the community.
- Commit to continuous professional development within the member's sphere/area of responsibility.
- Ensure that satisfactory follow-up/actions are taken
- Commit to being informed and actively involved in their Human Resources and Relations Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.

- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.
- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.
- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.

LOCATION & TIME:

- Wednesday 1 pm - 2:15 pm
- Location: Big House, upstairs office next to the Music Room

COOPERATING WITH: Care Group, Admissions Coordinator, Facility Manager, Executive Director, Finance Committee.

REPORTS TO:

- Members report to the Chair, and Chair reports to the Executive Group and other groups as needed

JOINT HEALTH AND SAFETY COMMITTEE - MANDATE

The Ita Wegman Association
of British Columbia

NAME OF THE GROUP: Joint Health and Safety Committee.

REPORTING TO: Executive Group, Care Group, Finance Committee, Board of Directors.

COOPERATING WITH: Maintenance Manager**,** Care Group, Facility Manager, Executive Director, Finance Committee.

CHAIR: Kandis Morneau

MEMBERS: Richard Young, Sar Gross, Nick Rambold

COMPOSITION:

The Health and Safety Committee is composed of one House Manager, one Workshop Leader, one Land Group representative, and the Maintenance Manager (participation required).

NUMBER OF PARTICIPANTS: The minimum number of participants is 4, and the maximum number of participants is 5. Currently, there are 4 participating members.

AREAS OF RESPONSIBILITY:

● The Health and Safety Committee is responsible for creating and maintaining the highest level of health and safety in the home, workplace and community. Companions and Coworkers are considered in all aspects of health and safety. The Health and Safety Committee is committed to working within the Camphill model, or a hybrid model where Camphill values govern who we are, what we do, and how we do it.

● The Committee provides input and suggestions regarding residential, day program, and workplace safety.

● The Committee discusses health and safety-related concerns and works in a proactive way to ensure the safety of all Companions and Coworkers.

● The Committee ensures Coworkers are up to date with health and safety regulations.

● The Committee ensures that all Coworkers are trained in the necessary fields.

● The Health and Safety committee discusses and makes decisions on health and safety

related issues. The Health and Safety committee may provide input to or receive input from other groups to help achieve a goal or make a decision.

● The committee works with all relevant regulatory bodies and inspectorates

RESPONSIBILITIES OF THE CHAIR:

- Set and communicate agendas for regular meetings.
- Communicate/coordinate information transfer between the Care Group, Executive Group, Accreditation Group, Finance Committee, Human Resource and Relations Group, Maintenance Manager, and Board of Directors.
- Ensures that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE MEMBERS:

- Commit to continuous professional development within the member's sphere/area of responsibility.
- Contribute agenda points.
- Ensure that satisfactory follow-up/actions are taken.
- Communicate pertinent information to Coworkers and Companions via House meetings or one on one meetings in the day program.
- Commit to being informed and actively involved in their Joint Health and Safety Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.

- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.
- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.

LOCATION & TIME:

● Monthly

● Location: to be determined and communicated by the Committee Chair in advance of monthly meetings.

REPORTS (what to report and to whom):

● Members report to the Chair, and Chair reports to the Care Group, Executive Group, Accreditation Group, Finance Committee, Human Resource and Relations Group, Maintenance Manager, and Board of Directors.

LAND GROUP - MANDATE

CHAIR: Kandis Morneau - Land Manager

MEMBERS: Richard Young (Maintenance), Tannaz Amir-Ebrahimi (Garden Manager), Emmanuelle Baumann (Herbs), Irvin Banman (Forestry), Kate Sowiak (Farm), Nick Rambold (Herbs)

COMPOSITION: Land Manager, Land-based Workshop Leaders (Garden, Farm, Herb Garden, and Estate), the Maintenance Manager, and a Forestry representative (as available/requested).

NUMBER OF PARTICIPANTS: The minimum number of paid Coworkers is 4, and the maximum number of paid Coworkers is 6. Currently, there are 6 paid Coworkers.

AREAS OF RESPONSIBILITY:

- The primary goal of this Group is to care for and work together, share information, give input, and plan projects that relate to forest, fields, gardens, and animal husbandry on our 93-acre biodynamic land.
- The Group works to maintain a beautiful and safe estate while caring for the land in a respectful and holistic way, inspired by biodynamic principles.
- To care for and cultivate the fields and garden, farm, estate, and herb workshop areas so that they can provide safe and meaningful work for Companions while developing social and work-based skills.
- To facilitate cooperation and coordination between the 4 land-based workshops.
- Maintain and enhance Glenora Farm's community areas.

RESPONSIBILITIES OF THE CHAIR:

- Set and communicate agendas for regular meetings.
- Communicate/coordinate information transfer between the Land Group and the Executive Group.
- Ensure that satisfactory follow-up/actions are taken.

RESPONSIBILITIES OF THE MEMBERS:

- Members develop and carry awareness and oversight of the general well-being and functioning of the community by being informed or actively involved in their Land Group tasks and responsibilities.
- Actively strive to cultivate an inner-life and commit to life-long learning and self development to be able to guide others in the community through land-based decisions.
- Commit to continuous professional development within the member's sphere/area of responsibility.
- Contribute agenda points.
- Commit to being informed and actively involved in their Land Group tasks and responsibilities.
- Are committed to working with Camphill values. These values govern who we are, what we do, and how we do it.
- Commit to life-long learning, self-development, and professional development within the member's sphere/area of responsibility.
- Contribute agenda points and review meeting minutes.
- Take meeting minutes as needed.
- Engage in positive, productive and proactive conversations.
- Hold themselves accountable to their obligations, responsibilities, and tasks.
- Ensure that satisfactory follow-up/actions are taken.
- Attend meetings consistently. Meetings should only be missed because of time off and illness. If appointments are only able to be made in that time frame, then the Coworker must let the chair know they are unable to make it at least 24 hours in advance. If there are items on the agenda that pertain to the Coworker/require the Coworker for an update, the Coworker must put more information in the minutes for everyone to review or request that it's discussed the next week. If not able to regularly attend, the Coworker must have a conversation with the Chair to see if all members of the group are okay with that, or whether they will be asked to leave the group.

LOCATION & TIME:

- Monthly
- Location to be determined and communicated in advance of monthly meetings.

COOPERATING WITH: Care Group, Admissions Coordinator, Facility Manager, Executive Director, Finance Committee, Board of Directors

REPORTS TO:

- Members report to the Chair, and Chair reports to the Executive Group and other groups as needed.

OP9: POLICIES, PROCEDURES, REPORTS & PLANS ENDORSEMENT

1.A.3.k

The Executive Group and Board of Directors approve and endorse all policies, procedures, reports and plans identified for the operational year(s) of _____ associated with the Ita Wegman Association including but not limited to: Accessibility, Strategic Plan Update, Cultural Diversity, Health and Safety, Infection Control, Corporate Compliance, Human Resource, Quality Improvement, Strategic Plan, Technology, Training and Risk Management etc.

Date: _____

Name	Group	Signature

The Ita Wegman Association
of British Columbia

OP10: MISSION STATEMENT

Associated standard 1.A.3 a (1 and 2)

The qualities of Generosity, Faithfulness, and Open-mindedness form the foundation of our Community. We endeavour to uphold these qualities in the economic, social, cultural, and spiritual realm of our Community, in how we work together, meet with one another, and strive together. This is reflected in our Mission Statement:

"Glenora Farm is a community where people of diverse abilities live, learn, and work together."

We hold the image of human beings as described in the Western philosophy of Rudolf Steiner and the principles of Anthroposophy and the International Camphill Movement.

Responsibility of: All Employees and Coworkers

Monitored by: Executive Group, Core Group, and Board of Directors

OP11: WAITLIST

Associated standards 2.A.3 (a, b, c) and 2.A.11 (a, b, c)

POLICY

In situations where funding is in place, The Ita Wegman Association holds a list of potential Companions who have expressed interest in joining The Ita Wegman Residential Program

and/or Day Program.
The wait list is managed in consultation with Companion representatives and CLBC referral agents.
Any Companions who seek support are prioritized based on need and program suitability and are provided resource information for either alternate or temporary services, when possible.

Responsibility of: Quality Care Coordinator, Facility Manager, and Executive Director

Monitored by: Quality Care Coordinator and Facility Manager

OP12: CHARITY REGISTRATION

Associated standard 1.A.1 (a, b)

REGISTRATION

The name of the agency is The Ita Wegman Association of BC for Curative Education and Social Therapy (DBA Glenora Farm), and it is a registered charity under the BC Societies Act incorporation #S0022046. The date of incorporation is January 21, 1987, and the tax number is 88827 5849 RR0001

The Executive Group has the authority, as outlined in the bylaws and constitution, to manage and provide oversight of the association.

PROCEDURES

To maintain good standing status, the Ita Wegman Association of BC operates in compliance with the BC Society Act and the Canadian Revenue Charities Act regulations.

Responsibility of: Executive Director

Monitored by: Executive Group, Core Group, and Board of Directors

The Ita Wegman Association
of British Columbia

OP13: COWORKER ISSUE MANAGEMENT

Associated standard 1.D.1 (a, b (1, 2, 3), c)

POLICY

The Ita Wegman Association Coworkers will maintain and promote professional interactions and affiliations with colleagues, associated stakeholders, and community members in a manner that supports cooperative problem solving and conflict resolution.

Coworkers will be open to hearing and giving feedback and will be open to resolving any challenges in a timely, respectful, and sensitive manner.

Any instances of abuse or neglect will be reported immediately to the Facility Manager or Quality Assurance Coordinator.

If an issue or conflict reoccurs between you and a Coworker, you must bring it up with your Support Person.

Any time a Support Person gets involved in an issue or conflict, the high-level information and any future updates will be sent to the HRR Group Chair for Supervisor Notes.

PROCEDURES

1. Any issue will first be identified directly to the said Coworker for discussion and resolution in a timely fashion (within 3 working days).
2. If the conflict cannot be resolved independently, request support from your Support Person to help resolve the conflict. Your Support Person can identify the next best step (mediated or observed conversation).

3. If the conflict cannot be resolved with the support of the Support Person, then your Support Person will notify the Facility Manager that you require support to help resolve

the conflict. The Facility Manager will address the issue within 3 working days.

4. If the conflict cannot be resolved with the support of the Facility Manager, then the Facility Manager will notify the HRR Group that you require support to help resolve the conflict. The HRR Group Chair will acknowledge they have received your request within 3 working days, and the HRR Group will address the issue within 7 working days.
5. If the issue remains unresolved after the involvement of the HRR Group, the HRR Group Chair will email the Executive Group Chair and request assistance. The Executive Group Chair will respond to the HRR Group Chair within 3 working days and address the issue with the Executive Group within 7 working days.

6. If the issue remains unresolved after the involvement of the Executive Group, the Executive Group Chair will email the President of the Board of Directors and request assistance. The President of the Board of Directors will respond to the Executive Group chair within 3 working days and address the issue with the Board of Directors within 7 working days.

Responsibility of: All Coworkers

Monitored by: Facility Manager, HRR Group, Executive Group, Board of Directors

OP14: EXTERNAL COMPLAINT

Associated standard 1.D.1 (a, b (1, 2, 3), c

POLICY

The Ita Wegman Association Companions and Coworkers will maintain and promote professional interactions and affiliations with associated stakeholders and community members in a manner that supports cooperative problem solving and conflict resolution. Companions and Coworkers will make every effort to be approachable and available to hearing and resolving issues presented by stakeholders, community members, etc., in a fashion that is timely, sensitive, and respectful to all parties involved.

