



**POLICY COMMITTEE  
REVISED AGENDA**

November 6, 2024

1:00 p.m.

Cariboo Regional District Board Room  
Suite D - 180 Third Avenue North  
Williams Lake, B.C.

**Pages**

**1. CALL TO ORDER**

*(The meeting is scheduled to commence at 1:00 p.m. - at the conclusion of the Finance/Budget Committee meeting).*

**1.1 Adoption of Agenda**

That the agenda be adopted as presented.

**2. ADOPTION OF MINUTES**

**2.1 Minutes of the Policy Committee Meeting - April 30, 2024**

1

That the minutes of the Policy Committee meeting, held April 30, 2024, be adopted.

**3. REPORTS AND CORRESPONDENCE**

**3.1 Anti-Racial Discrimination and Anti-Racism Policy**

5

That the draft Anti-Racial Discrimination and Anti-Racism Policy be adopted as attached.

**3.2 Request for further detail on CAO Evaluation Policy Amendment Request**

17

That the Committee provide specific targets and goal-setting standards to be included in the CAO Evaluation Policy.

**3.3 Land Acknowledgement for Meetings**

21

This item was referred from the October 18, 2024 Board meeting.

*Action at the discretion of the committee.*

**3.4 Draft – Privacy Management Program Policy**

23

That the Privacy Management Program Policy be adopted as presented.

#### 4. **ADJOURNMENT**

That the meeting of the Policy Committee be adjourned at TIME, November 6, 2024.



**CARIBOO REGIONAL DISTRICT  
POLICY COMMITTEE MINUTES**

**April 30, 2024**

**10:00 am**

**Cariboo Regional District Board Room  
Suite D - 180 Third Avenue North  
Williams Lake, B.C.**

**PRESENT :** Chair M. Sjostrom, Director J. Massier, Director M. Neufeld, Director A. Richmond, Director J. Glassford, Director E. de Vries

**GUEST:** Director M. Wagner

**STAFF :** A. Johnston, Manager of Corporate Services/Deputy CAO, G. Hilliard, Recording Secretary

**1. CALL TO ORDER**

**1.1 Election of Vice-Chair**

First call by the Manager of Corporate Services/Deputy CAO for nominations for the position of Vice Chair of the Policy Committee for 2024.

Director de Vries nominated Director Richmond for the position of Vice Chair of the Policy Committee for 2024.

Director Richmond accepted the nomination.

Second call by the Manager of Corporate Services/Deputy CAO for nominations for the position of Vice Chair of the Policy Committee for 2024.

Third call by the Manager of Corporate Services/Deputy CAO for nominations for the position of Vice Chair of the Policy Committee for 2024.

There being no further nominations, the Manager of Corporate Services/Deputy CAO declared nominations closed and declared Director Richmond Vice Chair of the Policy Committee for 2024.

**1.2 Adoption of Agenda**

**PC.2024-4-1**

Moved Melynda Neufeld

Seconded Director Richmond

That the agenda be adopted as presented.

**Carried**

**2. ADOPTION OF MINUTES**

**2.1 Minutes of the Policy Committee Meeting - January 24, 2024**

**PC.2024-4-2**

Moved Director Glassford

Seconded Melynda Neufeld

That the minutes of the Policy Committee meeting, held January 24, 2024, be adopted.

**Carried**

**3. REPORTS AND CORRESPONDENCE**

**3.1 CAO Evaluation Policy Amendment**

**PC.2024-4-3**

Moved Director de Vries

Seconded Melynda Neufeld

That the CAO Evaluation Policy be amended to reflect that the CAO will set annual goals and report back on them to the Board, which will assist in the CAO evaluation, and that the amended policy be brought back to the Policy Committee for review.

**Carried**

**3.2 2024 Policy Committee Meeting Schedule**

**PC.2024-4-4**

Moved Director Richmond  
Seconded Director de Vries

That the following 2024 Policy Committee meeting schedule be endorsed:

January 24 – 10:00 am to noon (*completed*)

April 30 – 10:00 am to noon (*completed*)

July 23 - 10:00 am to noon

November 6 – at the conclusion of Finance/Budget Committee

**Carried**

**3.3 Draft – Post-Secondary Bursary Program**

**PC.2024-4-5**

Moved Director Richmond  
Seconded Director de Vries

That the Post-Secondary Bursary Program Policy, as attached, be recommended for adoption to the Cariboo Regional District Board of Directors.

**Carried**

**4. ADJOURNMENT**

**PC.2024-4-6**

Moved Melynda Neufeld  
Seconded Director de Vries

That the meeting of the Policy Committee be adjourned at 10:56 a.m., April 30, 2024.

**Carried**

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Chair

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Manager of Corporate Services



**Date:** 18/07/2024

**To:** Chair and Directors, Policy Committee

**And To:** Murray Daly, Chief Administrative Officer

**From:** Alice Johnston, Manager of Corporate Services/Deputy CAO

**Date of Meeting:** Policy Committee\_Nov06\_2024

**File:** 0340-50

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## Short Summary:

Anti-Racial Discrimination and Anti-Racism Policy

## Voting:

-

## Memorandum:

Attached is a draft anti-racial discrimination and anti-racism policy provided as guidance to local governments from Lidstone & Company in 2020. It is not intended to supersede or supplant our Bullying and Harassment Policy; rather to publicly acknowledge the existence of racism in all its forms and commit to breaking down barriers, deconstruct biases and foster an inclusive, respectful and welcoming environment for all who work, volunteer, do business and interact with the CRD.

## Attachments:

Draft Policy

## Financial Implications:

n/a

## Policy Implications:

This item introduces a new Policy to the Committee for review and discussion.

## Alignment with Strategic Plan:

- Infrastructure and Asset Management:** To establish a systematic, predictable approach to managing the regional district's assets and infrastructure that builds on current asset management data and condition assessments.
- Enhanced Communications and Engagement:** To build trust and credibility of the regional district by enhancing our communications and engagement with citizens, stakeholders, and volunteers.

- **Effective and Responsive Land Use Planning and Development:** To ensure our land use planning and development is responsive to future growth and housing needs, anticipates risks and hazards associated with climate change and provides efficient and consistent processes for landowners and developers.
  
- **Relationships with First Nations:** To foster a healthy and inclusive region by building and strengthening our relationships with First Nations and embracing the principles of reconciliation.

Click here to enter text.

