

# POLICY MANUAL CHECKLIST

South East Sport, Culture & Recreation District

**GOVERNANCE  
MANUAL**



## Policy Manual Checklist

### Governance Manual

This template policy manual includes samples of governance focused policies. Use the checklist on Page 4 to start building a policy manual for your organization.

#### Important notes

- You can't (or shouldn't) rely on these sample policies and procedures alone. They are a starting point, but you will have to adapt them.
- Most samples include both policies and procedures (the policies provide guidance on standards, while procedures give instructions on implementing standards). We recommend adopting policies at a board level, while procedures are developed/signed off by the Organization's CEO.
- We use the term 'board' to cover boards, committees of management, or any body that has final authority in your Organization. And, the term 'CEO' extends to executive directors, or your chief administrator.

*Disclaimer: When developing policies and procedures for your own organization, it can be very beneficial to first review examples of these types of policies. Of course, your final version needs to reflect your board's actual practices, but it can be helpful to start with a pre-existing document for inspiration rather than beginning from a blank paper. Before implementing a new policy, have it reviewed by your organization's legal counsel for compliance with applicable federal and provincial laws. The samples provided here are for informational purposes only and do not constitute legal advice.*

## Type of Organization

	Board Governance	Staff, Administration & Operations
<b>NEW</b>	<ul style="list-style-type: none"> <li>Newly formed</li> <li>Register as a non-profit with the ISC or created through municipal bylaw</li> <li>Board being formed or relatively new</li> </ul>	
<b>TYPE 1 OPERATIONAL BOARD STRUCTURE</b>	<ul style="list-style-type: none"> <li>The governance structure is operational. The board is responsible for all activities.</li> <li>Vision and mission is clarified</li> <li>Observe fiduciary/ethical considerations as regulated by law</li> </ul>	<ul style="list-style-type: none"> <li>No staff or limited part-time administrative assistance</li> <li>Operating from a home or loaned office space arrangement</li> <li>Assets are usually not significant.</li> </ul>
<b>TYPE 2 MOVING TOWARD A POLICY/GOVERNANCE BOARD STRUCTURE</b>	<ul style="list-style-type: none"> <li>Board is still involved with operations but focusing on policy making and community leadership roles.</li> <li>Committee are in place with the board.</li> <li>Vision and mission is revised as needed</li> <li>Observe fiduciary/ethical considerations as regulated by law</li> </ul>	<ul style="list-style-type: none"> <li>Staff in place, usually a full or part-time executive director, and some administrative, program and financial assistance</li> <li>Office space is established in a rented or loaned space.</li> <li>Assets are or are becoming significant.</li> </ul>
<b>TYPE 3 POLICY/GOVERNANCE BOARD STRUCTURE</b>	<ul style="list-style-type: none"> <li>Board operates at as a governance board and is not longer involved in the day-to-day operations.</li> <li>Vision and mission revised as needed.</li> <li>Ensures administrative accountability including selection and hiring of CEO/Executive Director</li> <li>Observe fiduciary/ethical considerations as regulated by law</li> </ul>	<ul style="list-style-type: none"> <li>Have a full time CEO/Executive Director and specialized staff.</li> <li>Office is well located, either leased or owned.</li> <li>Administrative expenses are covered mainly by fees and operating income.</li> </ul>

Adapted from the Community Foundations of Canada-Policy Guidelines and Template Manual

Use the checklist below to start building a policy manual for your organization. Review the type of organization you are above and check out the recommended policy areas below. Policies marked with x are ones you should likely make a priority. This is an extensive list but not exhaustive, spaces have been left for you to add additional policies to the list.

## Governance Manual

Policy	New and Type 1	Type 2 and 3	Policy You Need (X)
<b>GOVERNANCE AND GOVERNANCE ASSESSMENT</b>	X	X	
<b>ARTICLES OF INCORPORATION/BYLAWS</b>	X	X	
<b>ROLE OF OFFICERS</b>	X	X	
<b>FINANCIAL ACCOUNTABILITY</b>	X	X	
<b>CONFLICT OF INTEREST</b>	X	X	
<b>CONFIDENTIALITY</b>	X	X	
<b>CODE OF CONDUCT</b>	X	X	
<b>ANTI-HARASSMENT</b>	X	X	
<b>RISK MANAGEMENT</b>		X	
<b>BOARD ORIENTATION</b>	X	X	
<b>BOARD RECRUITMENT, NOMINATION, EVALUATION AND SUCCESSION PLANNING</b>	0	X	
<b>PLANNING-STRATEGIC, ANNUAL OPERATING PLAN AND PLANNING CYCLE</b>		X	
<b>BOARD/COMMITTEE-STAFF RELATIONSHIP</b>		X	
<b>APPOINTMENT OF EXECUTIVE DIRECTOR/CEO</b>		X	
<b>EXECUTIVE AUTHORITY</b>		X	
<b>EXECUTIVE DIRECTOR OR CEO PERFORMANCE EVALUATION</b>		X	
<b>MEETING PROCEDURES</b>	X	X	
• AGENDA	X	X	
• MINUTES	X	X	
• DECISION-MAKING/VOTING	X	X	
• EMAIL/ONLINE MEETING PROTOCOLS	X	X	
• ATTENDANCE (QUORAM)	X	X	
• IN-CAMERA/CLOSED MEETINGS		X	
<b>ADMINISTRATIVE/COMMUNICATIONS POLICIES</b>			
<b>SOCIAL MEDIA POLICY</b>	X	X	
<b>INCLUSION POLICY</b>	X	X	
<b>RECORD RETENTION AND DESTRUCTION POLICY</b>	X	X	
<b>SIGNAGE POLICY</b>		X	
<b>ADVOCACY AND OR PUBLIC POLICY</b>		X	

## Contents

Code of Ethics and Conduct .....	1
Code of Ethics .....	8
Code of Ethics Procedures .....	9
[Sample] Code of Ethics .....	10
Code of Conduct .....	12
Conflict of Interest .....	15
Anti-Discrimination Policy .....	17
Anti-Discrimination Procedures .....	18
Legislative Compliance Policy.....	20
Legislative Compliance Procedures .....	21
Governance Policy .....	23
Governance Procedures .....	25
Transparency and Accountability Policy.....	26
Transparency and Accountability Procedures.....	29
Board Attendance Policy.....	30
Board Attendance Procedures .....	31
Emergency Policy .....	33
Board and Committee Expenses .....	35
Board Confidentiality Policy.....	37
Board Confidentiality Procedures .....	38
Sample Confidentiality Agreements.....	38
SAMPLE #1 Confidentiality Policy for Employees, Volunteers and Board Members .....	39
Sample #2 Confidentiality Policy.....	39
Sample #3 Acknowledgement of Confidentiality Of Client Information .....	40
Sample #4 Confidentiality Policy .....	40
Succession Planning .....	41
Privacy Policy .....	42
Record Retention and Destruction Policy .....	44
Social Media Policy .....	46
Sample #1 .....	46
Sample #2 .....	46
Sample #3 .....	50
Media Relations Policy .....	56
Partnering Policy.....	58
Partnership Checklist .....	60

## Code of Ethics and Conduct

Reference: SaskCulture Financial Policies (<https://www.saskculture.ca/programs/organizational-support/organizational-resources?resource=1&subresource=61>), Retrieved April 8, 2021

<b>Policy Name:</b>	Code of Ethics and Conduct	<b>Number:</b>
<b>Policy Type:</b>	Governance Process	<b>Date Approved:</b>
		<b>Latest Revision:</b>

---

The objective of the (organization) Board of Directors' Code of Ethics and Conduct is to promote a climate of integrity within the organization and to assist individual Board members who may be called upon to make decisions of an ethical nature.

Directors shall:

1. Act always in the best interest of (organization). In all decisions made by directors of the Board, the well-being of (organization) shall supersede personal or affiliate interests.
2. Embrace and demonstrate a culture of mutual respect amongst all directors and staff in activities including meetings and events.
3. Act and be seen to act in an ethical manner. Ethics are based on the underlying values of integrity, honesty, fairness, respect, loyalty, cooperation and accountability.
4. Comply with the (organization) conflict of interest policy; including regular disclosure of all perceived, actual or potential conflicts of interest (see GP-11 Conflict of Interest Policy).
5. Not use their affiliation with (organization) to benefit their personal interest or that of a third party.
6. Not attempt to exercise individual authority over the organization except as explicitly set forth in board policies.
  - 6.1 When interacting with the General Manager or with staff, directors shall recognize the lack of authority vested in individuals, except when explicitly Board-authorized.
  - 6.2 When interacting with the public, media or other entities, directors shall recognize the same limitation and the inability of any director(s) to speak for the Board, except when explicitly Board authorized.
  - 6.3 To express concerns about the General Manager or staff performance outside official policy (BC- 3 & 5).
  - 6.4 When approached by an employee bypassing administration, directors shall advise employees to first utilize reporting lines within the administration to bring their concerns to the Board.

7. Directors will respect the confidentiality appropriate to issues of a sensitive nature.
8. Directors shall be familiar with the incorporating documents, by-laws, regulations, and policies of the organization as well as the rules of procedure and proper conduct of a meeting so that any decision of the Board may be made in an efficient, knowledgeable, and expeditious fashion.
9. Directors shall be properly prepared for Board deliberation.
10. Directors shall take part in educational activities which will assist them in carrying out their responsibilities (GP-12).
11. Directors shall attend meetings on a regular and punctual basis. Absence of a director from more than three consecutive regular meetings without satisfactory justification shall be cause for a request for resignation.
12. Directors who may have objections to the behaviour of another Board member may address such issues privately with that director before taking the issue to the President who shall then privately attempt to resolve the issue. If the issue remains unresolved, the President will refer the matter to the 'Officers' for a discussion and resolution.
13. Any individual director with concerns about the code of ethics and conduct of the Board or a member of the Board, may at any time bring the issue forward to the entire Board for discussion and resolution.

# Code of Ethics

Reference: Policy Bank – Institute of Community Directors Australia

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

The ethical climate of an Organization is an essential element in establishing its credibility and furthering its mission. An Organizational culture that takes ethical considerations into account at every point cannot be produced simply by having the Board lay down a code; ethical principles must arise from consultation with and responsiveness to the Organization’s members, clients, employees, volunteers, and stakeholders.

## Purpose

This policy is designed to provide guidelines for procedures that will allow [Name of Organization] to evolve a consensus on the ethical principles that should guide its conduct.

## Policy

[Name of Organization] commits itself to operating in accordance with an ethical code drawn up through agreed procedures following consultation with members, clients, employees, volunteers, and stakeholders.

## Authorization

<Signature of Board Secretary>  
<Date of approval by the Board>  
[Name of Organization]



## Code of Ethics Procedures

Procedures number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by CEO on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

### Responsibilities

It shall be the responsibility of the Board to appoint an Ethics Committee headed by a Coordinator and including among its membership the Secretary of the Board.

The Coordinator of the Ethics Committee shall be responsible for carrying out the process of developing a Code of Ethics for the Organization.

The CEO shall be responsible for disseminating the eventual Code of Ethics and of ensuring its observance.

### Procedures

The Ethics Committee shall organise consultation with members, clients, employees, volunteers, and stakeholders on

The values that the Organization wishes to embody, and

The specific ethical imperatives that are implied by these values.

The discussions around these issues should be used as a means to raise awareness of the significance of ethical attitudes to the effective operation of the Organization.