PROCEDURES

Issues, complaints, or allegations that involve situations identified as serious, i.e., have a significant impact upon individuals, are not typically viewed as normal occurrences or behaviors, involve major medical emergencies (including allegations and disclosures of abuse), police/paramedic or fire interaction, or other serious emergencies, including, but not limited to:

- Assault/aggression
- Funder complaint
- Stakeholder request for investigation
- Companion Abuse
- Companion complaint of abuse
- Death/suicide threats or attempts
- Hostage taking
- Missing companions
- Weapons

Will be directly managed and handled by the Facility Manager and/or designate. An investigation will commence within 24 hours of the Ita Wegman Association receiving written notification of a complaint, dispute, allegation, or request for investigation from a stakeholder or community member.

STANDARDS FOR CONDUCTING AND DOCUMENTING INVESTIGATION

The Ita Wegman Association, or designated conducting investigations, will document the process, detailing the chronology of the investigative steps taken.

- Investigator(s) will maintain a list of individuals interviewed, dates of interviews, subject matter of interviews, as well as summaries of interviews. Documentation will include business addresses and telephone numbers, positions, and titles current at the time the issue, complaint, dispute, allegation, or request for investigation was made.
- Investigator(s) will maintain a description of the files, documents, and records reviewed, including a summary of auditing activity and documents that support the estimation of the losses or impact.
- Documentation will identify the potential causes of the complaint, dispute, allegation, or request for investigation (e.g., intentional conduct, lack of internal controls, circumvention of Ita Wegman Association procedures or Government regulations)
- Investigator(s) will describe in detail the nature of the complaint, dispute, allegation, or request for investigation
- Investigator(s) will identify the Coworkers and Companions, or related entities involved and/or affected
- Investigator(s) will identify the impact on, and risks to, health, safety, or quality of care posed by the matter disclosed
- Investigator(s) will identify the period during which the issue, dispute, allegation, incident, or practice occurred
- Investigator(s) will identify the officials, Coworkers, or Companions who knew of, encouraged, or participated in the incident or practice, and any individuals who may have been involved in detecting the matter
- Investigator(s) will identify the officials, contractors, or Coworkers who should have known of, but failed to detect, the issue, dispute, allegation, incident, or practice based on their contract or job responsibilities
- Investigator(s) will estimate the monetary impact of the issue, dispute, allegation, incident, or practice

A final report will be generated and verbally shared with identified parties. The report will be held confidential and on file at The Ita Wegman Association. Where possible and when

requested, a redacted copy of a report will be provided to all associated parties. Please note The Ita Wegman Association reserves the right not to provide a written copy of a report if, by doing so, a breach in confidentiality and privacy laws may occur.

All reporting will contain truthful information based on a good-faith effort to fully comply with all applicable laws and regulations. Findings and recommendations will identify a course of action that will support best practice efforts and any corrective action required.

Records will be retained in their original form or on material that will maintain its integrity in a centralized file. The storage of all material records will be in a secure location at the main office site.

CORRECTIVE ACTION PLANNING

The Facility Manager, Quality Assurance Coordinator, or Executive Director, in consultation with the Executive Group and/or the Core Group and/or the Board of Directors, will determine corrective action required to support quality improvement efforts. Corrective action planning will be communicated to the responsible parties. Follow-up may include:

1. Mandatory disclosure and/or financial payback
2. Appropriate discipline, in accordance with Ita Wegman Association policies
3. Appropriate training/ re-training

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, Executive Director, HRR Group, Executive Group, Board of Directors

OP15: CODE OF ETHICS

Associated standard 1.A.6 a (1, 2, 3, 4, 5, 6 (a - i, ii, iii), b, c, d, e, 7, 8, 9, 10 (a, b, c, d), b (1, 2 – a, b,), c (1, 2), d, e and 1.E.2 (a, b, c, d)

PURPOSE

Guidelines for professional standards, such as those described in this Code of Ethics, are implemented to assist Coworkers working in Ita Wegman Association programs to competently perform the functions and services they undertake on behalf of Companions, family representatives, advocates, and community stakeholders supported by The Ita Wegman Association. The Code of Ethics will not supersede or negate any contracted agreement currently signed with the Ita Wegman Association and will act as a guideline for all Coworkers to follow. In addition, every Coworker will be expected to sign off on reading, understanding, and committing to adhering to the Code of Ethics as part of completing their orientation.

POLICY

Based on our mission, philosophy, and guiding principles, The Ita Wegman Association has adopted statements of ethics to be upheld by all Coworkers. *The Code of Ethics* is meant to clarify our mission, values, and principles and link them with standards of professional conduct. *The Code of Ethics* is also a tool to promote the discussion of ethics and to improve how Coworkers deal with allegations, ethical dilemmas, prejudices, and gray areas that are encountered in everyday work. *The Code of Ethics* is meant to supplement relevant standards, policies, and rules, and is not meant to be a substitute for them.

Upon hire or contract start date, a Coworker receives a copy of the Ita Wegman Association's "Code of Ethics" from their direct supervisor, Facility Manager, or designate. The Coworker is required to read the document and sign the "Code of Ethics", thereby agreeing to abide by the Ita Wegman Association's "Code of Ethics". The signed "Code of Ethics" is noted in the Coworker's personnel file.

All Coworkers have a duty to report, verbally or in writing, promptly and confidentially, any evidence of any improper practice of which they are aware. As used here, the term "improper practice" means any illegal, fraudulent, dishonest, negligent, abusive, or otherwise unethical action arising in connection with The Ita Wegman Association operations, supports, or activities.

Reports of improper practice should be submitted through the Executive Group. The line of communication to be followed is outlined in the Ita Wegman Association's Organization Policies section – **OP7 Organization and Leadership Structure** and **OP8 Organization and Leadership Flow Chart.**

Adherence and Accountability

- All Coworkers must read, be cognizant of, and sign the Ita Wegman Association *Code of Ethics* policy during their initial orientation process and annually thereafter.
- All Coworkers must adhere to and model appropriate behaviour in accordance with this Code. Failure to fulfill the obligations of this Code may result in corrective action.
- Allegations or violations, including but not limited to fraud, waste, abuse, or any other wrongdoings, are investigated within 48 hours of occurrence and in a transparent manner.
- Alleged violators will be given notice that there is an investigation, and they will be asked to participate in the process.
- Written reports of alleged violations are directed to the Executive Group within 48 hours of the occurrence.
- Response to allegations or violations that involve an investigation by the Executive Group or designee will be provided within 72 hours of allegation disclosure. Findings will be prepared and presented in writing to the Executive Group for follow-up and final resolution if required.
- All financial practices and program activities of the Ita Wegman Association will follow provincially and federally accepted accounting and auditing standards.
- All Business and marketing practices of the Ita Wegman Association will adhere to provincial and federal licensing regulations.
- All human resource practices and activities of the Ita Wegman Association will adhere to provincial and federal labour standards and regulations.
- The Executive Group and Board of Directors review the Code of Ethics each year to support quality improvement efforts.

Reprisal

- There will be no reprisal against any Coworkers, Companions, family representatives, or advocates who report a breach of the Code, including those of waste, fraud, abuse, and any other questionable activities, practices, or wrongdoings.

- The IWA encourages all Coworkers to report incidents in which they have been made to feel uncomfortable or unsafe. Coworkers can report to their direct supervisor, their Coworker support person, or a member of the HRR Group.
- Depending upon the nature of the allegation, government officials may be involved and could run a parallel investigation.

Subpoenas, Search Warrants, and Other Legal Action

- Should government officials utilize subpoenas, search warrants, or other legal action, all Coworkers are expected to comply with requests.
- Coworkers must respond to subpoenas, search warrants, or other legal requests related to their work with the Ita Wegman Association.
- Coworkers must immediately (within 24 hours of notification) inform (verbally and/or in writing) the Executive Group of any subpoenas, search warrants, or other legal requests for direction and support.
- The Executive and Core Group will assist Coworkers by providing information regarding pre-trial discussions with a lawyer; court appearance – deportment, being prepared and being on time, bringing all required notes and documents, and information on testifying in court.

Use Of Social Media

- Coworkers will adhere to all policies and procedures related to the use of social media.
- Failure to ensure the safety and security of Ita Wegman Association business practices and confidentiality and privacy by not following identified social media policies and procedures will result in corrective action, including termination, depending on the severity of infractions demonstrated

All Coworkers shall comply with the following Code of Ethics and shall acknowledge, in writing, that they have an understanding of this expectation. A breach in The Code of Ethics (the "Code") will result in corrective action being taken and may include dismissal. All breaches of the Code of Ethics will be included in the Leadership Team's annual review of the Code of Ethics.

1. Coworkers, unless otherwise directed by the courts (such as working with persons who have court orders), will deliver support in accordance with the Companion Rights, which include:

- The informed consent and voluntary participation of the persons supported in decisions about support, care, and/or treatment.
- The right of persons to refuse participation in support, clinical studies, or another research.
- May be socially or personally non-productive, privacy and confidentiality protections for the persons served.
- Means of ensuring the integrity of decisions made about care and that they are based solely on the diagnostic and treatment needs of the individual.
- Means of monitoring the relationship between the use of support and financial arrangements.
- Means of resolving differences concerning care and/or treatment decisions.
- Right to file grievances in accordance with prescribed procedures.
- Non-punitive use of discipline and behavior management techniques.
- Using positive programming as the primary means to encourage changes in behaviour.

2. Coworkers will ensure Companions' personal property is held safe, secure, and private. Companions will be permitted to hold property that is not considered contraband or potentially harmful to themselves or others. Property will be inventoried at intake to assist in limiting any mishandling or theft. Companions can request secure storage to keep personal property safe, secure, and private. For these instances, the Ita Wegman Association will keep items secured in a locked setting until the Companion desires to have the items back again. Companions will have the right to access personal property in accordance with the Code of Ethics and Companion Rights policy and procedure.

3. Coworkers will not act as a witnessing agent for any Companion. The Companion or legal representative must manage all witnessing responsibilities. An exception may be granted

if a written request is received from a Companion or legal representative to the Executive Director, Quality Assurance Coordinator, or Facility Manager seeking permission for a contractor/Coworker of the Ita Wegman Association to act as a witnessing agent. The request must clearly define the scope, responsibility, and role a contractor or Coworker will fill, and state that the Ita Wegman Association and its representative will not be held liable. All requests will receive written notification of approval or refusal by the Executive Director and/or designate within 48 hours of the request receipt.

4. Coworkers will ensure all information given/provided to a Companion is accurate and of the truth. No Coworker will mislead, distort, tell half-truths, or provide false information at any time to a Companion.
Exceptions may occur based on information provided in the Companion's Individual Support Plan or Behavioural Support Plan.

5. Coworkers will not accept monetary gifts or compensation from a Companion or Companion representative at any point in time for support provided in relation to program activity completed through the Ita Wegman Association.

6. Coworkers will not barter with or accept gifts, favours, or other benefits directly connected with their position – unless presented as a matter of protocol, social obligation, cultural tradition, or the gift holds no monetary value. Such gifts, favours, and gratuities must be given without expectation and undue favour.

7. Coworkers will not conduct any personal fundraising activities on behalf of the Ita Wegman Association.

8. Coworkers will treat one another and all persons supported by the Ita Wegman Association in such a way as to preserve their dignity and communicate respect and fairness, i.e., providing information in a truthful, empathic, compassionate, understandable and sensitive way; being aware of individual's needs, gifts, strengths, potentials, interests, and values; applying appropriate, unbiased, consistent and equitable principles to the circumstances.

9. Maintaining professional interactions and communications, where interactions and communications are not personal in nature, do not reflect a personal opinion / perception or language used could be considered as offensive, judgmental, derogatory, discriminative, insensitive etc. with all Companions, Companion representatives, fellow Coworkers, community stakeholders etc.