### **CAO Comments:**

Click here to enter text.

### **Options:**

- 1) Endorse Policy as presented;
- 2) Request amendments;
- 3) Defer;
- 4) Reject.

### **Recommendation:**

That the draft Anti-Racial Discrimination and Anti-Racism Policy be adopted as attached.



## **ANTI-RACIAL DISCRIMINATION AND ANTI-RACISM POLICY**

### **1.0 STATEMENT OF PRINCIPLES**

- 1.1** The Cariboo Regional District recognizes the diversity of our community and believes that all members of our community including, but not limited to, residents, elected officials, employees, volunteers and visitors of colour and Indigenous Peoples have the right to live, work, do business and play in an environment that asserts and supports their fundamental rights, personal worth and human dignity.
- 1.2** The Cariboo Regional District acknowledges and recognizes the existence in our community of racism in all its forms, including Cultural, Environmental, Institutional, Systemic and Individual.
- 1.3** The Cariboo Regional District is committed to breaking down barriers, deconstructing biases and fostering and promoting an inclusive, respectful, and welcoming environment for all, one that is free from racial discrimination and racism.
- 1.4** The Cariboo Regional District acknowledges its role and responsibility in protecting every person's right to be free from racial discrimination and racism.
- 1.5** The Cariboo Regional District is further committed to respecting and upholding the vision and principles of British Columbia's Human Rights Code and the implementation of the Calls to Action of the Truth and Reconciliation Commission.
- 1.6** This policy is intended to demonstrate the Cariboo Regional District's commitment to conducting the day-to-day operations and governance in an anti-discriminatory and anti-racist manner and environment. The implementation of this Policy is a public commitment that the Cariboo Regional District will continue to make best efforts to ensure that all who work and interact with the Cariboo Regional District are able to do so in an environment and manner free of racism and racial discrimination.

### **2.0 SCOPE**

- 2.1** This Policy applies to all employees, elected officials, contractors, volunteers, and students working or volunteering for the Cariboo Regional District or providing professional services to it.
- 2.2** This Policy applies to the interpretation and application of current and new bylaws, regulations, policies, procedures, contracts, procurements, and activities carried out by the Cariboo Regional District, all of which will be required to be compliant with the principles and particular requirements specified within this Policy.

**2.3** The scope of this Policy includes all aspects of the Cariboo Regional District's activities, including its working environment, procurement, services, meetings and various public events. In addition, this scope will include ongoing relationships with individuals, businesses, community groups, and contractors as well as with other local governments and public and private bodies.

**2.4** This policy is intended to supplement and support British Columbia's Human Rights Code and related Cariboo Regional District policies such as the Workplace Bullying, Harassment and Violence Policy – Employees/Directors.

### **3.0 ROLES AND RESPONSIBILITIES**

#### **3.1 Board Members:**

- 3.1.1 Take leadership to model inclusive behaviour and language and not participate in racist or racially discriminatory conduct;
- 3.1.2 Support, promote and foster the principles of this Policy in all of their work and interactions;
- 3.1.3 Ensure that Management is trained on this Policy and is implementing it;
- 3.1.4 Report incidents of racial discrimination or racism experienced or witnessed, immediately to the CAO (or their Deputy or designate);
- 3.1.5 Cooperate and participate in good faith in any investigation under this Policy; and
- 3.1.6 Maintain the confidentiality of all involved in a complaint under this Policy.

#### **3.2 Management:**

- 3.2.1 Ensure that the workplace and the business of the local government is free from racial discrimination and racism and ensure the principles of this Policy are reflected in the execution of their duties, operational policies and practices within their area of responsibility;
- 3.2.2 Model inclusive behaviour and language and not participate in racist or racially discriminatory conduct;
- 3.2.3 Support, promote and foster the principles of this Policy in all their work and interactions;

- 3.2.4 Train Board members on this Policy at the beginning of each term of office and provide refresher training annually thereafter. Training should be meaningful, interactive and involve group work where participants can work through various case studies highlighting appropriate and inappropriate behaviour;
- 3.2.5 Train all new employees, volunteers, and contractors on this Policy at the commencement of their employment or services and provide refresher training annually thereafter. Training should be meaningful, interactive and involve group work where participants can work through various case studies highlighting appropriate and inappropriate behaviour;
- 3.2.6 Report incidents of racial discrimination or racism experienced or witnessed, immediately to a supervisor or the CAO (or their Deputy or designate);
- 3.2.7 Listen to any complaint, treating it sensitively, seriously and confidentially;
- 3.2.8 When appropriate and required, provide a timely, thorough, confidential and objective investigation of any allegation and answer any complaints in accordance with this Policy;
- 3.2.9 If necessary or appropriate, appoint an independent third-party investigator to investigate allegations or complaints when required under section 4.0;
- 3.2.10 Subject to procedures referred to in section 4.0, review the findings and recommendations and determine, in consultation with Human Resources, Management, legal counsel and/or the Board as applicable, the outcome and the appropriate action to be taken, which may include education, training or disciplinary action, dependent upon the results;
- 3.2.11 Maintain the confidentiality of all involved in a complaint under this Policy;
- 3.2.12 Cooperate and participate in good faith in any investigation under this Policy; and
- 3.2.13 Ensure this Policy is reviewed at least every 4 years for effectiveness.
- 3.2.14 The Chief Administrative Officer (“CAO”) is responsible for the implementation and administration of this Policy.

### **3.3 Employees, Volunteers and Contractors:**

- 3.3.1 Must not engage in racial discrimination or racism and conduct oneself and speak in an inclusive manner;

- 3.3.2 Report incidents of racial discrimination or racism experienced or witnessed, immediately to a supervisor or the CAO (or their Deputy or designate);
- 3.3.3 Maintain the confidentiality of all involved in a complaint under this Policy; and
- 3.3.4 Cooperate and participate in good faith in any investigation under this Policy.

#### **3.4 Union:**

- 3.4.1 Take an active role as partners in supporting, promoting and fostering the principles of this Policy in all their work and interactions with their members, Management and Board.