The Committee shall then

Review the policies of the Organization to ensure that these are not in conflict with the Organization's ethical principles, and

Draw up a draft Code of Ethics for the Organization.

It should be noted that the Organization's ethical position is represented both by the Organization's policies and by its Code of Ethics, and any particular ethical guideline does not necessarily need to be repeated in both.

The draft Code of Ethics should then be circulated for discussion and comment to members, clients, employees, volunteers, and stakeholders. Again, the discussion should be used to forward a commitment among all concerned with the Organization to the ethical operation of the Organization.

The Ethics Committee shall forward a final draft of the Code of Ethics to the Board. The Board may make any alterations it sees fit, and the resulting Code of Ethics shall be presented for the approval of the membership at the next General Meeting.

Once the Code of Ethics has been approved by the General Meeting it shall be implemented by the Organization. Procedures should then be instituted to provide sanctions and penalties for breaches of the Code.

# [Sample] Code of Ethics

## **Introduction**

It must be stressed that this Code is not presented as a model for possible adoption but merely as an illustration of the kind of agreed principles that might arise from a process of consultation.

## **Volunteers**

Shall, in all business conducted under the aegis of [Name of Organization], place the interests of the Organization over their own interests of those of any other person or persons;

Shall observe the provisions of the constitution, policies, and rules of the Organization;

Shall treat the other members of the Organization, and the staff of the Organization, and the office-bearers of the Organization, and the clients of the Organization, with respect;

Shall undertake any training necessary for the performance of their duties;

Shall, in any work carried out for the Organization, follow the directions of their designated supervisors;

Shall not so act as to bring the Organization or its mission into disrepute.

## **Staff**

Shall, in all business conducted under the aegis of [Name of Organization], place the interests of the Organization over their own interests of those of any other person or persons;

Shall observe the provisions of the Constitution, policies, and rules of the Organization, including any policies on conflict of interest;

Shall enthusiastically and competently carry out the duties specified by their contract of employment;

Shall treat the other staff of the Organization, and the members of the Organization, and the office-bearers of the Organization, and the clients of the Organization, with respect;

Shall undertake any training necessary for the performance of their duties;

Shall, in any work carried out for the Organization, follow the directions of their designated supervisors;

Shall not so act as to bring the Organization or its mission into disrepute.

## **Members**

Shall observe the provisions of the Constitution, policies, and rules of the Organization;

Shall treat the other members of the Organization, and the staff of the Organization, and the office-bearers of the Organization, and the clients of the Organization, with respect;

Shall not so act as to bring the Organization or its mission into disrepute.

**Board members**

Shall, in all business conducted under the aegis of [Name of Organization], place the interests of the Organization over their own interests of those of any other person or persons;

Shall observe the provisions of the Constitution, policies, and rules of the Organization;

Shall, as far as possible, attend all meetings of the Board, and, in the event that they are prevented from attending any meeting of the Board, shall notify the Secretary of their absence in advance of the meeting;

Shall devote to their duties the amount of time required to carry them out thoroughly and effectively;

Shall undertake any training necessary for the performance of their duties;

Shall treat the other members of the Board, and the other members of the Organization, and the staff of the Organization, and the office-bearers of the Organization, and the clients of the Organization, with respect;

Shall not so act as to bring the Organization or its mission into disrepute.

**Office bearers**

Shall carry out enthusiastically and competently the duties assigned to the position;

Shall, in all business conducted under the aegis of [Name of Organization], place the interests of the Organization over their own interests of those of any other person or persons;

Shall observe the provisions of the Constitution, policies, and rules of the Organization;

Shall, as far as possible, attend all meetings of the Board, and, in the event that they are prevented from attending any meeting of the Board, shall notify the Secretary of their absence in advance of the meeting;

Shall devote to their duties the amount of time required to carry them out thoroughly and effectively;

Shall undertake any training necessary for the performance of their duties;

Shall treat the other members of the Board, and the other members of the Organization, and the staff of the Organization, and the office-bearers of the Organization, and the clients of the Organization, with respect;

Shall not so act as to bring the Organization or its mission into disrepute.

## Code of Conduct

Source: [hrcouncil.ca](http://hrcouncil.ca) The Canadian Diabetes Association, Retrieved April 8, 2021

### Policy

The Canadian Diabetes Association has a mission TO PROMOTE THE HEALTH OF CANADIANS THROUGH DIABETES RESEARCH, EDUCATION, SERVICE AND ADVOCACY. In pursuing its goals, the Association serves the interests of those diagnosed with diabetes, those undiagnosed and those at risk of diabetes. In delivering programs to Canadians, employees and volunteers work with each other and the public at large. The following Code of Conduct (“the Code”) is designed to allow the Association to preserve its long tradition of integrity and credibility with the public and within the Association. This Code applies to all direct service program volunteers (those in face-to-face contact with the Canadian Diabetes Association clients), Branch Councils, Regional Councils if applicable, national Board members, Section Executive volunteers, all employees (permanent full-time, hourly, fixed term contract, permanent part-time), and any third-party service provider in face-to-face contact with our clients.

The Code is organized into categories, as follows:

### Service

- Always act with fairness, honesty, integrity and openness; respect the opinions of others and treat all with equality and dignity without regard to gender, race, colour, creed, ancestry, place of origin, political beliefs, religion, marital status, disability, age, or sexual orientation.
- Promote the mission and objectives of the Canadian Diabetes Association in all dealings with the public on behalf of the Association and within the Canadian Diabetes Association.
- Provide a positive and valued experience for those receiving service within and outside the Canadian Diabetes Association.

### Accountability

- Act with honesty and integrity and in accordance with any professional standards and / or governing laws and legislation that have application to the responsibilities you perform for or on behalf of the Canadian Diabetes Association. CDA is a national organization with regional and branch operations. CDA’s Human Resource policies apply to all volunteers and employees. Policies are reviewed every 3 years or sooner if an issue arises with its interpretation and use.
- Comply with both the letter and the spirit of any training or orientation provided to you by the Canadian Diabetes Association in connection with those responsibilities.
- Adhere to the policies and procedures of the Canadian Diabetes Association and support the decisions and directions of the national Board and its delegated authority.
- Take responsibility for your actions and decisions. Follow reporting lines to facilitate the effective resolution of problems. Ensure that you do not exceed the authority of your position.

## **Conflict of interest**

Conflict of interest arises when a person participates in a decision about a matter (including any contract or arrangement of employment, leasing, sale or provision of goods and services) which may benefit or *be seen to* benefit that person because of his/her direct or indirect monetary or financial interests affected by or involved in that matter.

It is the duty of any person taking part in the operations of the Canadian Diabetes Association to adhere to the Conflict of Interest Policy at all times. In the event that such a matter arises, the person shall formally disclose the interest, refrain from attempting to persuade or influence other persons participating in the decision and shall not cast any vote on the matter.

## **Confidentiality**

- Respect and maintain the confidentiality of information gained as a volunteer or employee, including, but not limited to, all computer software and files, the Canadian Diabetes Association business documents and printouts, and all volunteer, employee membership, donor and supporter records.
- Respect and maintain the confidentiality of individual personal information about persons affected by diabetes gained through your role in the Canadian Diabetes Association, for example, in support groups, meetings or in service programs.

## **Personal or sexual harassment**

Sexual harassment is any conduct, comment, gesture or contact of a sexual nature that one would find to be unwanted or unwelcome by any individual, or that might, on reasonable grounds, be perceived by that individual as placing a condition of sexual nature on an employment or career development.

Personal harassment means any conduct whether verbal or physical that is discriminating in nature, based upon another person's race, colour, ancestry, place of origin, political beliefs, religion, marital status, physical or mental disability, sex, age or sexual orientation. It is discriminatory behaviour, directed at an individual, that is unwanted or unwelcome and causes substantial distress in that person and serves no legitimate work-related purpose.

The Canadian Diabetes Association has a zero-tolerance policy with respect to Personal /Sexual Harassment. Personal/Sexual Harassment in any form is strictly prohibited and may be grounds for termination as a volunteer, or, in the case of an employee, immediate dismissal for just cause without notice or pay in lieu of notice.

**Procedures for the care of others who may be vulnerable because of age or disability** in the course of providing the Canadian Diabetes Association service, our volunteers, employees, and third-party service providers may come into contact with vulnerable individuals. These individuals are those who may be at risk of harm or harassment because of their age or disability. When this occurs, the following procedures should be followed:

- Where practical to do so, the Canadian Diabetes Association related one-on-one meetings with clients who may be vulnerable be conducted in a business-like setting, public location or in an area that is private but visible to others.
- The Canadian Diabetes Association volunteers, employees, and third-party service providers who seek to initiate personal contact with vulnerable clients outside the Canadian Diabetes Association program, are asked to seek prior approval from the appropriate employee/leadership volunteer, and, in the case of children/youth, from the parent/ guardian.

### Implementation

Strict observance of the Code is fundamental to the activity and reputation of the Canadian Diabetes Association. It is essential that all direct service program volunteers (those in face-to-face contact with the Association’s clients), Branch Councils, Regional Councils if applicable, national Board members, Section Executive volunteers, all employees (permanent full-time, hourly, fixed term contract, permanent part-time), and any other third-party service provider in face-to-face contact with our clients adhere to this Code. They will certify this by signing a Declaration that they have read and will abide by this Code.

The Human Resources Manual gives further details of this and other policies and procedures of the Association. Management has the responsibility of ensuring compliance with all Codes and Policies of Canadian Diabetes Association.

### Code of conduct declaration

I, *(Employee/Volunteer – please print)*, have read, understand and agree to abide by the Code of Conduct of the Canadian Diabetes Association and I understand that such adherence is a condition of my employment or volunteer work. I understand that a violation of the Code of Conduct may be grounds for termination as a volunteer or in the case of an employee immediate dismissal for just cause without notice or pay in lieu of notice.

Signed this \_\_\_\_ day of \_\_, 20\_\_\_\_. \_\_\_\_\_(Volunteer/Employee - Signature)

\_\_\_\_\_  
Department/Region/Area/Section/Branch

*A national organization agreed to post this policy on [www.hrcouncil.ca](http://www.hrcouncil.ca) as part of the HR Toolkit. Sample policies are provided for reference only. Always consult current legislation in your jurisdiction to create policies and procedures for your organization.*

## Conflict of Interest

Reference: (organization) Governance Policy

Policy Name:	Conflict of Interest	Number: GP-11
Policy Type:	Governance Process	Date Approved: April 2000
		Latest Revision: May 2009

---

A conflict of interest occurs when a Director attempts to promote a private or personal interest, which results in an interference with the objective exercise of his/her responsibilities with the organization or a gain or advantage by virtue of his/her position with the organization. Conflicts of interest may be real, potential, or perceived. Directors shall avoid conflict of interest with respect to their fiduciary responsibility. The underlying purpose of this policy is to create transparency in the decision-making process.

1. There must be no self-dealing or any conduct of private business or personal services between any Director and the organization, except as procedurally controlled to assure openness, competitive opportunity, and equal access to otherwise “inside” information.
2. If a director cannot act in the interests of (organization) without acting against the interests of another organization of which they are a director, then they should resign from one of the organizations.
3. When the Board is to decide upon an issue, about which a Director has a conflict of interest, that Director shall absent herself or himself without comment from not only the vote, but also from the deliberation.
4. Directors must not use their position to obtain employment in the organization for themselves, family members, or close associates. Should a Director desire employment, he or she must first resign.
5. Directors will annually disclose and update on an ongoing basis their involvements with other organizations, with vendors, or any associations which might produce a conflict.
6. In situations where a conflict is perceived to exist by others, if the individual Director does not perceive a conflict, the vote of the Board shall be decisive.
7. No Director shall accept any gift or service which could be viewed as payment for services rendered through his/her position. Gifts which are the normal exchange between friends, the normal exchange of hospitality between persons doing business together, or tokens exchanged as part of protocol are acceptable.
8. Individuals who exercise regulatory, inspectionary and/or discretionary control over others must not give or appear to give preferential treatment to family members, friends, current or former business associates or any organization that they are presently or were formally associated with.