10. Maintaining a courteous atmosphere for Companions and Coworkers at all locations supported by the Ita Wegman Association;

11. Strive to be courteous, friendly and cooperative;

12. Showing respect and compassion for Coworkers and Companions and their representatives;

13. Coworkers will engage with the stakeholders of the Ita Wegman Association in accordance with the Canadian Charter of Rights and Freedoms as it relates to the individual's race, ethnicity, language, religion, marital status, gender, sexual orientation, age, disabilities, economic status, political affiliation, or national ancestry.

14. Coworkers will protect the confidentiality of all information, records, and material acquired professionally or otherwise through their contract with the Ita Wegman Association by understanding and adhering to the Ita Wegman Association Confidentiality Policy, the Federal Privacy Act, the Freedom of Information and Protection of Privacy Act, and any other relevant government acts and regulations, specifically CLBC and Island Health.

15. Coworkers are prohibited from behaving in ways that pose a real or perceived conflict of interest during their contract with the Ita Wegman Association.

16. Coworkers will provide support using an inclusive, collaborative approach with other family and community resources available and/or necessary to the Companion. This approach also recognizes that Coworkers may have limitations in some issues, and when they do not possess the necessary expertise to address a particular issue, they will consult with or refer to an appropriate professional.

17. Coworkers will clearly understand and respect the differences between professional and personal relationships with Companions and will behave in ways appropriate to these differences, including no intimate or sexual relationships with Companions both during and outside of work hours while working with the Ita Wegman Association.

18. While friendly and professional relationships between Coworkers and Companions are acceptable and indeed expected, Coworkers are prohibited from participating in or initiating any intimate or sexual relationships with a Companion at any time, while employed or volunteering with The Ita Wegman Association.

19. The Ita Wegman Association expects that any intimate or sexual relationships between Coworkers does not impact the Coworker’s duties and responsibilities.

20. Glenora Farm does not encourage relationships between long-term and short-term Coworkers due to the power and status differential. If you feel uncomfortable or need support navigating a relationship, Glenora Farm encourages Coworkers to reach out to their Support Person or a member of the HRR Group.

21. Coworkers will decline to act on behalf of Companions outside of the support mandate and will be consistently aware of managing their personal and professional boundaries in their interactions with Companions, stakeholders, and other Coworkers to avoid using undue or unhealthy influence, expert position, and/or inappropriate use of power.

22. Coworkers will promote and maintain ongoing quality improvement process approaches that continually develop their support delivery methods and knowledge, skills, education, and training relevant to their area of practice.

23. Coworkers will be responsive and open to the needs and requests of Companions through formal and informal means of input into program planning, support delivery, and advocacy.

24. Coworkers will perform support in a manner that promotes integrity and ethical decision-making with a focus on professional responsibility, not personal preference.

25. Coworkers are willing to accept complete accountability for their own acts and omissions, exhibiting self-discipline and the pursuit of best-practice standards in all activities.

26. Coworkers will participate and cooperate in expressing and resolving their own and others' grievance processes and outcomes.

27. Coworkers are prohibited from giving or receiving preferential treatment.

28. Coworkers will respect professional work or ideas created by others by giving full credit and citations when reproduced in any form.

29. Coworkers will inclusively adhere to the Code of Ethics of their respective professions and to the Ita Wegman Association Code of Ethics in all other areas.

I, _____ *(*print name) have read the Code of Ethics and am fully aware of the expectations associated with the Code of Ethics. I acknowledge that I am responsible for upholding the Code of Ethics while I am employed,

contracted, or volunteering with the Ita Wegman Association and beyond in matters that extend past my employment or contract.

Signature:		Date:	

OP16: INSURANCE COVERAGE

Associated standards 1.E.1 (a, b, c, d, e, f, g, h, I, j, k, l) and 1.G.2 a (1, 2), b, c (1, 2, 3)

POLICY

The Ita Wegman Association acknowledges the risk and necessity for insurance coverage in the operations and activities of the Ita Wegman Association. The purpose of this policy is to ensure that The Ita Wegman Association, its Directors, Coworkers, and Companions are protected against liability in the event of theft, damage to property, or liability suit, and outlines the insurance coverage in effect with The Ita Wegman Association.

PROCEDURE

The Executive Director will ensure The Ita Wegman Association is insured to cover all activities, which are not covered by provincial insurance programs. The Executive Director will receive and review a written description of the agency's insurance coverage annually. The insurance broker must be notified of any "additional insured" principles or properties in advance of their inclusion. This includes coverage for special fundraising events that involve public participation, rental of facilities, or leased equipment utilized by the Ita Wegman Association.

The following is a summary of the insurance coverage in place as of December 5, 2014. The coverage and related limits can and do change regularly. For specifics on the coverage in place, confirm the policies in force with the Executive Director.

COMMERCIAL GENERAL LIABILITY INSURANCE POLICY

The General Liability Policy provides general liability coverage for the Ita Wegman Association. The policy names additional insured covered to include "any officer, director,

Coworker, Companion, or shareholder while acting on behalf of the Insured or any former officer, director, Coworker, Companion or shareholder with respect to acts performed on behalf of the Insured in that capacity “while performing any duty which is considered regular or extraordinary studies or recreational activities connected with the Named Insured."

PROPERTY INSURANCE POLICY

The Property Insurance policy provides coverage for all the Ita Wegman Association-owned assets at their replacement cost. The policy only covers the Ita Wegman Association-owned assets and unknown assets of other entities, which are placed in the care and control of the Ita Wegman Association. The policy does not cover personal possessions of Coworkers or Companions. In addition, the property policy does not provide coverage for "mysterious disappearance." There must be evidence of theft, break-in, or similar proof of the loss before the policy applies.

This policy has a very large deductible and therefore only comes into effect in the event of major losses. The policy includes coverage at any rented premises that the Ita Wegman Association utilizes.

VEHICLE INSURANCE

The Ita Wegman Association maintains insurance on all The Ita Wegman Association vehicles that includes, but is not limited to: collision, theft, and one-million-dollar liability (at a minimum).

THIRD PARTY LEGAL LIABILITY

The Ita Wegman Association carries an insurance policy, which provides liability coverage for all licensed Coworkers using Ita Wegman Association vehicles, which covers incidents when a Coworker injures someone else or damages their property in a motor vehicle crash and is held legally responsible.

CLAIMS

In the event of any incidents involving bodily injury and/or property damage to a third party, an incident report is to be completed immediately and forwarded to the Executive Director. All appropriate insurance claims will be dealt with in an expeditious manner.

EXCLUSIONS

The Ita Wegman Association will not assume responsibility or provide remuneration for the following:

- Injuries from activities not related to the Ita Wegman Association activities.
- Claims insured by other valid insurance.

Responsibility of: Executive Director

Monitored by: Executive Group, Board of Directors

OP17: LEGAL REQUIREMENTS

Associated standard 1.E.1 (a, b, c, d, e, f, g, h, I, j, k, l)

POLICY

The Ita Wegman Association will adhere to all municipal, provincial, and federal legal requirements, reviewing all legal and insurance regulations/needs every year to remain current on any changes, additions, or updates. In addition, the Ita Wegman Association ensures that Coworkers, the Executive Group, and the Board of Directors are provided with consultation with legal counsel when necessary.

PURPOSE

To ensure the Ita Wegman Association follows appropriate statutes and regulations and limits any liability related to legal agreements and formal proceedings. The HRR Group, Executive Group, and Board of Directors are responsible for upholding all legal requirements and assessing/implementing a risk management plan/process. This includes taking appropriate steps to anticipate and minimize the impact of identifiable legal risks.

PROCEDURE

The Executive Director will ensure that legal counsel is retained and available to provide legal advice as necessary.

The Executive Group, HRR Group, and Board of Directors will, when necessary or appropriate, consult legal counsel before any of the following:

- Beginning corrective action regarding Coworker.
- Entering into a contractual arrangement;
- Responding to requests from courts, public offices, investigative units, law enforcement bodies, or others for special or unusual information about an individual or family;
- Disclosing any Companion information to the media;
- To clarify interpretations of laws or regulations governing The Ita Wegman Association;
- To make changes to the Ita Wegman Association Constitution and Bylaws.

Responsibility of: Executive Director

Monitored by: The Executive Group, HRR Group, and Board of Directors

OP18: SOCIAL MEDIA AND MEDIA RELATIONS

Associated standard 1.G.3 (a, b)

POLICY

The Ita Wegman Association ensures all information and correspondence regarding the Ita Wegman Association Coworkers and Companions supported are kept safe, secure, and confidential. No information, photographs, etc., regarding The Ita Wegman Association Coworkers or Companions shall be released or shared publicly without a signed Media Release Form.

Media Relations - All media inquiries and/or requests are managed and monitored by the Quality Assurance Coordinator, and/or Facility Manager, and/or the Administration and Development Coordinator. Please note that all information about the Ita Wegman Association, work completed by Coworkers, any information regarding Companions (current and past) and

their families, or statements or information released to the media must protect the confidentiality and privacy of Companions and/or Coworkers.

Official Social Media Accounts - The official Ita Wegman Association social media accounts (typically under the name of "Glenora Farm") are to be monitored and managed by either the Facility Manager, Administration and Development Assistant, or a designate. For clarity, social media includes but is not limited to: Facebook, Twitter, Instagram, blogs, or message boards, etc., which are all used for the purposes of sharing, collecting, or posting information.

Personal Social Media Accounts - Due to the "family-like" atmosphere within our residences at The Ita Wegman Association, Coworkers and Companions are permitted to link their social media accounts and communicate via these platforms. However, Coworkers are strongly encouraged not to initiate private messages on these platforms and to save all private correspondence with Companions within the app. The Ita Wegman Association prohibits Coworkers and Companions from communicating with each other using "Snapchat" or similar apps, which automatically delete messages.

PROCEDURES

- All media requests, including requests for interviews, information, articles, pictures, or tours, must be directed through the Quality Assurance Coordinator, Facility Manager, or Executive Director.
- The Quality Assurance Coordinator, Facility Manager, or Executive Director may respond directly or assign the most appropriate person to respond to a media request.
- Coworkers must immediately notify the Quality Assurance Coordinator, Facility Manager, or Executive Director of any situation in which a Companion or a Companion's representative contacts or plans to contact the media about a circumstance related to The Ita Wegman Association. If a Coworker or such is notified first, they must notify the Quality Assurance Coordinator, Facility Manager, or Executive Director immediately.
- Publication or distribution of photographs, audio-visual material, or information that identifies or provides personal information about any Companion or Coworker is not permitted unless prior written consent is obtained via the signing of the Media Release Form. This includes any information shared via Facebook, Twitter, Instagram, blogs, or message boards, etc.

- Any statements or information released to the media must protect the confidentiality and privacy of all Companions and Coworkers of The Ita Wegman Association.
- Any statements or information released to the media or posted via social media must protect the integrity and effectiveness of The Ita Wegman Association and the program support provided.
- Information shared with the media or posted via social media without permission from the Companion or Coworker concerned will result in corrective action.
- All social media requests must be directed and approved by the Quality Assurance Coordinator, Facility Manager, Executive Director, Administration and Development Assistant, or designate.
- Please note: All communication and information sharing related to The Ita Wegman Association through the use of social media tools/platforms must be controlled and managed by the Quality Assurance Coordinator, Facility Manager, or Executive Director, Administration and Development Assistant, or designate to ensure Companion / Coworker confidentiality and privacy.