#### **3.5 Complaints**

- 3.5.1 Complainants have a right to:
  - 3.5.1.1 Make a complaint and receive a copy of the complaint;
  - 3.5.1.2 Be informed of the status and progress of the investigation;
  - 3.5.1.3 Be informed of a summary of the results of the investigation in writing including a summary of corrective action that has or will be taken as a result of the investigation;
  - 3.5.1.4 Not be subject to retaliation; and
  - 3.5.1.5 Withdraw a complaint at any time during the procedure; however, depending upon the nature and severity of the allegations, the CAO (or Deputy or designate), may determine that an investigation is required, and the process will continue despite the withdrawal.

#### **3.6 Respondents**

- 3.6.1 Respondents have a right to:
  - 3.6.1.1 Be informed that a complaint has been filed;
  - 3.6.1.2 Be informed of the status and progress of the investigation;
  - 3.6.1.3 Have the allegations provided to any independent investigator;
  - 3.6.1.4 Be informed of the allegations against them and be provided an opportunity

opportunity to respond; and

3.6.1.5 Be informed of a summary of the results of the investigation in writing.

### **3.7 Bystanders**

3.7.1 Bystanders have the right to not be subject to retaliation because they have participated as a witness; and

3.7.2 Bystanders have a responsibility to meet with the investigator and to cooperate in good faith with all those responsible for the investigation of the complaint.

### **3.8 Investigator**

3.8.1 The investigator, if engaged under the process referred to in section 4.0, shall:

3.8.1.1 Have expertise regarding the matters covered under this Policy;

3.8.1.2 Ensure the Respondent is informed of the allegations;

3.8.1.3 Ensure all parties involved have been informed of their rights and responsibilities;

3.8.1.4 Interview the parties concerned and any witnesses;

3.8.1.5 Collect all pertinent information;

3.8.1.6 Recommend a mediation process where appropriate;

3.8.1.7 Prepare a written report;

3.8.1.8 Ensure the investigation is completed in a timely fashion taking into account particular circumstances; and

3.8.1.9 Maintain confidentiality.

**4.0 Complaint Process:** All members of the Board, management, employees, volunteers and contractors of the Cariboo Regional District have a responsibility to treat all complaints under this Policy seriously and to investigate all complaints of racism and racial discrimination pursuant to the complaint procedure set out in the Cariboo Regional District's Workplace Bullying, Harassment and Violence Reporting/Investigating Procedures.

**5.0 Remedies:** Any individual covered by this Policy, who is found to have engaged in, or known about and took no action to report or stop racial discrimination or racist behaviour contrary to this Policy may be subject to appropriate action depending up on the severity of the misconduct. The range of appropriate remedy may include, but is not limited to, the following:

**5.1** In the case of an officer or employee:

- 5.1.1 Oral and/or written apology from the Respondent and/or Cariboo Regional District;
- 5.1.2 Any administrative change that is appropriate (i.e.: job site or position transfer; no contact for a period of time, temporary or permanent changes to reporting structures or work assignments)
- 5.1.3 Coaching;
- 5.1.4 Counselling;
- 5.1.5 Training or education;
- 5.1.6 Re-orientation to this Policy and its purpose;
- 5.1.7 Discipline up to and including termination of employment for just cause;
- 5.1.8 Termination of contract for service or of a volunteer opportunity.

**5.2** In the case of an elected official, sanction by the Board (including but not limited to censure, removal from appointments, referral to police or legal action).

**5.3** If the Respondent is not covered by this Policy, the Cariboo Regional District will take any and all steps reasonable and necessary to remedy the substantiated complaint to protect the Complainant from future harm.

**6.0 Unsubstantiated Complaints:** If an investigator finds insufficient evidence to support the Complainant's allegations, the investigator will submit that finding. There will be no record of the complaint on the Complainant's or Respondent's file and there will be no sanction to anyone concerning the incident. A finding of no evidence is a simple reflection of an absence of evidence to support the claim and nothing more.

**7.0 No Reprisals or Retaliation:** Any reprisal or retaliatory action that is related, in any way, to the circumstances noted above against a Complainant (or person closely related to or associated with the Complainant), Bystander, Respondent, elected official or employee responsible for implementing this Policy and procedure, who in good faith:

- 7.1 Makes a complaint alleging racial discrimination or racism;
- 7.2 Identifies or opposes a practice that they reasonably believe to constitute racial discrimination or racism;
- 7.3 Implements or participates in an investigation, proceeding or hearing under this Policy or pursuant to any applicable statutory complaint process;

violates this Policy and will not be tolerated.

7.4 Any officer, employee, volunteer, appointee or contractor covered by this Policy who is found to have engaged in any reprisal or retaliation in violation of this Policy will be subject to appropriate disciplinary action, which action may include the termination of employment for just cause, termination of a contract for service or of a volunteer opportunity or legal action.

7.5 Any elected official covered by this Policy who is found to have engaged in any reprisal or retaliation in violation of this Policy will be subject to Board consideration of appropriate sanctions which may include censure, removal from appointments, referral to police or legal action.

**8.0 Vexatious Allegations and Complaints:** Any individual covered by this Policy who makes an allegation or complaint under this Policy that is subsequently found to have been made in a deliberately vexatious or malicious manner, or otherwise to have been made in bad faith, will be subject to appropriate action set out in sections 7.4 or 7.5, as applicable.

## 9.0 Limitations

9.1 This Policy articulates the position of the Cariboo Regional District and demonstrates its support and commitment to an environment that is free of racial discrimination and racism. It is not intended to supersede or supplant the other processes available to individuals or groups wishing to pursue avenues of formal complaint or redress under other Cariboo Regional District policies.

## Appendix A

### DEFINITIONS

**Barrier** – An overt or covert obstacle which must be overcome for equality and progress to be possible.

**Bias** – A subjective opinion, preference, prejudice, or inclination, often formed without reasonable justification, which influences the ability of an individual or group to evaluate a particular situation objectively or accurately.

**Cultural Racism** - The full adoption by an individual or group of the culture, values and patterns of a different social, religious, linguistic or national ethos, resulting in the diminution or elimination of attitudinal and behavioural characteristics of the original individual or group. Can be voluntary or forced.

**Discrimination** - Means the differential treatment of an individual or group, on the basis of prejudice, stereotypes or the Prohibited Grounds of Discrimination set out in provincial human rights legislation. Discrimination may be intentional or unintentional, conscious or unconscious. Discrimination can result in one individual or group having an advantage over another and can cause an individual or group to be excluded from activities which they ought to have the right to be included in.

**Diversity** - A term used to encompass the acceptance and respect of various dimensions including race, gender, sexual orientation, ethnicity, socio-economic status, religious beliefs, age, physical abilities, political beliefs, or other ideologies.