9. Directors shall manage their private affairs so that neither they nor their relatives, friends, current or former business associates benefit or appear to benefit from information not available to the public.
10. Directors shall not be board members or employees of voting member boards or on boards that receive major operating funding from the Saskatchewan Lotteries Trust Fund.
11. Directors shall not be employed by a government agency or branch whose work involves policies or programs directly aligned with the distribution of Saskatchewan Lotteries Trust Funds for Sport, Culture and Recreation or employed by an agency that receives funds directly from the ministry that has oversight for the Saskatchewan Lotteries Trust Fund for Sport, Culture and Recreation.
12. In situations where more than one member of an immediate family\* is interested in serving on the board, only one member would be eligible to be a director due to the perceived conflict of interest.
13. A Director who abstains from participation due to conflict of interest is still included in determining quorum.
14. The minutes must record all declarations of conflict of interest.

\* Immediate family includes, spouse (definition is not necessarily confined to the legal definition), or the parent, grandparent, child, brother or sister, niece/nephew or grandchild of the director or the director's spouse.



# Anti-Discrimination Policy

Reference: Policy Bank – Institute of Community Directors Australia

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

[Name of Organization] endorses diversity, supports equal rights, and does not advocate, support or practice discrimination based on race, religion, age, national origin, language, sex, sexual orientation, or mental or physical handicap, whether covered by applicable legislation or not, except where affirmative action may be required to redress individual or social handicaps of people from disadvantaged groups.

## Purpose

This document sets out

[Name of Organization]'s policy against such discrimination

The governance structures, responsibilities and processes that have been established to give effect to that policy.

## Policy

[Name of Organization] does not advocate, support or practice discrimination based on race, religion, age, national origin, language, sex, sexual orientation, or mental or physical handicap or any other personal attribute protected by law, except where affirmative action may be required to redress individual or social handicaps. [Name of Organization] will make all reasonable accommodations to allow people who experience difficulties in their dealings with the Organization to benefit equally from its work.

## Authorization

<<Signature of Board Secretary>>

<<Date of approval by the Board>>

[Name of Organization]

# Anti-Discrimination Procedures

Procedure number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by CEO on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Responsibilities

### 1. The Board will:

- Regularly review the leadership and commitment given to eliminating discrimination through active promotion of the Organization’s Anti-Discrimination Policy.
- Monitor performance by way of periodic management reports and assurances.

### 2. The CEO will:

- Ensure that:
  - the Organization’s practices and processes incorporate precautions against discrimination in such areas as hiring, client selection, and program delivery;
  - Reasonable accommodations are made to allow diverse groups to access benefits provided by the Organization;
  - Where appropriate, weight is given to the culture and experiences of individuals from disadvantaged groups.
- Where appropriate, delegate responsibility for compliance to officers with responsibility for particular sections.
- Oversee the performance of subordinate officers in these matters.
- Review and report to the Board, as appropriate, on the effectiveness of the management systems established to remove discrimination.
- Analyse material breaches and identified compliance system weaknesses for systematic trends and ensure that any adverse trends are addressed.
- Promote a culture of effective policy compliance across the Organization.

### 3. All staff and volunteers at all levels will:

- Ensure that they are aware of the Organization’s policy against discrimination;
- Not act in a manner that would be considered to be discriminatory pursuant to this policy or any applicable legislation;
- Where appropriate, suggest ways in which practices, systems and procedures could be improved so as to reduce the likelihood of discrimination occurring.

## Processes

The CEO will initially review the Organization’s procedures in all areas to ensure that these are in accordance with the principles expressed in this policy, and will report to the Board on this matter.

The CEO will review any changes to the Organization's procedures in all areas to ensure that these are in accordance with the principles expressed in this policy.

Staff and volunteers will follow these procedures.

Authorization

<Signature of Policy Officer>

<Name of Policy Officer>

<Date>

# Legislative Compliance Policy

Source: Policy Bank -Institute of Community Directors Australia

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

The operations of [Name of Organization] are subject to a wide range of legal requirements, embodied in legislation, regulations, licences, codes, guidelines and similar binding instruments. These include (but are not limited to):

- Occupational Health & Safety legislation
- Anti-discrimination legislation, including that relating to equal opportunity, racial vilification and disability discrimination
- Taxation legislation
- Privacy legislation

## Purpose

This document sets out [Name of Organization]’s policy for compliance with the law and the governance structures, responsibilities and processes that have been established to give effect to that policy.

## Policy

[Name of Organization] is committed to the highest standards of integrity, fairness and ethical conduct, including full compliance with all relevant legal requirements, and requires that all its Board members, officers (including its Chief Executive Officer), managers, employees, volunteers and contractors acting on its behalf meet those same standards of integrity, fairness and ethical behaviour, including compliance with any legal requirement.

There is no circumstance under which it is acceptable for [Name of Organization] or any of its employees or contractors to knowingly and deliberately not comply with the law or to act unethically in the course of performing or advancing [Name of Organization]’s business.

## Authorization

<Signature of Board Secretary>

<Date of approval by the Board>

[Name of Organization]

# Legislative Compliance Procedures

Procedure number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by CEO on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Responsibilities

### 1. The Board will:

- Review and monitor the leadership and commitment given to legislative compliance through active promotion of the Organization’s Legislative Compliance Policy.
- Review compliance management objectives and plans for legislative compliance.
- Monitor compliance performance by way of periodic management reports and assurances.

### 2. The CEO will

- Prepare legislative compliance objectives and plans for review and consideration by the Board.
- Monitor performance against legislative compliance objectives and plans, and report to the Board on progress toward accomplishment of objectives.
- Where appropriate, delegate responsibility for compliance to officers with responsibility for particular sections.
- Oversee the performance of subordinate officers in these matters, including
  - conforming to and applying relevant requirements of the Law within the workplace;
  - ensuring that systems and procedures established to make the policy effective are operational;
  - ensuring that staff are trained and have the necessary knowledge and understanding to perform their duties in compliance with the policy and all relevant requirements of the law;
  - ensuring that significant compliance responsibilities and accountabilities are included in position descriptions and performance reviews;
  - reporting and investigating any incident or occurrence thought or known to constitute a breach of any legal requirement; and
  - designing and implementing system enhancements to correct weaknesses that could result in a breach of such a requirement.
- Review and report annually to the Board on the effectiveness of the management systems established to deliver legislative compliance.
- Analyse material breaches and identified compliance system weaknesses for systematic trends and ensure that any adverse trends are addressed.
- Promote a culture of effective legislative compliance across the Organization.
- Provide formal assurance to the Board as to the state of compliance of the Organization.

### 3. All staff, volunteers and contractors, at all levels, will

- Ensure that they are aware of any legal requirements that apply to their work activities and that they comply with them.
- Report all incidents of breaches of legal requirements.
- Where appropriate, suggest ways in which practices, systems and procedures could be improved so as to reduce the likelihood of a breach occurring.

#### Processes

The Board will, at least once a year, feature as an agenda item the monitoring of compliance performance.

Legislative compliance objectives and plans will be prepared by the CEO, approved by the Board, and held on file.

Delegation by the CEO of responsibility for compliance in any area will be managed under the Organization's Delegations Policy.

#### Authorization

<Signature of CEO>

<Name of CEO>

<Date>

# Governance Policy

Reference: Policy Bank-Institute of Community Directors of Australia

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

Governance in the community sector is concerned with the systems and processes that ensure the overall direction, effectiveness, supervision and accountability of an Organization.

Board members take ultimate responsibility for the governance of their Organizations. However, governance is not a role for Boards and Board members alone. Governance is also concerned with the way Boards work with chief executives and staff, volunteers, service users, members and other stakeholders to ensure the Organization is effectively and properly run and meets the needs for which the Organization was set up.

## Purpose

The Governance Policy is intended to clarify the content of the Organization’s constitution by making explicit the underlying principles of governance approved by the Organization.

This policy does not cover legal or ethical issues concerning the role of the Board or its members, which are addressed separately elsewhere.

## Policy

The Board of [Name of Organization] is an elective, representative, and collective body.

It is **elective**, in that the determination of Board members is the prerogative of members through the election process.

It is **representative**, in that no member can be mandated by their constituency to adopt a particular position if they do not believe it to be in the best interests of the Organization. Whatever the constituency of any member, all members are committed to acting selflessly and making decisions and voting on governance decisions solely in the best interests of the Organization.

It is **collective**, in that while each member should put the point of view of their constituency, and each member has the right to argue for their own point of view and to vote for that position, once a collective decision has been taken Board members are required to support that decision.

The function of the Board of [Name of Organization] is to collectively ensure the delivery of the Organization’s objects, to set its strategic direction, and to uphold its values. The Board should collectively be responsible and accountable for ensuring and monitoring that the Organization is performing well, is solvent, and is complying with all its legal, financial, and ethical obligations.

The responsibilities of the Board that cannot be delegated to any other person or body include

Compliance monitoring – ensuring compliance with the objects, purposes and values of the Organization, and with its constitution

Organizational governance – setting or approving policies, plans and budgets to achieve those objectives, and monitoring performance against them

Strategic planning – reviewing and approving strategic direction and initiatives

Regulatory monitoring – ensuring that the Organization complies with all relevant laws, regulations and regulatory requirements

Financial monitoring – reviewing the Organization’s budget, monitoring management and financial performance to ensure the solvency, financial strength and good performance of the Organization

Financial reporting – considering and approving annual financial statements and required reports to government;

Organizational structure – setting and maintaining a framework of delegation and internal control

Leadership selection – selecting, evaluating the performance of, rewarding and, if necessary, dismissing the Organization’s Chief Executive Officer (CEO)

Succession and remuneration planning – planning for Board, CEO and executive succession, and determining senior management remuneration

Risk management – reviewing and monitoring the effectiveness of risk management and compliance in the Organization; agreeing or ratifying all policies and decisions on matters which might create significant risk to the Organization, financial or otherwise

Dispute management – dealing with and managing conflicts that may arise within the Organization, including conflicts arising between Board members, staff, the CEO, members, volunteers, or service users.

Social responsibility – considering the social, ethical and environmental impact of all activities and operations and ensuring that these are acceptable

Board performance and composition – evaluating and improving the performance of the Board

### **Relationship with management**

The Board should focus on the strategic direction and the core policies of the Organization, and avoid becoming involved in day-to-day operational decisions. Where individual Board members do need to become involved in operational matters, they should separate their strategic role (where they operate independently of any direction) from their operational role (where they act at the direction of management).



# Governance Procedures

Procedures number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by CEO on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Responsibilities

It shall be the responsibility of the Board to establish and maintain standing orders, policies and procedures, and systems of financial control, internal control, and performance reporting.

It shall be the responsibility of the Board to clearly demarcate and delegate the functions of sub-committees, officers, the CEO, and other staff and agents.