Responsibility of: All Coworkers

Monitored by: Quality Assurance Coordinator, Facility Manager, and Executive Director

OP19: QUALITY ASSURANCE EVALUATION SYSTEM

Associated standard 1.I.2 (a, b, c, d, e, f) and 1.L. 2 a (1, 2, 3), b, c, d, e, f, g

DESCRIPTION

The Executive Group, or designate, applies the Quality Assurance Evaluation Cycle to all Ita Wegman Association business functioning, outcome objectives, Companion support methods, and overall activities.

1. **Prepare**
   - prepare surveys
   - outcome objectives
   - select samples
2. **Collect Data**
   - program outcomes
   - evaluations
   - Coworker/ Companion/ Stakeholder feedback
   - follow up
3. **Analyze Data**
   - conduct data analysis
   - status reports on plans
4. **Share Results**
   - results to the Executive Group, the Board of Directors, all Coworkers, and Stakeholders
5. **Review and recommend**
   - Coworkers and the Executive Group review and analyze results
   - make recommendations
6. **Update Plans**
   - Executive Group and Accreditation Group updates strategic plan
   - Executive Group sets actions for the quality improvement plan
7. **Approve Plans**
   - updated plans are approved by the Board of Directors, and the Executive Group
8. **Implement Changes**
   - Changes are implemented at the organizational, residential, and day program level

PROGRAMS SEEKING ACCREDITATION

COMMUNITY LIVING PROGRAM/RESIDENTIAL PROGRAM

Community Living Program provides a long-term residential placement where adults with diverse abilities (Companions) live, work, and learn together with Coworkers. Our primary

objective is to allow the potential in each Companion to unfold and to be in harmonious relationship with the environment.
The Ita Wegman Association is committed to providing a balanced lifestyle in a safe and secure environment that allows for personal growth and satisfaction.

DAY PROGRAM/COMMUNITY INCLUSION

The Ita Wegman Association Day Program is committed to providing adults with diverse abilities the support they need, with a priority placed on producing meaningful artisan craft products, stability, safety, and positive community relationships.

OBJECTIVES

- Companions will have continued or increased access to integrated support through the program(s).
- Companions will be fully involved in the shaping of their lives and the process of developing necessary support and care.
- Companions will be assisted in exploring and accessing community programs, resources, and networks.
- Companions will be supported to have positive and healthy relationships and interactions within the community.
- Companions will work in safe and appropriate situations.
- Companions to reside in safe and appropriate living situations
- Companions will be assisted in building their independence and self-esteem, as well as improving their social skills and their ability to speak for themselves.

Responsibility of: Quality Assurance Coordinator, Facility Manager

Monitored by: Accreditation Group and Executive Group

OP20: FEEDBACK

Associated standards 1.D.1 (a, b (1, 2, 3), c and 2.E.4 (a, b)

POLICY

The Ita Wegman Association will collect feedback on an ongoing basis from Companions, Coworkers, and stakeholders to support quality assurance and performance improvement efforts. In this regard, feedback will be sought by the Ita Wegman Association at regular intervals but not demanded or enforced upon to provide. All Companions, Coworkers, and stakeholders interested in providing feedback will have the choice to do such anonymously or non-anonymously.

No reprisal shall be inflicted upon any person providing feedback, regardless of its content. At every point, the Ita Wegman Association will make efforts to respond to feedback promptly and implement suggestions or ideas whenever possible.

Responsibility of: All Coworkers

Monitored by: Quality Assurance Coordinator, Facility Manager

OP21: DATA RELIABILITY, VALIDITY, COMPLETENESS, ACCURACY

Associated standard 1.L. 2 a (1, 2, 3), b, c, d, e, f, g

POLICY

The Ita Wegman Association collects data that is reliable, valid, complete, and accurate from a variety of source points i.e., training records, file reviews, annual reporting, etc., regularly to support factual decision-making models, outcomes management, and quality assurance efforts. We capture a great deal of data through our training and information collection/ management systems which monitor, collect, review and evaluates data to capture trends, gaps, support delivery needs, areas of strength and areas requiring action via outcome and performance improvement management processes i.e. examining established objectives, indicators, goals, time frames, identified outcomes, accuracy rates and completeness of reporting or data collected.

PROCESS

RELIABILITY - Ongoing training on documentation, recording, and measurement systems to capture data consistently and reliably.

VALIDITY - Collection of input from reporting and documentation requirements includes indicators, objectives, and goals to meet established outcomes and measure movement.

COMPLETENESS - Regular reviews take place to ensure documentation and reporting are complete and accurate. Accreditation and Executive Group oversight re: cross-checking files, reporting, and documents occurs, and action planning is implemented when issues are detected.

ACCURACY - Regular reviews take place to ensure documentation and reporting are complete and accurate. Accreditation and Executive Group oversight re: cross-checking files, reporting, and documents occurs, and action planning is implemented when issues are detected.

Information collected is used to measure program effectiveness and efficiency, addressing shortfalls/gaps, areas of strength/challenge, and what is required to support program goal and outcome attainment.

Responsibility of: All Coworkers

Monitored by: Quality Assurance Coordinator, Facility Manager, Executive Director, Accreditation Group, and Executive Group

OP22: ELECTRONIC PRIVACY

Associated standard 1.C.1 a (1, 2, 3, 4, 5, 6), b (1, 2, 3), and 1.G.4 (a, b, c, d (1, 2, 3, 4, 5, 6, 7)

POLICY

To support confidentiality and privacy regulations, any and all electronic communications must include the following disclaimer at the bottom of transmissions, i.e., e-mail signatures.

NOTE: This e-mail, including any attachments, may contain information that is privileged, confidential, and exempt from disclosure under applicable law, and its transmission is not a

waiver of that privilege. It is intended for the sole use of the person or entity to whom it is addressed. Any copying, disclosure, distribution, or reliance on this material by anyone other than the intended recipient is strictly prohibited. We assume no responsibility for persons other than the intended recipient. If you have received this transmission in error, please notify the sender immediately by reply e-mail, destroy any hard copies you may have printed, and remove all electronic copies from your hard drive, network, or any other location where electronic information is stored.

All Ita Wegman Association Coworkers will be given an Association e-mail that will include the Coworker's job title, phone number, etc., and the disclaimer listed above on each account. *Note: this does not apply to personal email addresses, only official IWA email accounts.

Responsibility of: Executive Director

Monitored by: Executive Group

OP23: ELECTRONIC DEVICE USE

Associated standard 1.C.1 a (1, 2, 3, 4, 5, 6), b (1, 2, 3) and 1.G.4 (a, b, c, d (1, 2, 3, 4, 5, 6, 7)

POLICY

The Ita Wegman Association is mindful of the use of electronic devices. To ensure program continuity and adherence to privacy/confidentiality regulations, there are two settings where the use of electronics (cell phones, laptops, tablets, headphones, etc) is not encouraged and requires approval:

1. During workshop time
2. While performing support and personal care duties (bathing, settling, etc.)

The use of an electronic device during programming time will only be considered when: all confidentiality/privacy laws can be followed, showing a video or movie for entertainment

and/or educational purposes, providing music for dancing, educating small groups, recipe finding, calculating measurements, and answering specific questions that arise.

Companions and Coworkers will be expected to refrain from using any social media platform during the workshop and personal care duties.

Responsibility of: All Coworkers

Monitored by: House Managers, Workshop Leaders

OP24: INVESTIGATION, CONFIDENTIALITY, AND NON-BIAS DECLARATION

Associated standard 1.I.5 a (1, 2, 3, 4, 5, 6, 7, 8), b, c, d, e

I (print name) in the role of (print role) will adhere to all provincial/federal confidentiality and privacy regulations, as well as all Ita Wegman Association confidentiality policies and procedures. I will ensure the investigation is conducted from an objective, impartial approach, avoiding any prejudice. A thorough examination of all facts and circumstances will be conducted promptly. Information shared and collected will only pertain to the investigation at hand and remain confidential at all times. My focus will be to maintain the legal rights of all parties involved. I will provide a written report identifying the findings, recommendations, and any corrective action required within 5 business days once all interviews and the collection of information have been completed. I will present findings individually to each party involved in the investigation.

Signature

_____

Date

The Ita Wegman Association
of British Columbia

_____

Responsibility of: House Managers, Facility Manager, Quality Assurance Coordinator, Executive Director

Monitored by: Executive Group, HRR Group, and Board of Directors

OP25: RISK MANAGEMENT

Standard associated 1.G.1 a (1, 2, 3, 4, 5, 6, 7) b (1, 2)

POLICY

The Ita Wegman Association must develop a risk management plan and, on an annual basis, review all risks and potential risks to Companions, Coworkers, and the public related to the working and support delivery environment. The Ita Wegman Association follows and adopts best practice in the identification, evaluation, and control of risks to ensure, as far as reasonably possible, that risks are managed or reduced to an acceptable level. The Association accepts that risks exist and can never be eliminated.

The Association must provide sufficient information through orientation and training to enable all Coworkers to be aware of the nature of risk and liabilities of contracting with or gaining employment, or volunteering with the Ita Wegman Association (including policies on abuse) and the types of risk associated with their area of work.

The Association provides insurance coverage that fully protects its assets, including Coworkers, Companions, and visitors, as well as day-to-day business activities. A “no reprisal” system is in effect for Coworkers to use in reporting waste, fraud, abuse, or any other questionable activities and practices.

DEFINITIONS

Hazard: A source of potential harm, or a situation with potential for causing harm (e.g., injury, illness, loss of /or damage to health, property, the environment, or some combination of these).

Risk: The chance of harm, injury, loss of/or damage to health, property, the environment, or other things of value.

Risk Management: The systematic application of management policies, procedures, and practices to the task of analyzing, evaluating, controlling, and communicating about risk issues.

In addition to the procedures outlined in the Risk Management Policy, there are several other measures taken to ensure a safe and sustainable environment for Companions, Coworkers, and visitors. This plan outlines these practices.

Risk Controls: Risk controls fall into the following categories: elimination of the hazards, substitution of the hazard for something less hazardous, isolation of the hazard, engineering controls (e.g. equipment design, mechanical, vehicle maintenance, alarm system), administrative controls (guidelines, policies and procedures, training requirements, work safe practices, standards, inspections) and personal protection controls (equipment, universal precautions, safety plans).

PROCEDURES

- The Executive Director discusses the insurance requirements of the Association with its insurance carrier on an annual basis to ensure that the Association's general liability insurance coverage is sufficient to adequately protect coworkers and all other assets of the Ita Wegman Association. Furthermore, the Association's comprehensive insurance policy shall also be reviewed and evaluated within the same time frame.
- At a minimum, the comprehensive insurance policy includes the following:

1. Third-party liability coverage
2. Property insurance
3. Coworker liability coverage as required (CLBC Master Policy)
4. Adequate coverage to recover losses resulting from errors of commission or omission

- Risk management is integrated into the culture of the organization through examination and review of current situations and circumstances and developing ongoing and relevant responses to risk management at house meetings, Care Group meetings, Executive

Group, and Board meetings. Signed documentation that Coworkers have been oriented to and have read the policy on risk (especially policies on abuse) is retained in the personnel file.

- On an annual basis, the Risk Management Plan is reviewed by the Care Group, Accreditation Group, and Executive Group, and Board of Directors to evaluate risks identified and the effectiveness of planning and strategies developed to address and risks. Risks and the effectiveness of control measures are monitored to ensure that changing circumstances do not alter risk priorities, as few risks remain static.
- Any planned activity that is not normally part of the Association's regular activities and that has a risk component must be reported to The Ita Wegman Association no less than 10 working days before the commencement of the event.
- All incidents, property loss, injury, and potential third-party incidents must be reported to the Ita Wegman Association using the Critical Incident form, or as appropriate timeline on the database (then appearing on the internal incident report).
- Personal losses to both the individual and the Association shall be reduced by administration through the provision of Coworkers' claims process, training, education, and other types of personnel insurance coverage (benefits).
- Under no circumstances may an unauthorized individual initiate a claim or agree to a settlement or an action on behalf of the Association.