**Environmental Racism** - A systemic form of racism in which toxic wastes and dangerous and toxic facilities are located into or near marginalized communities, such as People of Colour, Indigenous Peoples, working class, and poor communities, often causing chronic illness and change in their lifestyle due to pollution of lands, air and waterways.

**Inclusive Language / Inclusion** - The deliberate selection of vocabulary that avoids explicit or implicit exclusion of particular groups and that avoids the use of false generic terms, usually with reference to gender. Making diverse members of society or an organization feel valued and respected.

**Indigenous Peoples** – Means the communities, peoples, and nations that have a historical continuity with pre-invasion, pre-settler, or pre-colonial societies that developed on their territories, as distinct from the other societies now prevailing on those territories (or parts of them). The original inhabitants of Canada who lived here for millennia before explorers arrived from Europe.

**Individual Racism** - Racist assumptions, beliefs and behaviours that stem from conscious and unconscious personal prejudice.



**Institutional Racism (Systemic Discrimination)** - The institutionalization of discrimination through policies and practices which may appear neutral on the surface, but which have an exclusionary impact on particular groups. This occurs in institutions and organizations, including government, where the policies, practices and procedures (e.g. employment systems – job requirements, hiring practices, promotion procedures, etc.) exclude and/or act as barriers to racialized groups.

**People of Colour** - Non-White racial or ethnic groups; generally used by racialized peoples as an alternative to the term “visible minority.” The word is not used to refer to Indigenous peoples, as they are considered distinct societies under the Canadian Constitution. When including Indigenous peoples, it is correct to say “people of colour and Indigenous peoples.”

**Prohibited Grounds of Discrimination** - Race, colour, ancestry, place of origin, political belief, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity, gender expression, age of a person or class of persons.

**Racial Discrimination** – Means any distinction, exclusion, restriction or preference based on race, colour, descent, or national or ethnic origin, which nullifies or impairs the recognition, enjoyment or exercise of human rights and fundamental freedoms in the political, economic, social, cultural or any other field of public life.

**Racism** - A belief that one group is superior to others performed through any individual action, or institutional practice which treats people differently because of their colour or ethnicity. This distinction is often used to justify discrimination. There are many types of racism: Institutional, Systemic, and Individual.

# Acknowledgement

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**I ACKNOWLEDGE** that I have received a copy of the Cariboo Regional District's Anti-Racial Discrimination and Anti-Racism Policy, that I have read and received training on it and fully understand the rights, duties and procedures contained in it.

**I UNDERSTAND** that the Cariboo Regional District may change, withdraw or add, rules, duties or practices described in the Anti-Racial Discrimination and Anti-Racism Policy from time to time in its sole discretion without prior notice to me, provided that the Cariboo Regional District advises me within a reasonable period of time.

**I ACKNOWLEDGE** that I have had an opportunity to discuss the content of the Anti-Racial Discrimination and Anti-Racism Policy with my immediate supervisor, Human Resources representative or the CAO.

**I AGREE** to abide by the Cariboo Regional District's Anti-Racial Discrimination and Anti-Racism Policy and I understand that such compliance is a condition of my duties, responsibilities and obligations. I also understand that non-adherence to the Cariboo Regional District's Anti-Racial Discrimination and Anti-Racism Policy or other rules may result in disciplinary action up to and including termination of employment or the consideration of appropriate sanctions, which may include censure, removal from appointments, referral to police or legal action.

X

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SIGNATURE OF INDIVIDUAL

PRINTED NAME

DATE



**Date:** 16/07/2024

**To:** Chair and Directors, Policy Committee

**And To:** Murray Daly, Chief Administrative Officer

**From:** Alice Johnston, Manager of Corporate Services/Deputy CAO

**Date of Meeting:** Policy Committee\_Jul23\_2024

**File:** 0340-50

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## Short Summary:

Request for further detail on CAO Evaluation Policy Amendment Request

## Voting:

-

## Memorandum:

At its last meeting, the Policy Committee resolved as follows:

*That the CAO Evaluation Policy be amended to reflect that the CAO will set annual goals and report back on them to the Board, which will assist in the CAO evaluation, and that the amended policy be brought back to the Policy Committee for review.*

Staff require additional information so that an accurate reflection of the Committee's request may be drafted in the policy. For example, is the Committee requesting professional development goals for the CAO, or leaning more towards measurable organizational goals that tie into the Board's Strategic Plan? What unique benchmarks will be used in comparison to the Strategic Plan?

## Attachments:

- 1) Draft CAO Evaluation Policy as attached at the last Policy Committee meeting, with generic wording that requires member input and additional detail.

## Financial Implications:

n/a

## Policy Implications:

This item requests an amendment to existing Policy.

## Alignment with Strategic Plan:

- ❑ **Infrastructure and Asset Management:** To establish a systematic, predictable approach to managing the regional district's assets and infrastructure that builds on current asset management data and condition assessments.
- ❑ **Enhanced Communications and Engagement:** To build trust and credibility of the regional district by enhancing our communications and engagement with citizens, stakeholders, and volunteers.
- ❑ **Effective and Responsive Land Use Planning and Development:** To ensure our land use planning and development is responsive to future growth and housing needs, anticipates risks and hazards associated with climate change and provides efficient and consistent processes for landowners and developers.
- ❑ **Relationships with First Nations:** To foster a healthy and inclusive region by building and strengthening our relationships with First Nations and embracing the principles of reconciliation.

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**CAO Comments:**

Click here to enter text.

**Options:**

See below

**Recommendation:**

That the Committee provide specific targets and goal-setting standards to be included in the CAO Evaluation Policy.

Index #      Title



Regional Board Policy  
**CAO Evaluation Policy**

<b>Category:</b>	<b>Policy Number:</b>	<b>Replaces:</b>	
<b>Type:</b> <input type="checkbox"/> Policy <input type="checkbox"/> Procedure	<b>Authority:</b> <input type="checkbox"/> Board <input type="checkbox"/> Administrative	<b>Approved By:</b> <input checked="" type="checkbox"/> Board <input type="checkbox"/> CAO <input type="checkbox"/> Department Head	
<b>Office of Primary Responsibility:</b> Administration			
<b>Date Adopted:</b>	<b>Board Resolution Number:</b>	<b>Date to be Reviewed:</b>	
<b>Manner Issued:</b>			

**PURPOSE:**

To establish an annual process for the Board to provide feedback to the Chief Administrative Officer on their performance, based on established criteria involving leadership skills and the accomplishment of Board directives.