It shall be the responsibility of the CEO to address key management and operational issues within the direction and the policies laid down by the Board, including

1. Developing and implementing Organizational strategies and making recommendations to the Board on significant strategic initiatives;
2. Making recommendations for the appointment of staff, determining terms of appointment, evaluating performance, and developing and maintaining succession plans for staff;
3. Developing the annual budget and managing day-to-day operations within the budget;
4. Maintaining an effective risk management framework;
5. Keeping the Board and regulators informed about any developments with a material impact on the Organization’s performance; and
6. Managing day-to-day operations in accordance with agreed standards for social, ethical and environmental practices.

## Procedures

### Internal controls

The Board should set and maintain standing orders, policies and procedures, and systems of financial control, internal control, and performance reporting. The Board should ensure that there is a system for the regular review of the effectiveness of its financial control, internal control, performance reporting, and policies and procedures.

### Managing risk

The Board should undertake a full risk assessment (either periodically or on a rolling basis) and take appropriate steps to manage the Organization’s exposure to significant risks. The Board must regularly review the risks to which the Organization is subject, and take action to mitigate risks identified.

### Board review

The Board should ensure that there is a system for the regular review of its own effectiveness in meeting its responsibilities.

# Transparency and Accountability Policy

Reference: Policy Bank-Institute of Community Directors Australia

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

[Name of Organization] values its relationship with its clients, its members, its donors, its volunteers and other stakeholders who partner with it to enable it to achieve its purpose.

It recognises that transparency and accountability build trust and help those relationships to flourish.

## Purpose

The purpose of this document is to recognise the importance of transparency and accountability and facilitate the development and implementation of measures by [Name of Organization]’s Board and Staff to provide appropriate transparency and accountability.

## Policy

### 1. Board Reporting

1. The Board must ensure that it complies with its legal and contractual reporting obligations. They include [delete items that are not applicable]:
  - 1.1. Reporting annually to the Members, in accordance with the requirements of the constitution, on the Organization’s activities in the preceding year, and providing an opportunity for questions;
  - 1.2. Preparing financial reports as required by law;
  - 1.3. Preparing an annual report in accordance with the requirements of the fundraising licence;
  - 1.4. Reporting to government agencies in accordance with the terms of grants and funding contracts;
  - 1.5. Reporting to the Canada Revenue Agency, and/or other Government departments, in accordance with the requirements of its deductible gift recipient status;
  - 1.6. Reporting to donors in accordance with the terms of any philanthropic grants issued;
2. In addition to its specific legal and contractual obligations, the Board will consider each year whether there are any other stakeholder relationships which could benefit from receiving a report from the Board on the Organization’s activities and performance.
3. In preparing its reports, the Board will consider the extent to which it can report on each of the following matters<sup>1</sup> [the extent to which these matters apply will vary according to the size and nature of your Organization – the criteria are provided by way of example but can be modified to suit your Organization]:
  - 3.1. The purpose of [Name of Organization].
    - 3.1.1.A report on the purpose of [Name of Organization] involves explaining the environment in which the Organization operates. It includes reporting on [Name of Organization’s]

mission, vision and values, and explaining [Name of Organization's] relevance in the current environment.

- 3.2. [Name of Organization] stakeholder reporting and engagement
  - 3.2.1. This includes reporting on how stakeholder relationships are managed, how employees and volunteers are recruited, trained, rewarded, retained and recognised, and how the Organization is funded.
- 3.3. Fundraising and investments
  - 3.3.1. This includes reporting on the source of funds, fundraising and funding targets.
  - 3.3.2. It includes reporting on accountability mechanisms governing the use of the funds.
  - 3.3.3. It includes an assessment of [Name of Organization]'s ability to maintain the current levels of funding in the future, and how its fundraising approach is being evolved or adapted to changes in circumstances.
  - 3.3.4. It includes reporting on investments, and the management oversight and skills in [Name of Organization] to manage investment risks and performance.
  - 3.3.5. It includes reporting on movements in the level of funding, particularly where it has fallen in any year.
- 3.4. Business strategy and mission
  - 3.4.1. This includes explaining the strategy and structures that enable [Name of Organization] to operate and to grow.
  - 3.4.2. It includes identifying the priorities and associated budgets and allocation of resources.
  - 3.4.3. It also includes honest self-assessment and disclosure of performance and plans to address underperformance and/or ongoing challenges, recognising that this helps to build trust.
- 3.5. Governance structure and processes
  - 3.5.1. This includes reporting on governance structures, systems, processes and how risk management frameworks are aligned with those structures, systems and processes.
  - 3.5.2. It includes providing clear diagrams of the Organizational structure with reporting lines and key roles identified.
  - 3.5.3. It includes disclosure of qualifications, experience and length of service of the members of the Board, CEO and senior management.
  - 3.5.4. It includes reporting on how [Name of Organization] identifies and manages risks, and what risks are specific to [Name of Organization] in addition to general risks.
- 3.6. Activity and performance
  - 3.6.1. This includes reporting on outputs, outcomes and impacts.
  - 3.6.2. It also includes reporting on KPIs.
- 3.7. Financial performance and position
  - 3.7.1. This includes reporting on sources of revenue, revenue recognition policies and a discussion and analysis of the factors affecting the Organization's financial performance.
4. In undertaking its function of reporting to stakeholders, the Board must be mindful of the Organization's privacy policy, underpinned by its privacy law obligations, and it must take care to act in the interests of [Name of Organization].
5. Deliberations of the Board and its sub-committees shall be dealt with in accordance with the Board confidentiality policy/procedure.

## 2. Client Records

[Name of Organization] will deal with client records in accordance with its privacy law obligations.

## 3. Staff Records

[Name of Organization] will deal with staff records in accordance with the *Fair Work Act 2009* (Cth), and its privacy policy and privacy law obligations.

## 4. Member and Donor records

[Name of Organization] will deal with client records in accordance with its privacy policy and privacy law obligations.

## 5. Access to Minutes of General Meetings and the Members Register

Access to minutes of general meetings and the Members Register will be provided in accordance with the terms of the constitution.

## Authorization

[Signature of Board Secretary]

[Date of approval by the Board]

[Name of Organization]

# Transparency and Accountability Procedures

Procedures number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by CEO on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Responsibilities

In order for the Board to facilitate accountability and transparency with stakeholders, there needs to be good internal documentation and reporting.

The CEO is responsible for ensuring that there are systems and processes in place to capture, record and analyse the information necessary to enable the Board to perform its reporting functions. This includes reporting regularly to the Board on the operations of [Name of Organization].

The CEO will also ensure that privacy and other policies are in place to govern the access and use of documents including client records, staff records, member and donor records, and minutes of general meetings, in accordance with the Board’s transparency and accountability policy.

Staff are responsible for implementing and adhering to the policies and procedures developed by the CEO.

## Authorization

[Signature of CEO]

[Name of CEO]

[Date]

# Board Attendance Policy

Reference: Policy Bank-Institute of Community Directors Australia

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

Regular attendance at Board and committee meetings is essential in order to maintain continuity and cohesion in the management and governance of [name of Organization].

## Purpose

This Board Attendance Policy is intended to encourage regular attendance at [name of Organization]’s Board and committee meetings and to provide procedures to deal with any failures in such attendance.

## Policy

Board and committee members are expected to demonstrate their commitment to the Organization by unbroken attendance at the Board or committee on which they sit, except when prevented by unforeseeable events.

## Authorisation

<Signature of Board Secretary>  
<Date of approval by the Board>  
<Name of Organization>

## Board Attendance Procedures

Procedures number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by CEO on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

### Responsibilities

It is the responsibility of the Board Chair to monitor the attendance of each member and to issue warnings as appropriate.

### Procedures

The Secretary shall notify members of forthcoming meetings no sooner than 21 working days before the set date of the meeting.

Where Board members are prevented from attending any Board meeting, they should notify the Chair of their intended absence.

Where a meeting is to be held either in the form of a teleconference or online, the Chair should notify members accordingly. Participation in these meetings shall be equivalent to attendance at a regular meeting.

### Attendance requirements

If a Board member is absent for two consecutive meetings without first notifying the chair of their absence, or if a Board member is absent for three consecutive meetings having notified the chair of their absence, that Board member is in breach of their obligations and is liable to be removed from the Board, subject to the following processes.

Prospective members of the Board shall be issued with copies of the attendance policy and asked to commit themselves to observing its terms.

### Process

If a Board member is in breach of their attendance requirements then the Chair shall consult them to discuss this matter.

If the Board member's difficulties are resolvable, then the chair shall attempt to resolve them.

If no mutually satisfactory resolution is possible, and if the Board member wishes to continue on the Board, then the member's response will be put to the Board at its next meeting. The Board member shall be entitled to speak to this item, and to vote on it. The Board will then decide what actions to take regarding that Board member's future membership on the Board.

If the Board decides that termination is justified, the Board may suspend that person's membership of the Board. In the event the member wishes to continue in his or her position, the suspension shall be put to a general meeting for approval. The suspended member shall be given an opportunity to be heard, either personally or through a representative, and may submit materials in writing to be circulated.

The Board may remove any person from any Board sub-committee for any reason, including (but not limited to) non-attendance.

When any person has been removed from the Board or from any committee under this provision, the Board or committee will promptly initiate a process to recruit a new Board member. The person whose membership has been terminated shall retain the right to stand again at the next election for the Board.

**Authorization**

<Signature of CEO>

<Name of CEO>

<Date>



# Emergency Policy

This policy is to ensure emergency response and the resumption and recovery of **Organization name's** operations and essential activities during a critical event.

The primary goals of the Emergency Policy are:

- To protect lives, property and information
- To prevent or minimize the impact of emergencies and to maximize our effectiveness in responding to inevitable occurrences
- To provide for the continuity of operations in pursuit of Organization name's mission

## **Definitions**

- *Business Continuity*: The ability to continue key **operations** without stoppage, in spite of critical **events**.
- *Business Continuity Plan*: A plan to keep the business operating and recover/restore partially or completely interrupted critical functions.
- *Critical Events, Hazards or Threats*: may be *Natural* (e.g., flood, tornado), *Accidental* (e.g., fire, contamination), *Health Related* (e.g., epidemic, pandemic), *Commercial* (e.g., loss of critical services like power or water), or *Wilful* (e.g., vandalism, theft, arson).
- *Emergency*: An unusual and dangerous situation needing immediate action to control and return to a safe condition.
- *Emergency Plan*: A collection of procedures, plans and resources that are developed, collected and kept ready for use in the event of an emergency or crisis.
- *Risk Assessment* is the identification and evaluation of the levels of risk involved in a situation/event/threat and the determination of an acceptable level of risk.
- *Stakeholders*: Those people and organizations that may affect, or be affected by, or think they are affected by, a decision or activity of Organization name.

## **Directives**

### **1. Risk Assessment**

- a. Risk assessments will be completed to determine the amount of risk related to a critical situation or a recognized hazard or threat.
- b. Assessments will consider the potential injury, loss or interruption and the probability that the injury, loss or interruption will occur. These factors will determine the risk priority of impact vs. probability
- c. Assessment methods may differ depending on the type of risk (financial, environmental, health, etc.)
- d. If an activity, service or threat is considered to have significant risk, then an Emergency Plan and/or a Business Continuity Plan will be developed.