REPORTING QUESTIONABLE ACTIVITIES

The "no reprisal" system for Companions and/or Coworkers in reporting waste, fraud, abuse, and other questionable activities and practices is as follows:

- Allegations of wrongdoing are to be submitted in writing or verbally by the Companion or Coworker to the Facility Manager, Quality Assurance Coordinator, or Executive Director, who will forward it to the Executive Group or Board of Directors. Should the Facility Manager, Quality Assurance Coordinator, or Executive Director be involved in the allegation, the matter is to be brought directly to the attention of the HRR Group, Executive Group, or Board of Directors.
- The Facility Manager, Quality Assurance Coordinator, or Executive Director, with the support of the Executive Group and Board of Directors, completes and documents the

investigation of the alleged wrongdoing and manages all investigations fairly and consistently.

- Coworkers and /or Companions involved in an investigation are given access to external advocacy referrals in the event they desire public representation.

Responsibility of: Facility Manager, Quality Assurance Coordinator, or Executive Director

Monitored by: Executive Group, HRR Group, and Board of Directors

OP26: INVESTIGATION PROCEDURES

Associated standard 1.I.5 a (1, 2, 3, 4, 5, 6, 7, 8), b, c, d, e

POLICY

The Ita Wegman Association will conduct an investigation of a complaint, allegation, or grievance identified to any Coworkers. Coworkers will review, understand, and sign ***OP 24 Investigation, Confidentiality, and Non-Bias Declaration*** before engaging in an investigation. Investigations will be managed promptly, with a preliminary report completed within 48 hours and a final report within 30 working business days. The Ita Wegman Association is committed to ensuring the safety and security of all Ita Wegman Association Companions and Coworkers, and as such, where warranted, will forward a complaint, allegation, or grievance and investigation reporting to WorkSafe BC as per provincial law on workplace safety.

PROCEDURES

1. How and when investigations will be conducted

Most investigations at the Ita Wegman Association will be conducted internally. In complex or sensitive situations, an external investigator might be hired.

Investigations will:

- Be undertaken promptly (promptly) and diligently, and be as thorough as necessary, given the circumstances

- Be fair and impartial, providing both the complainant and respondent equal treatment in evaluating the allegations
- Be sensitive to the interests of all parties involved, and maintain confidentiality
- Be focused on finding facts and evidence, including interviews of the complainant, respondent, and any witnesses
- Incorporate, where appropriate, any need or request from the complainant or respondent for assistance during the investigation process

2. What is included

Investigations will include interviews with the alleged target, the alleged perpetrator, and any witnesses. If the alleged target and the alleged perpetrator agree on what happened, then the Ita Wegman Association will not investigate any further and determine what corrective action to take, if necessary. The investigator will also review any evidence, such as emails, handwritten notes, photographs, or physical evidence like vandalized objects.

3. Roles and responsibilities

The Facility Manager, Quality Assurance Coordinator, and Executive Director, with support of the HRR Group and Executive Group, are responsible for ensuring workplace investigation procedures are followed.

Coworkers are expected to cooperate with investigators and provide any details of incidents they have experienced or witnessed. This includes participating in requested interviews or any follow-up meetings. The Ita Wegman Association will make every effort to coordinate interview and meeting times in consultation with identified individuals; however, there may be times when this is not possible. In these situations, the Ita Wegman Association will make every effort to meet with individuals during working hours. In addition, although the Ita Wegman Association supports the use of advocates, investigation interview and meeting dates and times will not be set based on an advocate's schedule. The choice to utilize an advocate is just that, a choice, and individuals employing advocate support will be expected to ensure their advocates can attend scheduled interviews and meeting times. No interview or meeting will be altered because an advocate had to cancel. Individuals are expected to have a plan in place in case such a scenario occurs.

The Facility Manager, Quality Assurance Coordinator, and Executive Director will conduct investigations and provide a written report with conclusions to the HRR Group, Executive Group, and Board of Directors. If the Facility Manager, Quality Assurance Coordinator, or Executive Director is involved in the incident, the HRR Group, Executive Group, or Board of Directors will conduct the investigation.

In complex or sensitive situations where the Facility Manager, Quality Assurance Coordinator, or Executive Director determines an external investigator should be hired to conduct the investigation, he/she will provide a written report with conclusions, findings, recommendations, and corrective action required (if necessary) to the HRR Group, Executive Group, and Board of Directors or designate as required.

4. Follow-up

The complainant and other parties involved in the investigation will be advised of the investigation findings by either the Facility Manager, Quality Assurance Coordinator, Executive Director, or designate. If the investigation involves the Facility Manager, Quality Assurance Coordinator, or Executive Director, a member of the Executive Group will advise the complainant and all other parties involved in the investigation of the findings, recommendations, and corrective action identified.

Following an investigation, the Facility Manager, Quality Assurance Coordinator, and Executive Director will review and revise workplace policies and procedures to prevent any incidents in the workplace. Appropriate corrective actions will be taken within a reasonable time frame.

5. Record-keeping requirements

The Ita Wegman Association expects that Coworkers will keep written accounts of incidents to submit with any complaints. The Ita Wegman Association will keep a written record of investigations, including the findings.

6. Annual review

These procedures will be reviewed annually. All Coworkers will be provided with a review of The Ita Wegman Association's policy and procedures as soon as they are hired, and copies will be available at multiple locations on site and on the Ita Wegman Association's website under Policy and Procedures Handbook.

The Ita Wegman Association
of British Columbia

Responsibility of: All Coworkers

Monitored by: Facility Manager, Quality Assurance Coordinator, and Executive Director, HRR Group, Executive Group, Board of Directors

OP27: FUNDRAISING

Associated standard 1.A.9 a (1, 2 (a, b, c, d), 3, 4, 5, 6, b (1, 2)

POLICY

The Ita Wegman Association of BC is a registered charity and will maintain its status as a registered charity in British Columbia. Should the Ita Wegman Association's charitable status be revoked, charitable tax receipts will cease to be issued.

The Ita Wegman Association (Glenora Farm) will adhere to ethical fundraising practices to ensure:

1) All fundraising meets recognized standards and requirements of the Canada Revenue Agency,

2) All monies generated are raised in support solely to meet operational and program needs, as well as specifically outlined capital projects of Glenora Farm and

3) Current and prospective donors have full confidence in Ita Wegman Association fundraising practices. The Ita Wegman Association will comply with our donor recognition policy.

4) Donor solicitation occurs no more than 12 times per year. Solicitations are only shared with those who have signed up for Glenora Farm's mailing list or those who are present at Glenora Farm events. People supported will not be solicited for donations; however, they have the right to donate to Glenora Farm.

5) Glenora Farm Coworkers responsible for fundraising will confirm with donors if they would like to be identified by name in our annual reports. Requests for confidentiality and anonymity will be respected within the scope of applicable laws, such as the Canada Revenue Agency, PIPEDA, etc.

PROCEDURE

The Executive Group, in consultation with the Board of Directors, will:

1) Provide oversight and direction regarding all fundraising projects,

2) Annually review the cost-effectiveness of fundraising projects,

3) Ensure all persons hired to fundraise, volunteers, third-party fundraising projects, or businesses contracted to fundraise on behalf of the Association follow the Ethical Fundraising and Financial Accountability Code.

The Executive Director will ensure:

1) Official tax receipts for income tax purposes are sent promptly to all donors for the amount of their donation,

2) All restricted or designated donations are used only for the purposes for which they were given,

3) All non-cash (ie, gift in kind) donations under $1,000.00 are valued through fair-market appraisal by a Glenora Farm Coworker, or another individual with sufficient knowledge of the non-cash item. All non-cash (ie, gift-in-kind) donations over $1,000.00 are valued through a third party (someone not associated with the donor or the charity). Generally, this valuation is determined via invoices or through fair-market value. If the fair market value of the property is less than $1,000, a member of the registered charity, or another individual, with sufficient knowledge of the property, may determine its value. If the non-cash donation is appraised, the name and address of the appraiser must be included on the official donation tax receipt. Documentation of appraised values is retained in the Ita Wegman Association of BC confidential files.

4) Coworkers adhere to the Ethical Fundraising and Financial Accountability Code of the Canadian Center for Philanthropy.

5) Coworkers are trained regarding fundraising and donor recognition upon hire. Ongoing training is required should any changes be made to fundraising policies and procedures, a change in the scope of our fundraising efforts, or a change in the legal and regulatory requirements related to fundraising.

Fundraising violations will be taken seriously with immediate action taken, including but not limited to: completing an investigation, returning the donation/gift, disciplinary action, and contacting authorities.

The Ita Wegman Association
of British Columbia

Responsibility of: Executive Director, Human Resource and Development Coordinator

Monitored by: Executive Group and Board of Directors

OP28: DONOR STEWARDSHIP AND RECOGNITION

Associated standard 1.A.9 a (1, 2 (a, b, c, d), 3, 4, 5, 6, b (1, 2)

The gift recognition and stewardship policies of the Ita Wegman Association of BC for Curative Education and Social Therapy (Glenora Farm) reflect the following core values:

#1: Respectful Communications

Glenora Farm believes in a donor/community-centric approach to fundraising. What this means is that we see our grantors, sponsors, and donors as integral partners of Glenora Farm. We believe in respectful, transparent communication about impact and reject fundraising tactics involving escalating solicitation. We uphold the Donor Bill of Rights created by the Association

of Fundraising Professionals (AFP), the Association for Healthcare Philanthropy (AHP), Council for Advancement and Support of Education (CASE), and the Giving Institute.

The Donor Bill of Rights can be found here.

We may follow up on contributions with a brief donor survey. This survey enables us to collect the information we need to prepare your tax receipt, understand the intention behind your gift, and honour your wishes in regard to recognition and future communications. This survey allows us to identify important information like when supporters wish to remain anonymous, when donations are made in the name of others, and whether or not contributors would like to receive news and event invites from Glenora Farm.

#2: Focus on Impact

We understand that our donors give to Glenora Farm because they believe in our work and want to support the difference it makes to our people, our land, and broader communities. For this reason, we are committed to ensuring that your contributions are focused on programming and services rather than donor incentives* (*see #3).

#3: Equal Valuation

Glenora Farm is supported by a diverse network of individuals, families, groups, clubs, organizations, foundations, and businesses who give according to myriad unique circumstances. Therefore, we seek to celebrate every gift (including non-monetary support), whether large or small, as equally valuable to Glenora Farm. With this horizontal approach, we do not use "levels" to differentiate gifts. Instead, we acknowledge all contributions above $25 with the same core recognition practices.

Our core recognition practices (for gifts valued $25+) include:

- A thank you card and small (sustainable) gift.
- Acknowledgement via our website (supporter page), Facebook page, and annual report.

We also acknowledge that in some cases, additional recognition is appropriate (e.g., sponsorships, grants, special projects, donations in memoriam/the name of others). We are always happy to work with our supporters to celebrate your contribution within the limitations of our resources and the guidelines of the Canada Revenue Agency. Please contact us to discuss ideas and options for additional recognition.

Responsibility of: Executive Director, Human Resource and Development Coordinator

Monitored by: Executive Group, Board of Directors

OP29: BOARD OF DIRECTORS

Associated standard 1.A.1 a and b

POLICY

As a registered charity, The Ita Wegman Association is governed by a Board of Directors whose members do not receive compensation, and the Executive Director (ex officio).