**POLICY:**

The Chief Administrative Officer (CAO) is the Board's one employee and as such, the Board will provide feedback on their performance with a view to continuing improvement. The performance review is intended as a communication tool and is not tied to the CAO's salary.

On an annual basis the Board shall review the performance of the CAO via a confidential survey (only the Board Chair and the Manager of Human Resources shall have access to the identity of the survey respondents).

**Criteria:**

In addition to the Board members' observations and interactions with the CAO, the CAO will set annual goals and report to the Board on them which will assist in the Board's CAO evaluation process.

**Timeline:**

In early May, the Manager of Human Resources (or their delegate) shall provide the survey link to all Board members and provide at least two weeks for completion. All Board members are required to complete the survey.

Form:

Questions will be in the form of a yes/no answer option with space for elaboration/comments at the end. Not completing a section or answers of “not applicable” will not be permitted.

Submissions will be confidential with the exception that the Board Chair and Manager of Human Resources shall have access to the respondents’ identities.

Board Chair’s Duties:

The Board Chair shall summarize the comments provided while maintaining the integrity of the confidentiality of this assignment and will review the overall results of the survey at an in-camera meeting of the Board without the CAO’s presence. Afterward, the Board Chair will meet privately with the CAO to provide feedback from the Board.

**\*\*\* END OF POLICY \*\*\***

<u>Amended (Y/N)</u>	<u>Date Reissued</u>	<u>Authority (Resolution #)</u>



**Date:** 19/09/2024

**To:** Chair and Directors, Cariboo Regional District Board

**And To:** Murray Daly, Chief Administrative Officer

**From:** Alice Johnston, Manager of Corporate Services/Deputy CAO

**Date of Meeting:** Cariboo Regional District Board\_Sep26\_2024

**File:** 550-01

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## Short Summary:

Request from Director Forseth regarding Land Acknowledgement for meetings

## Voting:

Corporate Vote - Unweighted

## Memorandum:

Director Forseth has submitted the following request:

*“That the Board refer the current practice of the Land Acknowledgement read at the beginning of Cariboo Regional District/Cariboo Chilcotin Regional Hospital District Board and Committee meetings to the Policy Committee for review of being more inclusive of all Indigenous Communities in the Cariboo Regional District.”*

Section 18 of Cariboo Regional District Procedure Bylaw No. 5350, 2021 states:

18. ACKNOWLEDGEMENT OF INDIGENOUS PEOPLES AND TERRITORIES

As soon as a Board or Committee meeting is called to order, the Chair shall verbally acknowledge that the meeting is being held on the traditional lands of the Indigenous peoples specific to that area. If the specific Indigenous group is not known, the following statement will be made:

“We respectfully acknowledge the Indigenous peoples on whose traditional territories we are meeting.”

This request is hereby brought forward for the consideration of the Board.

## Attachments:

None

## Financial Implications:

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## Policy Implications:

[Click here to enter text.](#)

## Alignment with Strategic Plan:

- Infrastructure and Asset Management:** To establish a systematic, predictable approach to managing the regional district's assets and infrastructure that builds on current asset management data and condition assessments.
- Enhanced Communications and Engagement:** To build trust and credibility of the regional district by enhancing our communications and engagement with citizens, stakeholders, and volunteers.
- Effective and Responsive Land Use Planning and Development:** To ensure our land use planning and development is responsive to future growth and housing needs, anticipates risks and hazards associated with climate change and provides efficient and consistent processes for landowners and developers.
- Relationships with First Nations:** To foster a healthy and inclusive region by building and strengthening our relationships with First Nations and embracing the principles of reconciliation.

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## CAO Comments:

[Click here to enter text.](#)

## Options:

1. Refer to the Indigenous Relations Committee;
2. Deny;
3. Approve request to refer to the Policy Committee.

## Recommendation:

*Action is at the discretion of the Board.*





**Date:** 25/10/2024

**To:** Chair and Directors, Policy Committee

**And To:** Murray Daly, Chief Administrative Officer

**From:** Alice Johnston, Manager of Corporate Services/Deputy CAO

**Date of Meeting:** Policy Committee\_Nov06\_2024

**File:** 0340-50

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## Short Summary:

Draft – Privacy Management Program Policy

## Voting:

-

## Memorandum:

Amendments to the *Freedom of Information and Protection of Privacy Act* require a public body under section 36.2 to develop a privacy management program for the public body and to do so in accordance with the directions of the minister responsible for the *Act*.

Privacy management programs help ensure that public bodies are properly equipped to manage and protect any personal information in their custody or under their control. They also help provide transparency and accountability by ensuring public bodies document their privacy practices. The Minister responsible for FOIPPA has issued a [Privacy Management Program Direction](#) to public bodies which sets out the key elements that must be included in a privacy management program. One requirement is the establishment of a Privacy Management Program Policy, which is attached to this agenda item for the Board's consideration.

As the Board is aware, the CRD has commenced a Privacy Awareness education program involving all staff and board members. In the future, it will be extended to volunteers and service providers who come into contact with personal information in the course of their CRD-related duties.

Our privacy management consultant has reviewed the attached policy and has no concerns.

## Attachments:

Draft policy

## Financial Implications:

[Click here to enter text.](#)

## Policy Implications:

This item requests that a new board policy be adopted.

## Alignment with Strategic Plan:

- Infrastructure and Asset Management:** To establish a systematic, predictable approach to managing the regional district's assets and infrastructure that builds on current asset management data and condition assessments.
- Enhanced Communications and Engagement:** To build trust and credibility of the regional district by enhancing our communications and engagement with citizens, stakeholders, and volunteers.
- Effective and Responsive Land Use Planning and Development:** To ensure our land use planning and development is responsive to future growth and housing needs, anticipates risks and hazards associated with climate change and provides efficient and consistent processes for landowners and developers.
- Relationships with First Nations:** To foster a healthy and inclusive region by building and strengthening our relationships with First Nations and embracing the principles of reconciliation.

[Click here to enter text.](#)

## CAO Comments:

[Click here to enter text.](#)

## Options:

- 1) Endorse recommendation;
- 2) Request amendment(s).