## 2. Emergency Plans and Business Continuity

- a. Emergency Plans: Emergency Plans ensure the safety of everyone in the affected site. Emergency Plans should include the following emergency information:
  - i. Evacuation plan – all staff will know and be able to implement the plan
  - ii. Names and contacts for persons with responsibilities, e.g. first aid officers, coordinators
  - iii. Notification of emergency services
  - iv. First aid treatment and assistance
  - v. Fire alarms and extinguishers
  - vi. Communication procedures
  - vii. Training and testing of plans and procedures (drills)
- b. Business Continuity Plans To ensure that the organization as a whole remains viable in the event of crisis Organization name will maintain one or more Business Continuity Plans, describing:
  - i. Priority/critical services/activities
  - ii. Time-lines for recovery of each service/activity
  - iii. Response strategies and actions to be taken in the event of a critical event.
- c. Emergency and Business Continuity Plans will anticipate a variety of probable scenarios ranging from Organization name-specific to regional crises.
- d. When legally mandated or appropriate, Organization name's Emergency and Business Continuity Plans will connect with, and assist community partners and authorities, both in plan development and during critical events.
- e. Plans will not supersede or contradict any laws or governmental regulations.
- f. Plans should be periodically tested for viability and to better prepare staff/stakeholders.

## 3. Emergency Policy Review

This Emergency Policy and its plans will be reviewed bi-annually with all staff

The Canadian Centre for Occupational Health and Safety offers a number of Health and Safety documents to help prepare plans, etc. Some examples are the *Emergency Planning guide*, *Management Checklist and Hazard and Risk*. A list of the resources can be found at [www.ccohs.ca/oshanswers/hsprograms](http://www.ccohs.ca/oshanswers/hsprograms).

## Board and Committee Expenses

Reference: SaskCulture Governance Policies

**Policy Name:** Board and Committee Expenses

**Number:** GP-8

**Policy Type:** Governance Process

**Date Approved:** June 2000

**Latest Revision:** December 2010

---

Volunteers shall be reimbursed for all Board and committee meetings attended as part of their defined duties, as well as for any meetings or functions attended at the direction of the Board.

1. Where possible (organization) will arrange hotel/motel accommodation for volunteers that will be invoiced directly to (organization). This will apply to direct room, taxes and hotel parking only.
  - a. In an effort to support family members wishing to accompany board and committee members, (organization) will cover double occupancy accommodation costs if available and when the request is made well in advance of the meeting.
  - b. Volunteers staying with friends or family in a private dwelling will be given a living/accommodation allowance of \$35/day if requested.
2. A hotel room will be arranged if:
  - a. The travel time to or from the home town to the meeting place requires the volunteer to leave home prior to 8:00 a.m. and return home later than 6:00 p.m.
  - b. The travel time and time spent on (organization) business total more than ten (10) hours in one day.
  - c. Bad weather would make travel home dangerous.
  - d. Exceptions will be considered on an individual basis. The exceptions, made in writing, are approved by the President or Committee Chair.
3. In the event the above accommodation arrangements are not required volunteers are responsible for cancelling the reservation by calling the office or the hotel. If accommodations are not cancelled resulting in charges to (organization), volunteers will be responsible for the charges.
4. Volunteers wishing to make alternate accommodation arrangements are responsible for making their own arrangements and for paying any difference in price.
5. In-province car travel will be based upon the official Saskatchewan highway maps destination to destination mileage figure.
6. Out-of-province car travel will be based upon the equivalent to the cheapest economy airfare available between the closest Saskatchewan airport connection with the out-of-province

destination. If circumstances require air travel, boarding passes will be submitted with the accompanying expense claim.

7. If travelling out of country requires a currency exchange, volunteers will be reimbursed based on the exchange rate at the time of currency conversion.
8. The use of car pooling shall be encouraged and facilitated whenever possible.
9. Any expenses other than meals and mileage must be substantiated with receipts.
  - a. If expenses are for family care the maximum rate to be reimbursed would not exceed minimum wage for the time, including travel time, specific to the meeting.
10. Reimbursement of mileage, meals and private dwelling accommodation shall be according to current provincial government rates.
  - a. Meals pertinent to meeting times and travel specific to the meeting shall be reimbursed. Those living in the centre where the meeting takes place will have group meals covered.
  - b. (organization) will reimburse, up to a maximum of \$10/day substantiated by receipts, parking or taxi costs incurred by the volunteer for meetings in their home location. Parking meter costs will be reimbursed at a rate of \$1/hour to a maximum of \$10/day.
  - c. For accessibility purposes, volunteers may request to be reimbursed the actual costs of transportation, substantiated by receipts. The written exemption request will be made at the beginning of the term, approved by the President or Committee Chair and will apply for the duration of the term, unless specified in the request.
  - d. Advance payment of mileage only can be approved prior to the expenses being incurred. Mileage expense claims are to be in (organization)'s office 10 working days prior to the meeting. Cheques will be available at the start of the meeting.
11. In cases where volunteers use a portion of their (organization) meeting time for their work with other organizations, that volunteers travel and accommodation costs shall be apportioned appropriately.
12. In cases where a registration fee is required and a (organization) volunteer is attending, (organization) will pay the registration fee directly. If circumstances prevent the volunteer from attending and notice is not received from the volunteer enabling (organization) to arrange an alternate, or if the notice does not fall within the reimbursement timeframe, the volunteer will be responsible for the registration charges. Extenuating circumstances will be considered by the President or Committee Chair.

# Board Confidentiality Policy

Reference: Policy Bank-Institute of Community Directors Australia

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

Board confidentiality is important. It encourages open and frank discussion at meetings, helps facilitate the development of vision and the implementation of an effective strategy to achieve that vision, and protects information that is confidential, personal, or relates to employment, commercial or legal matters.

## Purpose

The purpose of this policy is to facilitate effective governance of [Name of Organization] by ensuring Board confidentiality.

## Policy

Board members must keep confidential all information pertaining to matters dealt with by the Board. This includes board meeting minutes, agendas, reports to the Board and associated documents, and information contained in those documents.

The obligation to maintain confidentiality continues to apply even after a person has left the Board.

Maintaining confidentiality as a general rule will also help ensure observance by Board members of the following legal duty:

*A person who obtains information because they are, or have been, a member of the Board must not improperly use the information to:*

- *gain an advantage for themselves or someone else; or*
- *cause detriment to the Organization.*

If a request is made for access to one or more Board Papers\*, the Board may on a case-by-case basis resolve to provide access to the document/s. In considering this request, the Board will have regard to:

- the importance of maintaining confidentiality to facilitate effective board meetings.
- the importance of complying with the law - including privacy law - and recognizing that the law sometimes creates duties to disclose or protect information.
- whether the person requesting the document is a member, and the important role of members in holding the Board accountable; and
- the need to be consistent in the way that documents are treated, and the consequence of establishing any precedents or expectations.

Nothing in this policy is intended to prevent the Board from seeking confidential legal, accounting, financial or other expert advice from independent professionals to assist the Board in carrying out its functions.

Any person [such as CEO or Secretary] who is not a member of the Board but is present at a Board meeting (or part of a meeting) must maintain in confidence all information obtained as a result of their participation in the meeting.

**Board Papers** means all written communications to Board member/s including without limitation monthly/quarterly board papers, submissions, minutes, letters, memoranda, board committee and sub-committee papers and copies of other documents referred to in any of the abovementioned documents made available to the Board member as a Board member during his or her time in office.

Authorisation

<Signature of Board Secretary>  
<Date of approval by the Board>  
<Name of Organization>

## Board Confidentiality Procedures

Procedures number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by CEO on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

### Responsibilities

The Chair is responsible for bringing this policy to the attention of prospective Board members.

The Secretary must ensure that it is included in the induction kit (if such a kit exists) for new Board members.

Requests for access to Board Papers should be made to the Secretary who should include consideration of the request as an item on the Board agenda.

### Procedures

The Secretary shall ensure that Board Papers are created, maintained and distributed in a manner which is consistent with their confidential status. They shall be kept separately from other (non-confidential) documents and stored in a manner which limits access to them by unauthorised persons (including employees).

In circumstances where a request for access to Board Papers has been made, and there is reason to believe that there are laws governing the disclosure or non-disclosure of the document, the CEO will obtain legal advice on the matter to assist the Board in its consideration of the request.

## Sample Confidentiality Agreements

Reference: National Council of Non-profits

NOTE: These samples are provided for educational purposes only and should not be considered legal or other professional advice. The National Council of Non-profits encourages non-profits to seek the advice of competent professional advisors prior to adopting this, or any template document.

## Sample #1 Confidentiality Policy for Employees, Volunteers and Board Members

Respecting the privacy of our clients, donors, members, staff, volunteers and of the [Name of Non-profit] itself is a basic value of [Name of Non-profit]. Personal and financial information is confidential and should not be disclosed or discussed with anyone without permission or authorization from the [executive director]. Care shall also be taken to ensure that unauthorized individuals do not overhear any discussion of confidential information and that documents containing confidential information are not left in the open or inadvertently shared.

Employees, volunteers and board members of [Name of Non-profit] may be exposed to information which is confidential and/or privileged and proprietary in nature. It is the policy of [Name of Non-profit] that such information must be kept confidential both during and after employment or volunteer service. Staff and volunteers, including board members, are expected to return materials containing privileged or confidential information at the time of separation from employment or expiration of service.

Unauthorized disclosure of confidential or privileged information is a serious violation of this policy and will subject the person(s) who made the unauthorized disclosure to appropriate discipline, including removal/dismissal.

## Sample #2 Confidentiality Policy

All information concerning clients, former clients, our staff, volunteers, and financial data, and business records of [Name of Non-profit] is confidential. "Confidential" means that you are free to talk about [Name of Non-profit] and about your program and your position, but you are not permitted to disclose clients' names or talk about them in ways that will make their identity known. No information may be released without appropriate authorization. This is a basic component of client care and business ethics. The board of directors, staff and our clients rely on paid and volunteer staff to conform to this rule of confidentiality.

[Name of Non-profit] expects you to respect the privacy of clients and to maintain their personal and financial information as confidential. All records dealing with specific clients must be treated as confidential. General information, policy statements or statistical material that is not identified with any individual or family is not classified as confidential. Staff members are responsible for maintaining the confidentiality of information relating to other staff members and volunteers, in addition to clients.

Failure to maintain confidentiality may result in termination of your employment, or other corrective action. This policy is intended to protect you as well as [Name of Non-profit] because in extreme cases, violations of this policy also may result in personal liability.

### *Rationale*

Confidentiality is the preservation of privileged information. By necessity personal and private information is disclosed in a professional working relationship. Part of what you learn is necessary to provide services to the applicant or client; other information is shared within the development of a helping, trusting relationship. Therefore, most information gained about individual clients through an assignment is confidential in terms of the law, and disclosure could make you legally liable.

Disclosure could also damage your relationship with the client and make it difficult to help the person.

Before you begin your assignment as a staff member/volunteer, you should be aware of the laws and penalties for breaching confidentiality. Although the agency is liable for your acts within the scope of your duty, giving information to an unauthorized person could result in the agency's refusal to support you in the event of legal action. Violation of the state statutes regarding confidentiality of records is punishable upon conviction by fines or by imprisonment or by both.

### Certification

I have read [Name of Non-profit]'s policy on confidentiality and the Statement of Confidentiality presented above. I agree to abide by the requirements of the policy and inform my supervisor immediately if I believe any violation (unintentional or otherwise) of the policy has occurred. I understand that violation of this policy will lead to disciplinary action, up to and including termination of my service with [Name of Non-profit].