Directors have a responsibility to ensure that a charity is operated in the public interest. They have a duty of diligence that requires them to be knowledgeable about the work of the charity and to ensure that the charity and its assets are properly cared for.

PROCEDURE

The Board of Directors shall be composed of responsible individuals,

- the majority of whom are Canadian residents
- who are not employees of the organization, or otherwise receive compensation from the organization, except as authorized by law.

The Board of Directors shall

- Hold at least two full-agenda meetings per year,
- Endorse policy for the organization,
- Maintain effective control over the organization, and
- Establish a proper financial reporting system that permits the production of annual operating statements and a balance sheet, showing reasonably detailed information that is factual and accurate in all material respects; identifies government grants and contributions separately from other contributions; and is prepared in accordance with generally accepted accounting principles established by the Canadian Institute of Chartered Accountants.
- Ensure that the organization at all times operates within the limits of, and in accordance with, the objects in its governing documents.
- Take its responsibility seriously to be conversant with and comply with federal, provincial, and municipal laws and regulations.
- Ensure that the organization is open and accurate in all its dealings.
- Not permit any officer, member of the Board of Directors, or staff member of the organization to receive royalties for the use of any property of such person that is used for fundraising or promotional purposes by the organization.

- Not permit the payment of service fees that are based on a percentage of funds raised or are based on another form of paying commissions.
- Ensure that the organization appropriately serves the interests of each contributor or potential contributor, and representatives of the organization make it clear that the concern of the organization when addressing a contributor or potential contributor is to nurture responsible stewardship on the part of the contributor.
- Avoid questionable motives or programs that are not factual or that negate the contributor's sound judgment.
- Require responsible stewardship on the part of our representatives through effective training and cost controls.
- Ensure that the organization, or its representative, does not, by any means, either directly or indirectly, induce a contributor or other constituent to transfer to it a benefit from any other organization or purpose.
- Ensure that all government-prescribed returns, such as the Registered Charity Information Return (T3010) and voluntarily produced reports, will be prepared factually, accurately, and on a timely basis.
- Ensure that sufficient funds will be spent on administration and fundraising (where appropriate) to assure effective and efficient management of our resources.
- Ensure that the organization meets or exceeds its disbursement requirements imposed by section 149.1 of the *Income Tax Act, Canada*.
- Review the cost-effectiveness of our programs and report thereon in our annual report.
- 3. A restricted contribution designated in support of a program or a single project that is approved by the Board will be used for the purpose for which it was given. We make our policy dealing with donor-designated funds known to all donors and potential donors by printing it on all fundraising material. To avoid being legally precluded from using designated funds at all if a project is oversubscribed or is terminated, the following policy is in place and is published:
- *Spending of funds is confined to programs and projects approved by the organization. Should a donor choose to restrict a contribution for use in a particular program or project, we will honor that restriction, with the understanding that, when the need for*

such a program or project has been met, or cannot be completed for any reason as determined by the organization, the remaining restricted contributions will be used where most needed.

- The board of Health Partners International of Canada has adopted the preceding Code as its policy. In so doing, the Board of Directors commits itself to being the responsible custodian of contributions received to pursue the organization's objectives, to exercise due care concerning the governance of fundraising and financial reporting, and to ensure, to the best of its ability, that the organization adheres to the provisions of the Code. It is hereby confirmed that each member of the Board of Directors and staff has received a copy of the Code and that a copy will also be provided to each person who is subsequently elected to the Board of Directors or appointed to the staff.

Responsibility of: Board of Directors
Monitored by: Executive Group

OP30: DONOR RECOGNITION - NAMING A FEATURE

Associated standard 1.A.9 a (1, 2 (a, b, c, d), 3, 4, 5, 6, b (1, 2)

POLICY

The Ita Wegman Association builds and nurtures relationships in the wider community to inspire philanthropic donations and partnership contributions. Significant donations to The Ita Wegman Association offer an opportunity to name an Ita Wegman Association feature in recognition of the donation.

PROCEDURE

1. **Purpose**
   To establish a formal approach for naming physical features.

2. **Scope**
   Physical features refer to all features owned or leased and operated by The Ita Wegman Association, including:

   - Building and other structures;
   - Parcels of land or gardens;
   - Building sites;
   - Facilities, facility features, and units such as levels, wings, rooms, and resource centers within buildings and structures;
   - Vehicles, equipment, or other tangible assets.

3. **Principles**
   The Ita Wegman Association may choose to recognize outstanding persons by naming a feature in their honor, but such recognition needs to be balanced with the Society's need to attract external funding.

The naming of The Ita Wegman Association features shall be based on the following principles:

- Support the fundraising activities of the Society;
- Enhance and maintain the Society's image and reputation in the wider community;
- Strengthen internal and external relationships and partnerships;
- Provide consistent, equitable, and appropriate naming opportunities to Society supporters;
- Align the naming commitments of Society features with the flexibility required for space resource allocation.

4. Naming Structure

Features will include both a functional and recognition naming component:

- **Functional identification naming**

A Society feature is named primarily as a means to help the community understand its functions and find its location. For this reason, the identification of the Society feature shall be evident in

its name.
For example: Rotary Boardroom or Smith Family Library.

- **Recognition naming**

A Society feature is named to acknowledge or honor the contribution of the donor, a member of the Ita Wegman Association community, or of the community at large. The honouree may be selected posthumously.

5. Roles and responsibilities

- **Board of Directors**

As the ultimate governing body for the Society, the Board of Directors is accountable to:

1. Review and, where appropriate, approve the naming of all Society features;
2. Provide direction, when requested, on naming issues of a unique or complex nature, or that may affect the integrity of the Society.

The Board of Directors retains its discretion to make exceptions to this policy, as appropriate to the circumstances.

- **Communications and Marketing**

The Communications and Marketing Designate is accountable to:

1. Evaluate naming, assess naming request recommendations against guiding principles, consult with affected bodies, and recommend potential names, as appropriate;
2. Maintain a master inventory of Society features with naming recognition opportunities;
3. Oversee the Society's graphic design standards;
4. Develop naming strategies for fundraising initiatives, including capital campaigns and/or sponsorships, consult with affected bodies, and present recognition naming strategies to the Board for approval, as appropriate.

6. Administration of recognition naming

- **Term lengths**

The length of the naming shall be for the length of the physical existence of the particular facility or feature identified in the agreement between the Society and the party concerned. When the feature is relocated, and the new space will serve the same original purpose, the name may also be relocated at the Society's discretion. An agreement or memorandum of understanding shall only apply as long as the named Society feature remains in the ownership or under the control of The Ita Wegman Association.

- **Changes and terminations**

The Board of Directors has the right to terminate the naming of a Society feature for the following reasons:

1. If a naming commitment is connected to a donor or contributor whose activities reflect negatively on the Society's public image or are in material conflict with the Society's mission and/or policies.
2. When a donor or contributor fails to fulfill their pledge commitment as specified in the written agreement or memorandum of understanding, and when an alternative pledge period has not been agreed upon.
3. Where the Society no longer has ownership or control of the features (for example, part of the facility is sold to a third party).
4. The feature is decommissioned due to age or obsolescence.

The Society respects the right of a donor or contributor to request that the Society remove a name, and in such cases, the request will be reviewed with the Board of Directors. The donor or contributor will assume 100% of the cost of any change they request to the signage. The Ita Wegman Association reserves the right to review, revise, or decline the proposed change.

If a Society feature is relocated within the same building or to a different building, provided that the new facility or room will serve the same original purpose, no approval is required under this policy to relocate the name. In such circumstances, the name may be relocated at the Society's discretion.

If a structure is demolished, or when its occupancy or usage changes, then the naming commitment related to this structure shall also cease. Where possible, the Ita Wegman

Association will inform the appropriate contact person of the usage change or the decision to demolish the facility.

- **Agreements**

Where a written agreement is signed between the donor or contributor and the Society, the terms of revocation, the length of time of naming, and the location of the feature named and its description will be included. In the absence of a written agreement, a copy of this policy will be given to the donor, contributor, or the parties concerned.

- **Design guidelines**

The design of the naming and recognition signage shall be consistent and shall reflect the branding and aesthetic of the Society. To maintain this consistency:

1. The Communications and Marketing Designate oversees the development and implementation of design guidelines for signage in keeping with the Society's graphic design standards.
2. The Communications and Marketing Designate determines the appropriate wording for recognition naming signage.

Responsibility of: Executive Director, Human resource and Development Coordinator

Monitored by: Executive Group and Board of Directors

OP31: COMMUNICATION LINES

Associated standard 1.I.2 (a, b, c, d, e, f) and 1.I.6 a, b, c (1, 2, 3), d (1 - a, b, c, d, e, f, g, h), 2 - I.M.4 a (1, 2, 3), b (1, 2, 3) and 2.A.6 a (1, 2, 3, 4), b

POLICY

Effective interpersonal communication has long been recognized as basic to any successful human enterprise. There is a strong desire on the part of our Coworkers and Contractors to play a key role in decisions affecting both their tasks and the Association. Coworkers and Contractors

want to improve the Association's overall effectiveness as well as accomplish their own responsibilities.

There is a need for an accurate, timely, and unfiltered flow of communications from within the Association that helps it effectively administer as well react to opportunities, challenges and change in a timely manner. Regulatory compliance is important. The sheer volume of laws, regulations, standards, and guidelines has increased dramatically.

PROCEDURE

ORGANIZATIONAL EFFICIENCY

Policies provide guidance, consistency, accountability, efficiency, and clarity on how the Association operates. This provides all members of the Association guidelines and principles to follow. Policies define the goals of the Association and provide guidance about how to achieve objectives.

Established procedures ensure the Association's processes do not deviate or deteriorate over time, even if key personnel leave. Consistent policies also help new board members and Coworkers and Contractors get up to speed quickly on how the Association operates and what's expected of them.

GOVERNMENT COMPLIANCE

Regulatory compliance is when the Association follows federal, provincial and local laws or regulations relevant to operations.

Often compliance is required by government mandate and requires conformity to avoid penalties and reprimand. Examples:

- Payroll taxes must be deducted from Coworker and Contractor pay and remitted to the government within exact time period
- Community Living British Columbia has extensive compliance and reporting requirements
- Local government requires compliance to health and safety regulations

Regulatory compliance helps protect the Association's resources and reputation. It takes time to build trust with the government, parents, representatives, prospects, and vendors, and a big part of that center on our ethical behavior.

EFFECTIVENESS OF COMMUNICATION SYSTEMS

In communications, a channel is the means of passing information from a sender to a recipient. Determining the most appropriate channel, or medium, is critical to the effectiveness of communication for the Association. Channels include oral means such as meetings and telephone calls, and written modes such as instructions, reports and email. If you choose the wrong channel - that is, if the channel is not effective for the type of message and meaning you want to create - you are likely to generate misunderstanding and possibly end up making matters worse. Getting the channel right is just as important as sending the right message.

There are two main channels: Communication and Tasks.

COMMUNICATION CHANNELS

Communication channels are the free flow of information among Coworkers, supervisors and leadership, directors, suppliers, parents, Companions and more. Communication channels within the Association can be downward, upward, horizontal, diagonal or external (outside the Association).

This is the day-to-day lifeblood of the Association and is highly encouraged to be unencumbered with any restrictions. Companions and their family members, representatives and/or significant others are encouraged to share feedback, thoughts, feelings and ideas in a manner that best meets their needs. Communication channels can be in writing, verbal or any other method that a companion and family member, representative or significant other identifies as such. We make every effort to ensure feedback communicated is heard and represented in all our decision and planning efforts. Information shared that is of a medical or sensitive nature is treated as confidential and highly restricted.