## Recommendation:

That the Privacy Management Program Policy be adopted as presented.

Index #      Title



Regional Board Policy

## PRIVACY MANAGEMENT PROGRAM POLICY

<b>Category:</b>	<b>Policy Number:</b>	<b>Replaces:</b>	
<b>Type:</b> <input checked="" type="checkbox"/> Policy <input type="checkbox"/> Procedure	<b>Authority:</b> <input checked="" type="checkbox"/> Board <input checked="" type="checkbox"/> Administrative	<b>Approved By:</b> <input checked="" type="checkbox"/> Board <input checked="" type="checkbox"/> CAO <input type="checkbox"/> Department Head	
<b>Office of Primary Responsibility:</b> Administration			
<b>Date Adopted:</b>	<b>Board Resolution Number:</b>	<b>Date to be Reviewed:</b>	
<b>Manner Issued:</b>			

### **PURPOSE**

The purpose of the Cariboo Regional District’s Privacy Management Program Policy is to describe how the CRD collects, uses, discloses and protects personal information. This policy provides a framework for how the CRD will operate in order to ensure personal information is managed in accordance with the *Freedom of Information and Protection of Privacy Act (FOIPPA)*.

Implementation of this policy is intended to:

- Set expectations for privacy accountability, and
- Support compliance with the privacy requirements of FOIPPA.

### **SCOPE**

This policy applies to all employees, volunteers, service providers, officers, and directors of the CRD.

This policy applies to personal information that the CRD collects, uses or discloses in any form (including verbal, electronic or written personal information).

\*The CRD requires third-party service providers to demonstrate full compliance with the CRD's privacy obligations, principles and processes as outlined in this policy.

## **DEFINITIONS**

<b>Act</b>	means the <i>Freedom of Information and Protection of Privacy Act (BC)</i>
<b>Commissioner</b>	means the Information and Privacy Commissioner for BC.
<b>Contact Information</b>	is defined as any information that would enable an individual to be contacted at their place of work.
<b>FOIPPA</b>	means the <i>Freedom of Information and Protection of Privacy Act</i> .
<b>Indirect Collection</b>	is defined as the collection of personal information from a source other than the individual for whom the information is about.
<b>Personal Information</b>	is defined as recorded information about an identifiable individual (excluding contact information). Examples of personal information include: name, residential address and telephone number, ethnic origin, sex, marital status, employment history, financial information (including financial history), health care history, etc.
<b>Privacy Breach</b>	means the theft or loss, or the collection, use or disclosure that is not authorized by the <i>Freedom of Information and Protection of Privacy Act</i> , of personal information in the custody or under the control of a public body.
<b>Privacy Impact Statement</b>	means a tool used to help assess risks to privacy and protect personal information.
<b>Privacy Officer</b>	means the Deputy Corporate Officer, who is responsible for being a point of contact for privacy-related matters; supporting the development, implementation and maintenance of privacy policies and procedures; and supporting the public body's compliance with FOIPPA.
<b>Public Body</b>	means the Cariboo Regional District.

<b>CRD</b>	means the Cariboo Regional District.
<b>Service Provider</b>	means a person or business retained under a contractual agreement to perform services for the CRD.
<b>Us</b>	refers to the CRD, as do “our,” “we,” and similar terms, not to any employees or elected or appointed CRD officials.
<b>You</b>	refers to anyone whose personal information we collect, use or disclose.

## **OBJECTIVE**

This policy is designed to comply with Division 4—Privacy Management Programs and Privacy Breach Notifications of Bill 22—2021 *Freedom of Information and Protection of Privacy Amendment Act*, 2021.

## **POLICY**

### **1. COLLECTION OF PERSONAL INFORMATION**

We collect personal information:

- a. where collection is authorized under a statute, such as the *Community Charter* (British Columbia) and the *Local Government Act* (British Columbia), or is authorized under CRD bylaws;
- b. for the purposes of our activities, services and programs;
- c. for the purposes of planning or evaluating our activities, services and programs;
- d. for law enforcement purposes, including enforcing our bylaws; and
- e. at presentations, ceremonies, performances, sporting events, or similar events, that are open to the public and where you voluntarily appear, such as public meetings and public hearings.

We collect your personal information directly from you, but we may also collect it from another source if you have consented to our doing so. We may also collect your personal information from another source as permitted under the Act, including in these cases:

- f. where another law allows us to do so;
- g. for law enforcement, for a court proceeding, to collect a debt or fine from you, or to make a payment to you;
- h. where your personal information is necessary for us to deliver, or evaluate, a common or integrated program or activity;
- i. where your personal information is necessary to establish, manage or terminate an employment relationship between you and us;
- j. if your personal information may be disclosed to the CRD under Part 3 of the Act; or

- k. where we collect your personal information for the purpose of determining your suitability for an honour or award.

## **2. USE AND DISCLOSURE OF PERSONAL INFORMATION**

We will use and disclose your personal information only for the purpose we collected it for or for a purpose that is consistent with why we collected it in the first place.

We may also use or disclose your personal information for another purpose if you have identified the information and consented to the other use. Lastly, we may use your personal information for a purpose for which it can be disclosed to us under Part 3 of the Act. We may also disclose your personal information:

- a. if you have identified the information and consented in writing to its disclosure;
- b. to our employees or service providers if the information is necessary for their duties, for delivery of a common or integrated program or activity, or for planning or evaluating a CRD program or activity;
- c. if your personal information is made publicly available in British Columbia by a law that authorizes or requires it to be made public;
- d. to a public body or law enforcement agency to assist in a specific investigation or law enforcement proceeding;
- e. to your union representative who is making an inquiry, if you have given the representative written authority to make the inquiry or it is otherwise authorized;
- f. to our legal counsel for the purpose of legal advice or for use in legal proceedings involving us;
- g. to your Member of the Legislative Assembly if you have asked them to help resolve a problem; or
- h. as otherwise permitted or required under Part 3 of the Act.

Please note that all information provided at open meetings of the Board or its committees is considered to be public. If you provide or disclose your personal information to us for that purpose, you are consenting to that information being available to the public, including through posting on our website or audio or video recording. This information is considered to be a part of the public record and cannot be removed or changed. However, if you satisfy us in advance that you have legitimate personal safety concerns for yourself or an immediate family member, we may allow you to submit your personal information to the Board or a committee in confidence. We will not make it publicly available in that case, although we will keep it in our Corporate Administration office, as part of the record.