Signature \_\_\_\_\_ Name \_\_\_\_\_ Date \_\_\_\_\_

### Sample #3 Acknowledgement of Confidentiality of Client Information

I agree to treat as confidential all information about clients or former clients and their families that I learn during the performance of my duties as \_\_\_ (position title),

and I understand that it would be a violation of policy to disclose such information to anyone without checking first with my supervisor.

Signature of Staff Member/Volunteer \_\_\_\_\_

Date \_\_\_\_\_ Name \_\_\_\_\_

### Sample #4 Confidentiality Policy

It is the policy of [Name of Non-profit] that board members and employees of [Name of Non-profit] will not disclose confidential information belonging to, or obtained through their affiliation with [Name of Non-profit] to any person, including their relatives, friends, and business and professional associates, unless [Name of Non-profit] has authorized disclosure. This policy is not intended to prevent disclosure where disclosure is required by law.

Board members, volunteers and employees are cautioned to demonstrate professionalism, good judgment, and care to avoid unauthorized or inadvertent disclosures of confidential information and should, for example, refrain from leaving confidential information contained in documents or on computer screens in plain view.

Upon separation of employment and at the end of a board member's term, he or she shall return, all documents, papers, and other materials, that may contain confidential information.

Failure to adhere to this policy will result in discipline, up to and including separation of employment or service with [Name of Non-profit].



## Succession Planning

Reference: HRCouncil.ca

Changes in personnel who fill key roles, including the **Executive Director, employees and Directors of the Board**, will occur.

Therefore, **Organization name** needs to prepare for these changes, whether they are planned or unplanned, temporary or permanent.

To ensure the stability and accountability of the organization, **Organization name** must be able to re-fill key roles effectively and promptly, until the staff member can return or a new permanent replacement is in place.

### *Definitions*

*Succession Plan* is a plan to guide the organization in the event of key personnel taking a leave of absence or departing, due to health, retirement, career change, etc.

### *Directives*

1. Succession planning will be a working partnership between management (Board/Executive Director) and employees, to define each employee's role and current priorities.
2. In consultation with appropriate personnel, **the Executive Director** will conduct a succession risk- assessment around all positions in the organization and establish appropriate succession plans for each. These plans will be reviewed annually.
3. **Executive Director:**
  - a. The position of Executive Director is central to the organization's success. It is important to prepare for either a planned or unexpected change, by ensuring that the roles and functions of the Executive Director are well understood and the various duties are cross-trained amongst staff and Directors of the Board.
  - b. In the case where an Executive Director begins thinking about leaving the organization, **Organization name** will focus on developing a time-lined plan for communicating the transition to staff and stakeholders, conducting a review, building organizational capacity and sustainability and recruiting/hiring a new Executive Director.
  - c. The Board will also assess the permanent leadership needs of the organization to help ensure the selection of a qualified and capable leader who is representative of the community, a good fit for the organization's mission, vision, values, goals, and objectives and who has the necessary skills for the organization.
  - d. Interim Executive Director - To ensure that there is no interruption in the organization's day- to-day operations, while the Board of Directors assesses the leadership needs and recruits a permanent Executive Director, the Board may need to appoint provisional leadership. The Interim Executive Director shall ensure that **Organization name** continues to operate without disruption and that all organizational commitments are fulfilled.

HRCouncil.ca is an excellent resource for everything Human Resources related in Not- for-Profits. Their section on **Succession Policy** is a great example <http://hrcouncil.ca/hr-toolkit/planning-succession.cfm>

# Privacy Policy

**Organization name** respects the privacy of our members, clients, volunteers, staff, donors, sponsors and stakeholders.

We are committed to ensuring that appropriate measures and safeguards are in place to protect specific information that is held for the purpose of the program. We adhere to all legislative requirements with respect to privacy. We do not rent, sell or trade mailing lists.

## *Directives*

### **1. Accountability**

- **Organization name** will ensure that all private information is protected.
- Information will not be transferred to third parties without the consent (express or implied) of the individual.
- The Board of Directors will designate an individual to be responsible for ensuring privacy and compliance with the Personal Information Protection and Electronic Documents Act (PIPEDA) and all other privacy legislation. This person will also be responsible to implement procedures and train all employees and volunteers.

### **2. Identifying Purpose**

- We understand that some of the information we hold on members, clients, volunteers, staff, donors, sponsors and stakeholders is private, which is why we collect personal information only for the following purposes:
  - i. To establish and maintain a responsible relationship and provide ongoing service and support.
  - ii. To conduct appropriate screening procedures for those volunteers and staff who may find themselves in a position of trust with the clients of the organization
  - iii. To develop, enhance, market or provide opportunities consistent with the program mandate.
  - iv. To maintain, manage and develop our programs and operations, through statistical review, solicited feedback and support.
  - v. To meet program and government requirements.

### **3. Consent**

- Members, clients, volunteers, staff, donors, sponsors and stakeholders do have choices and can refuse or withdraw consent for us to keep and use information. They may request that their name be removed from our various lists; they can refuse to provide personal information to us; and they may withdraw consent at any time. In all cases this may limit Organization name's ability to provide appropriate service and support to these individuals.

### **4. Limiting Collection**

- The collection of personal information will be limited to that which is necessary for the purposes identified by the organization. Information will be collected by fair and lawful means.

## **5. Limiting Use, Disclosure & Retention**

- Personal information will not be used or disclosed for purposes other than those for which it was collected, except with the consent of the individual or as required by law. Personal information must be retained only as long as necessary for the fulfilment of those purposes.

## **6. Accuracy**

- At all times, we strive to keep personal information accurate and up-to-date for the purposes identified above.

## **7. Safeguard**

- Personal information will be protected, and/or disposed of, by security safeguards appropriate to the sensitivity of the information. Access to information will be on a “need to know” basis only.

## **8. Openness**

- Organization name will make readily available to interested parties specific information about its policies and practices relating to the management of personal information.

## **9. Individual Access**

- Upon request, an individual will be informed of the existence, use, and disclosure of his or her personal information and will be given access to that information. An individual will be able to challenge the accuracy and completeness of the information and have it amended as appropriate.

## **10. Challenging Compliance**

- Organization name will investigate all privacy complaints and respond appropriately. Complaint procedures will be kept in place and available to all members, clients, volunteers, staff, donors, sponsors and stakeholders.

The Federal Government provides some information and resources to help with PIPEDA compliance at [www.priv.gc.ca/en/privacy-topics/privacy-laws-in-canada/the-personal-information-protection-and-electronic-documents-act-pipeda/pipedacompliance-help](http://www.priv.gc.ca/en/privacy-topics/privacy-laws-in-canada/the-personal-information-protection-and-electronic-documents-act-pipeda/pipedacompliance-help)

## Record Retention and Destruction Policy

Federal and provincial laws require organizations to have policies and procedures to govern the storage, retention and discarding of corporate, financial, program and personal information.

Furthermore, it is good business practice that we do not retain this information for longer than required for its purpose, for continuity or by legislation.

### *Definitions*

For this policy, the terms *information, records and documents* include paper-based, electronic document/files, e-mails and media files (sound, video, digital images, etc.).

The *Records Retention Schedule* is a list of the minimum retention periods for information and records.

The **Records Administrator** is the person in charge of the administration of this policy, the development of a Records Retention Schedule and the implementation of the policy's subsequent processes and procedures.

### *Directives*

1. The **Executive Director of Organization name** will act as, or appoint someone on his/her behalf to act as, the Records Administrator. The Records Administrator will:
  - a. develop and make modifications to the Records Retention Schedule
  - b. develop procedures for destroying types of records that are not listed in the Record Retention Schedule, to ensure efficient operations
  - c. ensure that this policy and the Records Retention Schedule comply to best practice and all federal and provincial laws, especially considering tax laws, personal privacy laws and incorporation laws
  - d. monitor the compliance of Organization name's staff and volunteers
2. **Organization name** will ensure that safeguards are maintained to protect the confidentiality of any private information.
3. At a minimum, **Organization name** will meet all legal requirements, for maintenance and destruction of information.
4. Wherever possible, client, personnel, board and administrative records will be safely stored or backed-up to guard against destruction by fire and other threats.
5. **Organization name's** information must be safeguarded and should only be disclosed to outside parties with proper authorization. Any subpoena, court order or other request for documents must be directed to the Executive Director.
6. Any records of **Organization name** in possession of an employee must be returned to the Executive Director upon termination of employment.
7. All paper documents with any private, personal or financial information included will be destroyed by mechanical shredder before they are discarded. Electronic data contained on

hard drives will be erased and overwritten (electronically shredded). Electronic data contained on all other media will be erased and overwritten (electronically shredded) or destroyed by the physical destruction of that media.

8. Exception: If **Organization name** is served with a subpoena or any employee becomes aware of a litigation, governmental investigation or audit that may concern **Organization name's** records, then those records must be preserved until legal counsel or the Board of Directors determines that those records are no longer needed.

For a very comprehensive policy example with a record retention schedule of key record- keeping holding periods and maintenance requirements check out the Building Officials Association of BC document at <http://boabc.org/wp-content/uploads/2015/11/Policy-Records-Retention-and-Destruction.pdf>

The Multiple Sclerosis Society of Canada has their Record Retention Procedures which include record retention timeframe examples: <https://mssociety.ca/about-us/policy-directions-and-procedures/record-retention-procedures>

# Social Media Policy

## Sample #1

Organization name believes in using social media in a way that informs, inspires and shows respect for people.

To ensure a professional online presence, Organization name's social media accounts will follow these procedures:

- No staff member or volunteer may create any kind of a social media account in Organization name's name without approval from management.
- Only people approved by organization name's management may make social media postings on behalf of Organization name.
- Organization name's management will ensure that all social media accounts have proper security and privacy controls.
- It is the responsibility of Organization name's management to ensure that all postings made by organization are appropriate.

All social media postings made by Organization name will:

- Show respect for human dignity
- Respect the spirit of the Saskatchewan Human Rights Code
- Respect organization name's core values
- Respect people's privacy and confidentiality

Organization name considers the following types of postings by us or others on our Facebook page or other social media sites to be unacceptable:

- Defamatory or offensive postings, including swear words or verbal abuse
- Postings that are racist or sexist in nature or are a violation of human rights
- Postings that are against the spirit of the Ontario Human Rights Code
- Postings that are politically partisan or sectarian in nature
- Postings from external individuals or organizations that are intended to solicit business for an external individual or company
- Spam comments
- Such comments will be removed from our social media accounts
- Repeat offenders will be warned and, if necessary, banned from our social media accounts

## Sample #2

Reference: Policy bank Media Policy

Policy number	[insert number]	Version	[insert number]
Drafted by	[insert name]	Approved by Board on	[insert date]
Responsible person	[insert name]	Scheduled review date	[insert date]

## Introduction

This Social Media Policy outlines [Organization]'s expectations of Workers when using social media or making public comments online.

*Optional:* [Organization] embraces the use of social media for the [promotion, development and delivery of [Organization]'s goods and services] and is committed to ensuring that social media engagement connected with [Organization] is lawful, professional and respectful.

## Purpose

Social media is an important tool that [Organization] uses to publicise its operations and solicit public support.

The purpose of this policy is to encourage Workers to generate appropriate social media content in connection with [Organization].

It also aims to set expectations and protocols to ensure that social media posts are consistent with the values of [Organization] and that posts made through its social media channels do not damage the [Organization]'s reputation.