Examples of Communication Channels:

Communications can range from a casual conversation with a companion, email to a coworker or a formal presentation in front of several people:

- Face-to-face

- Email
- Phone call
- Voice messages
- Video such as Facetime
- In-person oral presentations
- Online meetings
- Letters
- Reports
- Website and blogs (website articles)
- Newsletter
- Social media posts (e.g. Facebook, Twitter)

Communication routes are the straight lines that speed communications directly to their recipients, at the moment communication is necessary. A communication network doesn't follow authority lines and is established around the affiliation of members of our Association and includes networking and spontaneous conversations.

Communication occurs in any direction and takes place between individuals of different status and roles. Communication frequently crosses boundaries within the Association and is commonly separate from workflows. That is, it often occurs between people who do not work together directly but share a common interest in the Association's activities and a motivation to perform their tasks well. Communication occurs outside the Association's established channels for conveying messages and transmitting information.

AUTHORITY AND TASK CHANNELS

A task channel follows authority lines and is established around the structure of the Association. A task is an activity that needs to be accomplished within a defined period of time or by a deadline to work towards work-related goals.

The Power of Coworker and Contractor Responsibility

An effective approach to issuing directions is to describe the work to be completed and ask for Coworker and Contractor responsibility and initiative. Most people prefer to have some degree of control over how they complete their work.

When you let a Coworker or Contractor know what needs to be done, you may be able to give them the freedom to come up with their best way of completing the task.

Supervisors and leadership must explicitly define the intended results.

Authoritative Tasks, Direction, or Instruction

A directive is an authoritative task, direction, or instruction. This can be verbal, in writing or covered in policy.

- Orders are issued by seniors to juniors
- Compliance is from juniors to seniors
- Orders and compliances should be in writing
- A verbal order should be followed by one in writing

Written communication is an effective channel when context, supporting data, and detailed explanations are included.

Task channels run along the official lines of authority. Orders go down and compliance goes up.

Regulatory Compliance

The term “compliance” is the act of adhering to or conforming with policy or a directive.

It also includes conforming to statutes (government laws and regulations), rules and policies as part of our operations. Our goal is to always be in full compliance with government directives.

Regulatory Compliance Training

Our policies and procedures are often tied to compliance requirements which Coworkers and Contractors need to be trained on.

Where policy is written to address specific compliance issues, then our training should reinforce that behavior and ensure Coworkers and Contractors understand what they are supposed to do. Coworkers and Contractors at every level need to adopt the philosophy that compliance is

"everybody's business" – even if there are designated Coworkers and Contractors to oversee our compliance program.

Compliance isn't just about a handful of people who know the latest regulations and what that means for operations. Rather, everybody is up to speed on the latest changes, and they've been trained on how it impacts them.

Continual Improvement

Compliance is not a one-and-done program. Our Association needs to build in regular review periods and audits to ensure compliance. This allows the Association to continually assess the effectiveness of the program and be proactive in our actions. This allows the Association to set workflows and reminders and route it to the appropriate people who need to review and make changes. These steps will help create an effective regulatory compliance program in our Association that protects our resources, reputation, as well as internal and external audiences.

Examples of Authority Channel (task orders):

- Board of Directors to Business Administrator: Get the accounting department to prepare monthly financial reports with comparisons to the approved budget together with variance analysis.
- Maintenance Manager to Maintenance Worker: Fix the tractor as it won't start. Get finance approval in advance if it costs more than $300.
- Controller to bookkeeper: Record the purchase of the new van from the restricted funds bank account.
- Supervisors and/or leadership to House Coordinator: There is a government inspection on Wednesday, next week. Please ensure that all mandated regulations are in full compliance.

Examples of Task Compliance:

- Business Administrator to Board of Directors: Attached are the monthly financial reports with comparisons to the approved budget and a variance analysis. This is repeated each month.
- Maintenance Assistant to Facility Manager: I installed a new battery—the tractor now starts every time. The cost was $296.00.

- Bookkeeper to Controller: The purchase of the new van from the restricted funds bank account has been recorded and the bank account reconciled (agreed) to the bank statement.
- House Coordinator to Supervisor and/or leadership group: All mandated regulations are in full compliance. Attached is a compliance checklist ready for inspection.

Sometimes, all it takes is one compliance misstep and we've broken the trust it has taken years to build. By not following compliance regulations, we might even risk losing access to certain funding options.

Compliance lays the foundation on which we build our Association's reputation. Formal, written policies and procedures improve overall organizational performance by keeping everyone "on the same page" when it comes to compliance, expectations and issues.

When everyone is 100% clear about what needs to be done, how it needs to be done and who's responsible for doing it, it leads to smooth operations and compliance to applicable laws and regulations.

Responsibility of: All Coworkers and Contractors

Monitored by: Business Administrator, Board of Directors and Executive Group

OP32: TECHNOLOGY EMERGENCY DRILL

Associated standards 1.G.4 (a, b, c, d (1, 2, 3, 4, 5, 6, 7)

ACTUAL ☐	**SIMULATED** ☐ (*if simulated please describe how conducted below in charting)*
BUSINESS CONTINUITY / DISASTER RECOVERY Date:_____ Time:_____	

The Ita Wegman Association
of British Columbia

Position/title of Person Completing Drill			
Name of Person Completing Drill			
Signature of Person Completing Drill			
If simulated, describe *(what happened, what lost power, did not work etc.)*			
List Any - Issues/Challenges or Comments - (What worked, what didn't, *ways to learn and improve from the experience)*			
Corrective Action Planning Required - (*What can be done differently to improve and how - (if applicable)*			
Identify necessary training required			
Who Will Oversee Action Planning			
Name of Person			
Projected Completion Date and Results of Corrective Action Planning			
Corrective Action Plan		Complete ☐ Not Complete ☐ Follow Up Required ☐	
Date of Review		Signature	

Responsibility of: Facility Manager, Executive Director

Monitored by: Accreditation Group, Executive Group, Board of Directors

OP33: COWORKER COMPOSITION

Standards associated with this policy: 1) 1.I.1 and 1.I.9

POLICY

The Ita Wegman Association of BC (Glenora Farm) - a Camphill Community - provides residential and day program support for adults with diverse abilities (Companions). Our programs aim to offer Companions an opportunity to fulfill their potential through meaningful residential and day program activities.

Current Coworker composition is available upon request. Please reach out to Anne Jackstel at ajackstel@glenorafarm.org to request access to the Workforce document.

Responsibility of: Accreditation Task Force

Monitored by: Human Resources and Relations Group

OP34: PARTIALLY PAID VOLUNTEERS (STCWs)

Associated standard(s) - **1.I.3**. (a, b, c, d, e, f, g, h) - **1.I.4**. (a - 1(a, b, c, d, e, f), 2(a, b), 3, b - (1, 2, 3), c - (1, 2) - **1.I.5**. (a - (1, 2, 3, 4, 5, 6, 7, 8), b, c, d, e)

INTRODUCTION

The Ita Wegman Association engages partially paid volunteers to assist paid Coworkers (Short-term Coworkers) with providing Companion support in our residential and day programs. Definition of partially paid volunteers:

1. Short-term Coworkers (STCW) are live-in, partially paid volunteers who work and live at the Farm for a minimum of six (6) months, up to 2 years. In most cases, they are directly involved in care work.

Both partially paid and paid Coworkers undergo comprehensive background screening, reference checks, and criminal record checks (translated from their country of origin and section E criminal record check upon arriving at Glenora Farm). Both partially paid and paid Coworkers are required to participate in comprehensive training and orientation, which includes

147 in-person and online training.

See associated ***ECP9 Suitability Review***

See associated ***ECP38 Credential Verification Certification Licensing Membership Fees***

See associated ***ECP 38 Criminal Record Check/ Immunization/ Fingerprinting/ Drug Testing***

See associated ***ECP4 Coworker Orientation Spreadsheet***

See associated ***ECP4 Coworker Orientation and Training Spreadsheet***

See associated ***Partially Paid Volunteer (STCW) job description***

Partially Paid Volunteers

Upon successful completion of screening, training, orientation, and positive outcome at their 5-week review; and, pending the presence of a comprehensive risk assessment and mitigation plan on file for Companions supported, partially paid volunteers may provide support, and personal care support to Companions (private and CLBC-funded) under the direct, or indirect supervision of a paid and approved Ita Wegman Association Coworker.

Direct Supervision

Direct supervision refers to paid Ita Wegman Association Coworkers providing supervision in the same house, workshop location, or outing location to partially paid volunteers. While directly supervised, partially paid volunteers have in-person access to supervisors. Personal care supports are provided with the door open and are directly supervised.

Indirect Supervision

Indirect supervision refers to paid Ita Wegman Association Coworkers providing supervision at a distance, being accessible by phone, or providing supervision from another area at the Farm. Indirect supervision may occur when partially paid volunteers take Companions to scheduled medical appointments or family drop-offs (Companion transportation). Indirect supervision also occurs during personal care support when partially paid volunteers provide personal care support to Companions with the door closed, or in a different area of the residence than the Ita Wegman Association paid Coworker(s).

While indirectly supervised, partially paid volunteers have access to Ita Wegman Association paid Coworker(s) by way of telephone (call and text) or walking a short distance (on the Farm) to ask for supervision support.

Risk Assessment and Risk Mitigation

Risk assessment and risk mitigation plan will be held on file for all Companions supported, and the plan is reviewed and approved by the Facility Manager annually at a minimum.

See associated ***HSP24 IWA Health and Safety Policies - Abuse and Neglect***

See associated ***HSP44 IWA Health and Safety Policies - Companion Risk Assessment and Risk Assessment Form***

See associated ***CP6 IWA Companion Policies – Companion Plans, Planning and Assessment***

Critical Incidents

The Ita Wegman Association ensures that a process is in place to provide Community Living British Columbia (CLBC) and Island Health with timely notifications of all critical incidents.

The IWA reports any critical incident according to the category of the critical incident as determined by Island Health licensing and CLBC. All lta Wegman Association partially paid volunteers receive training to review The lta Wegman Association’s Critical Incident Policies and Procedures, Island Health's incident policies and procedures, and CLBC critical incident policies and procedures.

See associated ***HSP8 Incident and Critical Incident***

See associated ***HSP9 Incident and Critical Incident Report Form***

See associated ***EP9 IWA Critical Incident Debriefing***

All Ita Wegman Association partially paid volunteers and paid Coworkers utilize the Companion database to track internal and critical incidents.

The Facility Manager revisits daily entries marked as internal and critical incidents and follows up with paid Coworkers and partially paid volunteers to complete necessary reporting to Island Health licensing and CLBC. Quarterly, the Facility Manager conducts a review of incidents and critical incidents and provides an analysis and report.

Responsibility of: Facility Manager, Quality Assurance Coordinator, Care Group

Monitored by: Executive Group, Board of Directors

OP35: REASONABLE ACCOMMODATION REQUEST

Associated standard - 1.I.7 (d)

DEFINITIONS

Reasonable Accommodation:

Employers and service providers have an obligation to adjust rules, policies or practices to enable Coworkers, Companions, and Stakeholders to participate fully. It applies to needs that are related to the grounds of discrimination. This is called Reasonable Accommodation.

Reasonable Accommodation means that sometimes it is necessary to treat someone differently in order to prevent or reduce discrimination. For example, asking all job applicants to pass a written test may not be fair to a person with a visual disability. In such cases, the duty to accommodate may require that alternative arrangements be made to ensure that a person or group can fully participate.