## **3. SAFEGUARDING OF PERSONAL INFORMATION**

The CRD administers the highest security standards to ensure the personal information in its custody and/or control is secure at all times. CRD employees and service providers are responsible for ensuring the physical and technical security of all data (including data at rest or in transit) and must meet all applicable security standards.

#### **4. ACCURACY OF PERSONAL INFORMATION**

The CRD makes every reasonable effort to ensure that personal information we use to make a decision directly affecting you is accurate and complete.

#### **5. ACCESS TO PERSONAL INFORMATION**

You can ask us to give you a copy of your personal information that is in our custody or control by contacting the Corporate Administration department. If you are an employee and would like a copy of your own employee personal information, you will need to contact the Human Resources department. If we believe your request may involve someone else's personal information, or information protected under the Act, we may require you to make a formal request under the Act for access to records. The Act gives us 30 business days to respond to a formal request, starting on the date your request is received (the Act also allows that time to be extended). Please note that in some cases the Act may require us to refuse you access to even your own personal information. We will give you written reasons for every decision on a formal request. Before disclosing your personal information, we will require you to verify your identity, so we can be assured that you are the individual whose information is being requested. This helps ensure we do not disclose your personal information to someone to whom it should not be given.

#### **6. CORRECTION OF PERSONAL INFORMATION**

If you believe there is an error or omission in or from your personal information, you can contact the CRD in writing and ask us to correct it. If we decide to correct your information, we will do so as soon as reasonably possible. If we decide not to correct your information, we will note your requested change on the information as well as why we did not correct your information as you asked.

#### **7. RETENTION AND DISPOSAL OF PERSONAL INFORMATION**

The CRD and its service providers utilize records retention policies customized for each area. This customization takes into account the length of time information must be retained. If an individual's personal information is used to make a decision, a record of that decision will be kept for a minimum of one year after the decision has been made. Once personal information is no longer needed it is authorized for destruction and confidentially disposed of.

#### **8. USING THE CRD WEBSITE**

The CRD website automatically collects and stores the following information from visitors to the website:

- the internet protocol (IP) address and domain name used (the IP address is a numeric identifier assigned to either the individual's internet service provider or directly to the computer)
- the type of browser and operating system
- the date and time of the visit
- the webpage(s) accessed
- amount of time spent on each page

Information automatically collected is used only for the purposes of administering the website, assessing system performance, improving services and website management. The CRD will not use this data to determine the inquirer's identity unless required to do so as part of an internal investigation for law enforcement purposes.

Personal information such as names, email addresses and demographic information is only obtained when individuals supply it voluntarily through contacting us via email or using the forms available on our website. This information will only be used for statistical purposes and to support your relationship with the CRD.

#### **9. LINKS TO OTHER WEBSITES**

The CRD website may include links to webpages operated by other organizations. These links are not intended to be referrals and are posted only for convenience. The CRD has no responsibility for, liability, or control over these links or websites. Please refer to the individual privacy policies and terms and conditions of use for external sites.

If you have any questions or concerns regarding the collection, use, disclosure or safeguarding of personal information associated with this website, please contact [mailbox@cariboord.ca](mailto:mailbox@cariboord.ca)

#### **10. PROCEDURE – PRIVACY COMPLAINTS AND BREACHES**

Any complaint about any privacy-related matter under this policy or under the Act must be made to us in writing. We will consider your complaint, including about a breach of your privacy, and will disclose the outcome to you in writing. We expect you to co-operate reasonably and in a timely way with our work, including by promptly providing us with information that we might reasonably need to do our work. Your failure to do so may result in our deciding not to proceed any further with your complaint. You can make a written formal complaint to the Office of the Information and Privacy Commissioner for British Columbia, although we encourage you to use our complaint procedure first. Wherever we can, we try to work things out directly with people, to their satisfaction.

##### **Requirement to Notify**

1. Should a privacy breach occur, the Privacy Officer must be contacted, in writing, without reasonable delay.
2. Then, the Privacy Head, will, without reasonable delay:
  - (a) notify an affected individual if the privacy breach could reasonably be expected to result in significant harm to the individual, including identity theft or significant:
    - (i) bodily harm,
    - (ii) humiliation,
    - (iii) damage to reputation or relationships,
    - (iv) loss of employment, business or professional opportunities,
    - (v) financial loss,



- (vi) negative impact on a credit record, or
- (vii) damage to, or loss of, property, and

(b) notify the Commissioner if the privacy breach could reasonably be expected to result in significant harm referred to in paragraph (a) above.

## How to Notify

### *Direct Notifications— Affected Individuals*

Notifications must include the following information:

- the name of the public body;
- the date on which the privacy breach came to the attention of the public body;
- a description of the privacy breach including, if known,
  - a) the date on which or the period during which the privacy breach occurred, and
  - b) a description of the nature of the personal information involved in the privacy breach;
- confirmation that the Commissioner has been or will be notified of the privacy breach;
- contact information for a person who can answer, on behalf of the public body, questions about the privacy breach;
- a description of steps, if any, that the public body has taken or will take to reduce the risk of harm to the affected individual;
- a description of steps, if any, that the affected individual could take to reduce the risk of harm that could result from the privacy breach.

### *Indirect Notifications—Affected Individuals*

A notification may be given to an affected individual in an indirect manner if:

- a) the public body does not have accurate contact information for the affected individual,
- b) the head of the public body reasonably believes that providing the notice directly to the affected individual would unreasonably interfere with the operations of the public body, or
- c) the head of the public body reasonably believes that the information in the notification will come to the attention of the affected individual more quickly if it is given in an indirect manner.

If a notification must be given in an indirect manner, the notification must

- a) be given by public communication that can reasonably be expected to reach the affected individual, and
- b) contain the following information:
  - the name of the public body;
  - the date on which the privacy breach came to the attention of the public body;
  - a description of the privacy breach including, if known,
    - a) the date on which or the period during which the privacy breach occurred, and
    - b) a description of the nature of the personal information involved in the privacy breach;
  - confirmation that the Commissioner has been or will be notified of the privacy breach;
  - contact information for a person who can answer, on behalf of the public body, questions about the privacy breach;
  - a description of steps, if any, that the public body has taken or will take to reduce the risk of harm to the affected individual;
  - a description of steps, if any, that the affected individual could take to reduce the risk of harm that could result from the privacy breach.