## Scope

3.1 This policy applies to:

Employees	Directors	Officers	Contractors (including employees of contractors)	Volunteers	Members*
✓	✓	✓	✓	✓	✓

*\* You could also consider if this policy should be extended to members. You may need to have it as a condition of membership that you abide by all Organization policies, including this Policy (and you would need to make it available to them) so that might not be feasible.*

1.1 People covered by this policy will be collectively referred to as **'Workers'**.

1.2 Social media includes, but is not limited to, engagement on:

- a) Twitter
- b) Facebook
- c) Instagram
- d) Pinterest
- e) Google+
- f) WordPress/Blogger
- g) YouTube/Vimeo

- h) iTunes/Podcasting
- i) Snapchat
- j) TikTok
- k) Reddit
- l) LinkedIn
- m) Online chat forums/tools (e.g. WhatsApp, Messenger, WeChat, Viber)
- n) and any other new forms of social media that may emerge from time to time

## Values

- 1.3 [Organization]'s social media use shall be consistent with the following core values:
- a) **Integrity:** [Organization] will not knowingly post incorrect, defamatory or misleading information about our own work or the work of other Organizations or individuals. In addition, we will post in accordance with the Organization's Copyright and Privacy policies.
  - b) **Professionalism:** [Organization]'s social media represents the Organization as a whole and should seek to maintain a professional and uniform tone. Staff and volunteers may, from time to time and as appropriate/authorised, post on behalf of [Organization] using our online profiles, but the impression should remain one of a singular Organization rather than a group of individuals.
  - c) **Information Sharing:** [Organization] encourages the sharing and reposting of online information that is relevant, appropriate to our mission and aims, and of interest to our members.
  - d) [Add or reference your Organization's own key values, as appropriate.]

## Policy

- 1.4 All posts that relate to [Organization] must meet content guidelines for use of social media. This includes:
- a) posts on or connected with [Organization]'s social media accounts (**Professional Social Media Use**); and
  - b) posts on Workers' own social media accounts (**Personal Social Media Use**).
- 1.5 Professional Social Media Use
- The [CEO/Social Media Manager] may approve an individual to post on [Organization]'s social media accounts (**Approved Poster**). In determining who should be an Approved Poster, the CEO/Social Media Manager may consider:
- a) the extent of control [Organization] has over the individual
  - b) whether the individual has the appropriate communication skills
  - c) what understanding the individual has of the risks of social media use
  - d) current and former responsibilities and how the individual performed in those roles

Only Approved Posters should have access to social media account passwords and logins.

The CEO must keep records of Approved Posters and review the appropriateness of approvals on an annual basis.



## Personal Social Media Use

Subject to this Policy, Workers should seek prior approval from the [CEO/Social Media Manager] before engaging in Personal and/or Professional Social Media Use about or connected with [Organization], save for promoting or supporting [Organization]'s activities.

Workers that are not Approved Posters may engage in Personal and/or Professional Social Media Use about or connected to [Organization] without prior approval from [Organization], provided that the use complies with the Social Media Policy, Content Guidelines and Procedure.

## Content guidelines

- 1.6 [Organization] respects the right of Workers to participate in political, advocacy and community activities.
- 1.7 Workers should be aware that content published online and on social media is, or may become, publicly available, even from personal social media accounts. [Organization] expects Workers to take reasonable steps to ensure that their social media use and public comments fall within the following parameters.
- 1.8 When engaging in Professional Social Media Use, [Organization] expects that Workers will:
  - a) be professional and respectful
  - b) promote the best interests of [Organization]
  - c) not include misleading or deceptive statements or inferences
  - d) refrain from inappropriate swearing
  - e) only include intellectual property (such as photos, videos and quotes) that [Organization] has permission to use or that do not require permission to use
  - f) comply with [Organization]'s Privacy Policy.
- 1.9 When engaging in Personal and/or Professional Social Media Use, Workers must also ensure that they **[delete or add additional clauses as appropriate]**:
  - a) don't use a work email address to register personal social media accounts
  - b) refrain from conduct that has the potential to damage [Organization]'s reputation
  - c) don't make comments that are unlawful, obscene, defamatory, threatening, harassing, discriminatory or hateful to, or about other Workers, clients or stakeholders of [Organization]
  - d) don't make comments that are, or could be perceived to:
    - i. be made on behalf of [Organization], rather than an expression of a personal view unless approved or consistent with the Social Media Policy and Procedure
    - ii. compromise the Worker's capacity to fulfil duties in an impartial and unbiased manner
  - e) are mindful that their behaviour is bound by [Organization]'s [Policies, Procedures and Code of Conduct], even outside work hours (e.g. comments made on social media about a colleague)
  - f) make clear that any views expressed in Personal Social Media use are their own and not those of [Organization] (However, this will not necessarily protect them from breaching the Policy).

## Responsibilities

- 1.10 The [CEO/Board] shall nominate a [Social Media Manager] to co-ordinate [Organization]'s social media management.
- 1.11 Workers may, from time to time, post or comment on the activities of [Organization] and where appropriate/authorised, post on behalf of [Organization] using the Organization's online social media profiles. Unless a Worker is promoting or supporting the activities of [Organization], this should only be done only with the express knowledge and authorisation of [Organization/the Social Media Manager].
- 1.12 The [Social Media Manager] has responsibility for overseeing the Organization's Social Media Strategy. Their role includes:
- a) Determining which social media platforms are most appropriate for [Organization] to engage in, and policing those boundaries
  - b) Ensuring that all posts are in keeping with [Organization]'s mission, core values, and policies
  - c) Ensuring appropriate and timely action is taken to correct or remove inappropriate posts (including defamatory and/or illegal content), and to minimise the risk of a repeat incident
  - d) Ensuring that appropriate and timely action is taken to repair relations with any persons or Organizations offended by an inappropriate post
  - e) Moderating and monitoring public response to social media, such as blog comments and Facebook replies, to ensure that trolling and spamming does not occur, to remove offensive or inappropriate replies, or caution offensive posters, and to reply to any further requests for information generated by the post topic
  - f) Developing a strategy for expanding our social media footprint over time

## Breaches

- 1.13 If a Worker breaches this Policy or associated Procedures, they may be subjected to disciplinary action, up to and including the termination of their engagement.

## Sample #3

**PURPOSE or Policy Statement:** To ensure that SAMPLE ORGANIZATION's use of social media channels supports the organization's overall strategic objectives, adheres to current legal accountability standards and adheres to the principles and values outlined in Board Governance Policy and Executive Limitations.

Specifically, SAMPLE ORGANIZATION's use of social media channels/tools will:

1. Support SAMPLE ORGANIZATION, and its operations, in communicating accurate, fair and timely information to a diverse range of stakeholders, to the best of its ability;

2. Distribute content that supports SAMPLE ORGANIZATION's mandate and adheres to the organization's style of presenting information;
3. Be open to individual staff members responding on behalf of SAMPLE ORGANIZATION on social media, as long as it has been identified as his or her area of expertise;
4. Adhere to SAMPLE ORGANIZATION's visual identity guidelines
5. Adhere to all writing and editing style guidelines developed for particular SAMPLE ORGANIZATION publications, or according to Canadian Press Style Guide, where applicable; and
6. Adhere to all Canadian copyright rules and regulations for publishing ideas, copy, photography and/or graphic design on electronic mediums.
7. Adhere to any legal requirements, including privacy and human rights policies, which guide the work of SAMPLE ORGANIZATION staff, volunteers and other stakeholders.

#### DEFINITION OF SOCIAL MEDIA

At SAMPLE ORGANIZATION, social media means any channel for online publication and commentary, including, without limitation, websites, blogs, wiki's, and any social network sites such as Facebook, Twitter, flickr, Instagram, YouTube, Periscope, Snapchat, LinkedIn and/or Pinterest, and any future developments in this area. This policy is applied in addition to, and to complement, any existing or future use of technology, mobile devices, computers, email and /or internet.

SAMPLE ORGANIZATION's social media includes channels maintained by the organization for publication and promotion of the organization's messages, as well as the distribution of SAMPLE ORGANIZATION's messaging on third party or staff-directed online channels.

#### GUIDELINES FOR ACCEPTABLE USE OF SOCIAL MEDIA:

These are the official guidelines for social media use on behalf of SAMPLE ORGANIZATION. As a SAMPLE ORGANIZATION employee, intern, contractor or volunteer creating or contributing to any kind of social media, whether directly managed by SAMPLE ORGANIZATION or not, these guidelines apply. SAMPLE ORGANIZATION expects that all who participate in social media on behalf of the organization to understand and follow these guidelines and to be aware that they will continually evolve as social media evolves.

Your Role on Social Media

In online social networks, the lines between public and private, personal and professional are blurred. Just by identifying yourself as a representative of SAMPLE ORGANIZATION, you are creating a perception about SAMPLE ORGANIZATION and your expertise. Be sure that all content associated with you is consistent with your abilities and falls within the Acceptable Use guidelines identified for SAMPLE ORGANIZATION employees in this policy.

#### Time Spent on Social Media

Individual roles within the organization will be required to dedicate time to maintain the organization's social media presence. The time needed to complete various duties will be determined in consultation with an employee's supervisor and based on the goals of the program.

Personal use of social media channels, not used to advance the strategic goals of SAMPLE ORGANIZATION, should be limited to an employee's personal time, including breaks. Regularly checking personal social media accounts can be fit into breaks during the day, but it should not impact the on-going work of the organization.

#### POSTING AND RESPONDING TO OTHERS ON SOCIAL MEDIA

##### **Be transparent and responsible.**

You are responsible for the content you post. Never impersonate someone else, or purposely obscure your identity. Build your own reputation. Care about what you are talking about and think about the consequences. Do not make statements that could damage the reputation of SAMPLE ORGANIZATION.

##### Respect your audience

The public in general, and SAMPLE ORGANIZATION's employees and stakeholders, reflect a diverse set of customs, values and points of view. Don't say anything contradictory or in conflict with the SAMPLE ORGANIZATION web site or overarching policy. This includes the obvious (no ethnic slurs, offensive comments, defamatory comments, personal insults, obscenity, etc.), but also proper consideration of privacy and of topics that may be considered objectionable or inflammatory, such as politics and religion. Use your best judgement and be sure to make it clear when the views and opinions expressed are yours alone and do not represent the official views of SAMPLE ORGANIZATION.

##### State when it's your personal opinion.

For your own personal social media opinions, please use a disclaimer, particularly if your comments are partisan or are tied to a particular affiliation. Always disclose if you've received something in exchange for a review of a product or service. Disclaimer: *This is a personal blog (or other social media posting). The opinions expressed here represent my own and not those of SAMPLE ORGANIZATION, my employer.*

Write what you know.

The best way to be interesting, stay out of trouble and have fun is to write about what you know. Stick to your area of expertise and provide unique, individual perspectives on what's going on at SAMPLE ORGANIZATION and in the world.

Spelling and grammar does matter

Use a spell-checker and edit your posts for grammatical errors.

Protect stakeholder confidentiality

Respect proprietary information and content, confidentiality, brand, trademark, copyright and fair use. Know the laws and don't break them. Don't discuss organizational and/or stakeholder issues without permission. It is acceptable to discuss general details about kinds of projects and to use non-identifying pseudonyms for a stakeholder so long as the information provided does not violate any non-disclosure agreements that may be in place with partners or stakeholders, or make easy for someone to identify the stakeholder. Do not conduct SAMPLE ORGANIZATION business on your personal social media channels.

Respect copyright laws.