Grounds for Discrimination:

Discrimination is an action or a decision that treats a person or a group badly for reasons such as their race, age or disability. These reasons, also called grounds, are protected under the Canadian Human Rights Act.

Discrimination can include:

Race, National or Ethnic Origin, Colour, Religion, Age, Sex, Sexual Orientation, Gender Identity or Expression, Marital Status, Family Status, Disability, Genetic Characteristics, A conviction for which a pardon has been granted, or a record suspended.

Undue Hardship:

It is also important to consider that there is a reasonable limit to how far your employer or service provider has to go to accommodate your needs. Sometimes accommodation is not possible because it would cost too much, or create health or safety risks. This is known as undue hardship. Your employer or service provider can claim undue hardship as the reason why certain policies or practices need to stay in place, even though they may have a negative effect on you. They will need to provide sufficient evidence.

Example of Undue Hardship:

A pilot for a small airline develops a medical condition that limits his peripheral vision. Because of his condition, he is no longer allowed to fly planes. The airline has very few employees, and there are no other jobs to offer him. The employer could argue that keeping the pilot on their payroll would cause undue hardship and that letting him go is their only option.

Please use the Reasonable Accommodation Template linked below to complete and submit reasonable accommodation requests.

https://docs.google.com/document/d/12q98GWRca0pG1HYAzkQ1IbAi_pMP_E54/edit?usp=sharing&ouid=1

Responsibility of: All Coworkers, Human Resources and Relations Group, Finance Group

Monitored by: Executive Group

The Ita Wegman Association
of British Columbia

OP36: CONTRACTED SERVICES

Associated standards: 1.E.1 (f), 1.G.5 (a, b, c, d)

POLICY

In cases where the Ita Wegman Association contracts with individuals, agencies, or businesses to provide services or programs, the Association will follow the outlined procedure for recruiting and selecting contractors. All contracts for the provision of services will be reviewed annually by the Executive Director or delegated individuals or Groups.

PROCEDURE

At a minimum, the contract will describe:

- The scope of work to be undertaken and the total price.
- Methods for evaluating the work.
- Deadlines for completion, or where the service is ongoing, frequency of service.
- A payment schedule.
- Provisions for lien and deficiency holdbacks.
- Methods for resolving disputes.

The Ita Wegman Association will assess contractors' performance at least annually in relation to the scope and requirements of their contract. The organization will ensure that all contractors follow IWA policies & procedures, Island Health and CLBC regulations, and CARF standards applicable to the services they provide.

CODE OF ETHICS

All contractors are presented with and required to comply with the Association's ***Code of Ethics OP15*****.** Failure to do so will result in the termination of the contract.

Following is a list of, but not limited to, the types of contracts the Association may enter into:

- Bookkeeping
- Grant and Technical Writing
- Information / Technology Services
- Database Management
- Newsletter Editing
- Land Management
- Leadership / Teambuilding
- Accreditation support

The selection of contractors is at the discretion of the Facility Manager, Quality Assurance Coordinator, Executive Director, Executive Group, and, in some cases, the Board of Directors.

The selection process could include tendering/posting, suitability, cost, availability, and other factors relating to the ability to provide service. All contractors will meet the requirements of the Association and other governing bodies regarding licenses, insurance coverage, and other relevant legislation.

The Association does not engage with contracted services for the provision of direct support to individuals participating in Glenora Farm programming (CH and CI programs).

Adjunct services (services contracted directly by persons supported) must meet IWA standards and expectations regarding appropriate and accurate communication, identified therapeutic process, and transparent billing practices.

If the business/organization/group delivering adjunct services to individuals supported in Glenora Farm programming does not meet these expectations, Glenora Farm will not endorse or facilitate the adjunct service.

Adjunct services are billed directly to the person supported by the person providing the adjunct service. The IWA is not involved in setting adjunct service fees, billing for services, or payment for services.

Responsibility of: Facility Manager, Quality Assurance Coordinator, Executive Director

Human Resource and Relations Group, Finance Committee

Monitored by: Finance Group, Executive Group, and Board of Directors

OP37: USE OF ARTIFICIAL INTELLIGENCE (AI)

Associated standards: **1.A.5** a(1, 2(a, b), 3, 4, 5, 6(a, b), b, c

Policy

The Ita Wegman Association recognizes the growing role of Artificial Intelligence (AI) in enhancing efficiency, decision-making, and service delivery. However, because we support persons with diverse abilities, support delivery can involve sensitive and personal information; as such, all AI use must align with the Association's values of safety, privacy, person-centred care, dignity, equity, and accountability. This policy establishes expectations for the ethical, transparent, and responsible use of AI to protect the well-being and rights of those we support in our residential and day programs.

Artificial Intelligence (AI):

AI can be defined as technologies that simulate human intelligence processes such as learning, reasoning, problem-solving, perception, or language understanding. Examples include chatbots,

predictive analytics tools, language models, image recognition systems, and automated decision-making programs.

AI System:
AI systems can be defined as any software, application, or online service that uses algorithms or machine learning to analyze data, make predictions, or generate content. This includes both Association-approved and publicly available AI tools.

Sensitive Data:
We define sensitive data as information that, if accessed, disclosed, or used improperly, could cause harm to a person supported, Coworker, or Volunteer. This includes personal identifiers (names, addresses, contact details), health or behavioural records, case notes, Indigenous identity, gender, sexual orientation, or any information about the person supported.

Guidelines for Safe and Effective Use of AI

Understanding AI Limitations

- AI tools can assist but not replace professional judgment or human oversight.
- Coworkers must critically evaluate AI-generated outputs for accuracy, context, and appropriateness.
- AI systems may produce incorrect, incomplete, or biased results and should not be used as the sole basis for decision-making affecting support delivery or any program outcomes.

Bias Awareness

- AI models may reflect biases present in their training data.

- Users must assess output for fairness and avoid relying on AI for decisions that could disadvantage any individual or group based on race, culture, gender, age, disability, or socioeconomic status.
- Culturally informed, trauma-informed, and person-centred approaches must guide all uses of AI.

Protection of Sensitive Data

- No personal, identifiable, or confidential information may be entered into any AI tool.
- Data shared with AI systems must comply with privacy legislation such as the Freedom of Information and Protection of Privacy Act (FIPPA) or the Personal Information Protection Act (PIPA).`
- AI systems must not be used to store, transmit, or analyze sensitive data.

Ethical Use of AI

- AI should be used to enhance, not replace, human relationships, empathy, and judgment.
- Use of AI must align with the Association's mission, ethical code, and commitment to the well-being of persons supported, Coworkers, and volunteers.
- Coworkers must be transparent when AI-generated content or analysis is used in reports, communications, or decision-making. Before using AI in the above-mentioned ways, Coworkers must obtain approval from their direct supervisor.

Accountability and Incident Reporting

- Coworkers must immediately report any suspected misuse, data breach, or ethical concern involving AI to their supervisor, the Facility Manager, Quality Assurance Coordinator, or Executive Director.
- Incidents will be reviewed promptly to assess risk, determine corrective actions, and notify affected individuals or authorities when required.

Approved AI Systems

- Microsoft Copilot - research, ideation, and drafting communication
- Chat GPT for Healthcare - research, ideation, and drafting communication. Only to be used without names, dates, case notes, charts, or identifiable details.
- Operational vs clinical use - administrative and support teams can safely use AI to draft nonclinical correspondence, transcribe notes, write policies, and summarize general, de-identified information. AI is **not** to be used for diagnosis, treatment planning, or medication dosing.

Prohibited Uses of AI

The following uses of AI are strictly prohibited:

- Entering, uploading, or sharing confidential Companions, Coworkers, or volunteers' personal information into any AI systems.
- Using AI to automate tasks or workflows without prior review and approval by the Quality Assurance Coordinator, Facility Manager, and Executive Director.
- Using AI tools in ways that reinforce stereotypes, discrimination, or inequities in support delivery.
- Using AI to circumvent established policies, privacy laws, or professional codes of conduct.
- AI tools must not independently screen, rank, or select job applicants without human review and confirmation. Any AI-assisted hiring process must ensure transparency, fairness, and equity.
- Using AI to create, alter, or distribute misleading or deceptive content, including text, images, audio, or video.

- Employing AI to alter, predict, or influence financial records or resource allocations without explicit authorization from the Executive Director.
- Employing AI systems to intimidate, exploit, harass, or cause harm to others, including Companions, Coworkers, volunteers, or the Association's reputation.

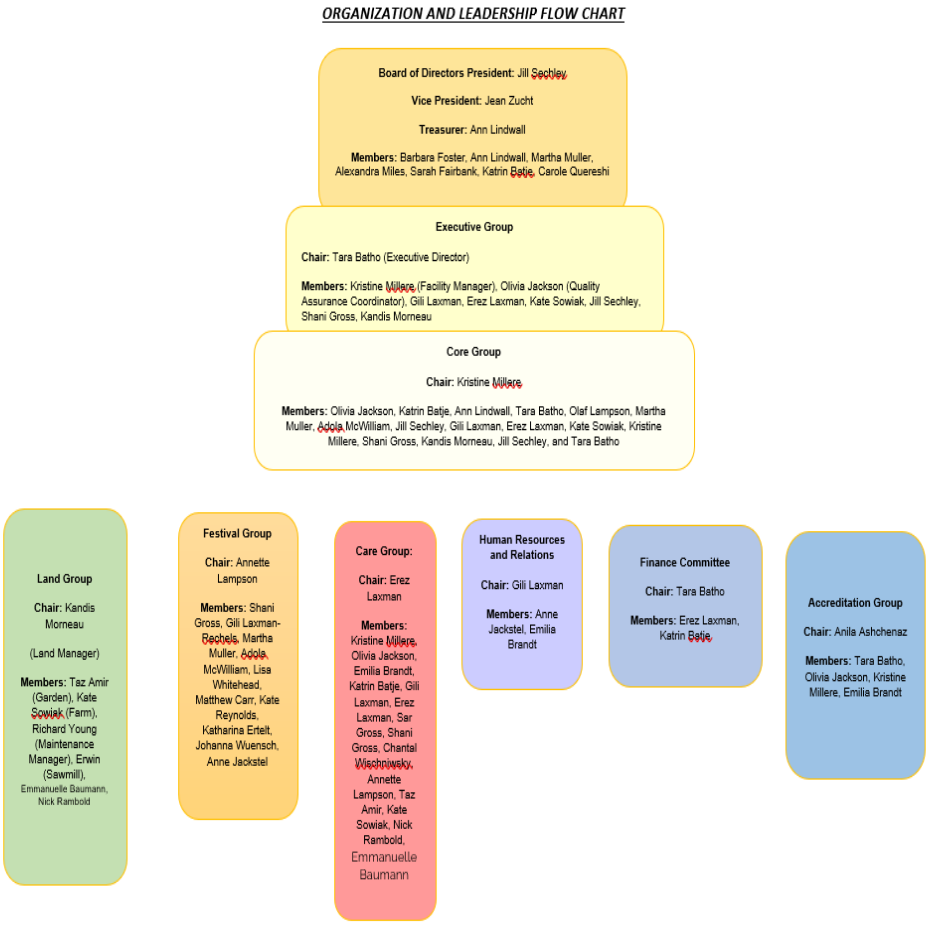
Disciplinary Action

Violations of this policy may result in corrective action, up to and including termination of employment.

All Coworkers, contractors, and volunteers are responsible for understanding and adhering to this policy when using AI systems. The Association reserves the right to monitor, audit, and restrict AI use to ensure compliance with this policy and any applicable laws.

Responsibility of: Facility Manager, Quality Assurance Coordinator, Executive Director

Monitored by: Executive Group

The Ita Wegman Association
of British Columbia

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