Always cite when quoting someone else. Make sure images are shareable and attribute them. Never use copyrighted material without permission, and that includes SAMPLE ORGANIZATION's own copyright and brands. You should never quote more than short excerpts of someone else's work. It is good general practice to link to others' work rather than reproduce it.

Use judgement in sharing links.

Due to SAMPLE ORGANIZATION's role in the cultural community, sharing links to content often implies an endorsement of some kind. Be sure that the links or postings made on behalf of SAMPLE ORGANIZATION reflect the strategic goals of the organization.

Protect your own privacy.

Privacy settings on social media platforms should be set to allow anyone to see profile information similar to what would be on the SAMPLE ORGANIZATION website. Other privacy settings that might allow others to post information or see information that is personal should be set to limit access. All of your social media use might not be work-related, so ensure that the items you share with your close personal friends are kept separate from your work-related social media interactions.

Everything online is discoverable.

Be mindful of posting information. If you can't show it to your grandmother or a judge, don't post it. If in doubt, ask.

## **RED LIGHT, YELLOW LIGHT, GREEN LIGHT METHOD**

In order to facilitate subjective social media decision making SAMPLE ORGANIZATION has implemented a “Red Light, Yellow Light, Green Light” system to aid staff and other stakeholders in what sorts of content and behaviours are acceptable (green light) and which are not (red light) and which might require some caution (yellow light).

### **Example Red Light Items:**

- Commenting on government policies.
- Engaging in discussions that violate SAMPLE ORGANIZATION privacy rules.
- Debating topics or issues.
- Using questionable language or attaching non-relevant links.
- Posts, photos or responses that are insulting to colleagues in the community.
- Debating politics or issues (if someone wants to debate, an organizational rep will call them, meet with them, or simply decline to engage).

### **Example Yellow Light Items:**

- Answering complaints in a public forum.
- Commenting on matters of a controversial nature.
- Negative commentary.
- Personal opinions that may be contrary to SAMPLE ORGANIZATION philosophy.
- Posts that relate negative commentary on government policies.
- Support of a specific public

### **Example Green Light Items**

- Positive comments on initiatives and events
- Promoting and live posting at events and conferences (when in attendance).
- Photographs documenting events (when in attendance).
- Opportunities to say positive things about the community.

ACKNOWLEDGING AND CORRECTING MISTAKES.

If you make a mistake, admit it quickly. Most of the time, you can then move on. If you choose to modify an earlier post, make it clear that you have done so. If not, let the team help you fix your mistakes; explain the situation and the team can come together to find a solution.

#### Making corrections

It is important to respond to incorrect information provided, or incorrect allegations made, in the social media channels where the mistake/or incorrect statements appear.

#### Responding to issues

If you see misrepresentations made about SAMPLE ORGANIZATION on social media, you may point it out. Always do so with respect and with facts. If you speak about others, make sure what you say is factual and does not disparage that party. Avoid arguments and defensive remarks.

#### Disclaimers

Many social media users include a prominent disclaimer saying who they work for, but that they're not speaking officially. This is good practice and is encouraged, but don't count on it to avoid trouble – it may not have much legal effect.

#### ARCHIVING SOCIAL MEDIA

##### **Comments and Issues requiring response by SAMPLE ORGANIZATION**

All issues and inquiries to SAMPLE ORGANIZATION social media channels that require personal follow-up, or ongoing monitoring and attention, will be copied to print and filed according to SAMPLE ORGANIZATION policy and procedures for filing of inquiries to the organization.

#### ENFORCEMENT

SAMPLE ORGANIZATION staff, term employees and volunteers are expected to abide by this policy. If, for any reason an incident occurs that violates the policy, we expect the issue will be brought to our attention immediately so that we can work together toward a resolution. As this is a relatively new area with many new and yet to be discovered applications, each issue will be assessed on a case-by-case basis. SAMPLE ORGANIZATION will ensure that any consequences will be commensurate with the violation.

# Media Relations Policy

Reference: Policy Bank-Institute of Community Directors

Policy number	<<insert number>>	Version	<<insert number>>
Drafted by	<<insert name>>	Approved by Board on	<<insert date>>
Responsible person	<<insert name>>	Scheduled review date	<<insert date>>

## Introduction

Local, state, national and international media are vital partners in achieving the goals of [Name of Organization]. In order to maximise the advantages of media presentation and minimise the risks of media misrepresentation it is necessary to establish guidelines for how media contacts will be conducted.

It is not the intention of this policy to curb freedom of speech or to enforce strict rules and regulations. Rather, the intention is to establish a framework for achieving an effective working relationship with the media. The Organization welcomes the opportunity to talk to the media and, through them, to debate issues in the public arena.

In dealing with the media, staff, Board members and other volunteers should be conscious that they may be seen as representatives of the Organization and should therefore avoid making comments or participating in photo opportunities that may damage the long-term reputation of [Name of Organization].

## Purpose

[Name of Organization] works with the media in order to

- advocate for the goals of the Organization
- promote the work of the Organization
- inform the public of the details of the Organization
- assist in fundraising for the Organization

In order to ensure that these purposes can be fulfilled, this policy regulates the choice of people entitled to speak for [Name of Organization].

The media themselves have a vital role to play on behalf of the community in holding [Name of Organization] to account for its policies and actions. It is important that they have access to officers and members and to background information to assist them in this role.

To balance this, [Name of Organization] must have the capacity to defend itself from any unfounded criticism and will ensure that the public are properly informed of all the relevant facts (if necessary, using other channels of communication).

It is the responsibility of all staff, board members and volunteers to ensure that effective media relations are maintained in order to achieve the aims of [Name of Organization]. Naturally, in doing this, certain legal constraints might apply (e.g. not making comment on current court cases, especially those before a jury).



This policy deals with the day-to-day relationship between [Name of Organization] and the media and does not address how the Organization will work with the media in a crisis, for which separate guidelines are available as an Our Community Help sheet on [What to do in a Media Crisis](#).

## Core Policy

[Name of Organization] operates on the values of

- **Honesty:** The Organization will never knowingly mislead the public, media or staff on an issue or news story.
- **Transparency:** The Organization will promote openness and accessibility in our dealings with the media, whilst complying with the law and maintaining confidentiality when appropriate.
- **Clarity:** All communications with the media will be written in plain English
- **Balance:** Information provided to the media by [Name of Organization] will as far as humanly possible be objective, balanced, accurate, informative and timely.

[Name of Organization] should seek to establish and maintain a good and open relationship with the media. It is important that the Organization works with the media to communicate important public information messages about its work and its goals.

However, contact concerning any significant matter in the name of or on behalf of [Name of Organization] should only be made by staff, Board members and other volunteers where:

### **They have consulted the Communications Officer nominated by the Board**

They have the required expertise to speak on the issue under discussion

### **They have some experience in media relations.**

Where any of these criteria do not apply, staff, Board members and volunteers are recommended to exercise extreme caution and to seek guidance from the most senior staff or Board member available.

## Authorisation

<Signature of Board Secretary>

<Date of approval by the Board>

<Name of Organization

## Partnering Policy

Partnerships place formal obligations and risks upon **Organization name**. Therefore, **Organization name** will enter into partnerships only if the conditions in this policy are met and the partnership fits **Organization name's** mission and mandates.

### *Advisory groups, reference groups and task forces*

- **Organization name** clearly distinguishes between *Partnerships* (in which **Organization name** has formal obligations, roles and responsibilities) and *Advisory groups, reference groups, task forces, etc.* When **Organization name** participates in advisory groups, reference groups, task forces, etc. there are no formal obligations placed on our organization. Participants are there only to give advice and feedback. **Organization name** board and staff participate in advisory groups, reference groups, task forces, etc. based on their capacity to participate.
- No formal agreements or board permission are necessary to participate in advisory groups, reference groups, task forces, etc. since **Organization name** is not formally bound nor does it have any legal obligations based upon its participation. Participation by any staff member will happen at the discretion of the Executive Director.

### *Partnerships*

- **Organization name** will not consider entering into partnerships without a formal business plan or a project proposal being prepared by the organization requesting a partnership or by **Organization name** itself. This documentation must include the roles, responsibilities, goals, timeframes, project finances, financial compensation, project management strategy, staffing plans, etc.
- **Organization name** will not enter into any partnerships if the project's goals do not clearly fit with our mission statement and our mandates.
- **Organization name** will not enter into any partnerships unless it has both the board and staff capacity to effectively participate in the partnership.
- The organization requesting the partnership must develop a formal draft partnership agreement that clearly spells out roles, responsibilities, timelines, communication process, staffing and finances. All partners will review and amend this agreement as appropriate and will formally sign this document before any partnership begins. The agreement must include **Organization name's** right to dissolve a partnership if a partner is not adhering to the agreement.
- Communication is critical to the success of any partnership. The party requesting the partnership must develop a plan for how information will be shared over the duration of the partnership. This plan must be reviewed and approved by **Organization name**. Partnering organizations will provide **Organization name** staff with update reports at mutually agreed upon timeframes.
- The organization requesting the partnership must have a solid track record in project management and organizational management.
- The following "*Partnership Checklist*" will be filled out by **Organization name** staff. If the risk is deemed, by **the Executive Director**, to be low (financial, reputation, capacity, etc.)

after filling out the checklist, the Executive Director may proceed with the partnership without board approval. However, if there is a medium to high degree to risk, then board approval is needed. Financial Policy guidelines must be adhered to regarding signing authority and limitations.

- If a partnership is deemed to be failing, the partnership agreement will be mutually reviewed to determine whether the principles are being adhered to. Based on this review, **Organization name board and staff** will decide what action to take (remedial action or discontinue the partnership).

## Partnership Checklist

Organization name's Partnership Checklist	Yes / No
1. Has a formal business plan or project proposal been prepared by the organization requesting a partnership and shared with Organization name?	
2. Based on this business plan or project proposal, does Organization name see an appropriate, manageable and beneficial partnership role for our organization?	
3. Does the proposed initiative clearly fit with Organization name's mission, mandates and goals?	
4. Will a partnership provide significant benefits to Organization name and the community?	
5. Has a draft partnership agreement been prepared by the organization requesting the partnership? Does Organization name approve of the terms and conditions of the partnership agreement?	
6. Has Organization name's proposed role in the partnership been clearly articulated in writing? Are we comfortable with that role?	
7. Does Organization name have the board and staff capacity and any other required resources to fulfill our proposed role in the partnership?	
8. Will Organization name's involvement in the proposed initiative maintain Organization name's reputation?	
9. Does a high level of organizational trust exist between Organization name and any proposed partners?	
10. Will Organization name receive adequate compensation for its role / work in the partnership?	
11. Do the proposed partners have complementary visions and missions?	

<p>12. Does the proposed partner have a solid track record in managing their organization?  Is there clear evidence that that the organization has the capacity to carry out this project / initiative?)</p>	
<p>13. <b>Organization name</b> believes in ongoing communication: internally, with the literacy/employment field(s), with funders and between any partners. Is there a communication plan for the project that is agreeable to Organization name? Does the proposed partner have a strong track record in effective communication?</p>	
<p>Overall assessment and recommendation:</p>	
<p>Name of person filling out this form:</p>	
<p>Date:</p>	
<p>Areas of significant concern and action (if any) that can be taken to correct the concerns:</p>	
<p>Is this a low-to-high risk partnership that needs to go to the board for formal approval? What level of financial approval is required?</p>	
<p>Recommendation on proceeding with this proposed partnership: Yes: ___      No: ___</p>	
<p>Approved by:</p>	
<p>Additional comments:</p>	