#### *Notifications – Commissioner*

A notification under section 36.3 (2)(b) of the Act must be given to the Commissioner in writing and must include the following information:

- the name of the public body;
- the date on which the privacy breach came to the attention of the public body;
- a description of the privacy breach including, if known,
  - a) the date on which or the period during which the privacy breach occurred,
  - b) a description of the nature of the personal information involved in the privacy breach, and
  - c) an estimate of the number of affected individuals;
- contact information for a person who can answer, on behalf of the public body, questions about the privacy breach;
- a description of steps, if any, that the public body has taken or will take to reduce the risk of harm to the affected individuals.

#### *Not Required to Notify*

1. The head of a public body is not required to notify an affected individual under section 36.3(2) of the Act if notification could reasonably be expected to

- (a) result in immediate and grave harm to the individual's safety or physical or mental health, or
- (b) threaten another individual's safety or physical or mental health.

## **11. PRIVACY IMPACT ASSESSMENTS**

Privacy Impact Assessments (PIAs) are conducted to determine if a proposed system, project, program or activity meets or will meet the requirements of Part 3 of FOIPPA. A PIA will be done for any new system, project, program or activity involving personal information and for any new collection, use or disclosure of personal information. A PIA will also be conducted for common or integrated programs or activities and data-linking initiatives, as well as when significant modifications are made to existing systems, projects, programs or activities.

Employees initiating new systems, projects, programs or activities that involve collecting, using, storing or sharing personal information are required to complete a PIA (Schedule A attached) and submit it to the Privacy Officer.

## **12. SERVICE PROVIDER MANAGEMENT**

Employees who prepare or manage contracts with service providers are to include the privacy protection schedule or standard privacy language, as designated by the Privacy Officer, in all contracts that involve the service provider having access to, or collecting, using or disclosing, personal information in the custody or under the control of the CRD.

## **13. INFORMATION SHARING AGREEMENTS**

If initiatives include a regular or systematic exchange of personal information with partners outside of the public body, an Information Sharing Agreement must be completed (Schedule B attached) and submitted to the Privacy Officer.

## **14. EDUCATION AND AWARENESS**

All CRD employees receive training on the Act and privacy generally as appropriate to their work function. Additional training is given in the following circumstances:

- Employees handling what we consider high-risk or sensitive personal information electronically receive training related to information systems and their security, in coordination with the IT department;
- Employees managing programs or activities receive training related to privacy impact assessments; and
- Employees managing common or integrated programs or activities receive training related to information sharing agreements.

## **15. ROLES AND RESPONSIBILITIES**

### **Board of Directors:**

- Approves policy and procedures.

### **Department Heads:**

- Support and cooperate with the Privacy Officer in implementing the policy and in complying with FOIPPA.

**Manager of Corporate Services/Deputy Corporate Officer:**

- Responsible for the development, management and implementation of the CRD's privacy management program including ongoing assessments and revisions.
- Coordinates employee training and education, ensuring that all new employees receive FOIPPA orientation and training within the first year of their employment.

**16. AUTHORITY TO ACT**

The Manager of Corporate Services is delegated responsibility and authority for ensuring compliance with this policy and FOIPPA.

**17. RELATED DOCUMENTS**

- *Freedom of Information and Protection of Privacy Act* [RSBC 1996] Chapter 165
- Cariboo Regional District Freedom of Information and Protection of Privacy Bylaw No. 5261, 2020

**18. REVIEW**

This policy shall be reviewed by the Manager of Corporate Services at least every 3 years.

**19. ACCESS TO PERSONAL INFORMATION AND QUESTIONS REGARDING PRIVACY**

Inquiries, complaints, or access requests should be addressed to:

Deputy Corporate Officer/Privacy Officer, CRD  
250.392-3351 | [mailbox@cariboord.ca](mailto:mailbox@cariboord.ca)

For more information, please visit: the Office of the Information and Privacy Commissioner.

The CRD may change this policy when it is appropriate to do so. As such, it is recommended users review the policy regularly.

## Schedule A: Privacy Impact Assessment

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Use this Privacy Impact Assessment (PIA) template if you work for, or are a service provider to the Cariboo Regional District (CRD) and are starting a new initiative or significantly changing an existing initiative.

### **Before you start**

- An initiative is an enactment, system, project, program or activity
- If you have any questions, email [mailbox@cariboord.ca](mailto:mailbox@cariboord.ca) or call 250.392-3351.

### **PART 1: GENERAL INFORMATION**

<b>Initiative title:</b>	
<b>Organization:</b>	

<b>Department:</b>	
<b>Your name and title:</b>	
<b>Your work phone:</b>	
<b>Your email:</b>	
<b>Initiative Lead name and title:</b>	
<b>Initiative Lead phone:</b>	
<b>Initiative Lead email:</b>	
<b>Privacy Officer:</b>	
<b>Privacy Officer phone:</b>	250.392.3351
<b>Privacy Officer email:</b>	<a href="mailto:mailbox@cariboord.ca">mailbox@cariboord.ca</a>

General information about the PIA:

<p><b>Is this initiative a data-linking program under FOIPPA? If this PIA addresses a data-linking program, you must submit this PIA to the <a href="#">Office of the Information and Privacy Commissioner</a>.</b></p>
<p><b>Is this initiative a common or integrated program or activity? Under section <a href="#">FOIPPA 69 (5.4)</a>, you must submit this PIA to the Office of the Information and Privacy Commissioner.</b></p>
<p><b>Related PIAs, if any:</b></p>

**1. What is the initiative?**

**Describe your initiative in enough detail that a reader who knows nothing about your work will understand the purpose of your initiative and who your partners and other stakeholders are. Describe what you are doing, how it works, who is involved and when or how long your initiative runs.**

**2. What is the scope of the PIA?**

Your initiative might be part of a larger one or might be rolled out in phases. What part of the initiative is covered by this PIA? What is out of scope of this PIA?

**3. What are the data or information elements involved in your initiative?**

Please list all the elements of information or data that you might collect, use, store, disclose or access as part of your initiative. If your initiative involves large quantities of information or datasets, you can list categories or other groupings of personal information in a table below or in an appendix.

**3.1 Did you list personal information in question 3?**

**Personal information** is any recorded information about an identifiable individual, other than business contact information. Personal information includes information that can be used to identify an individual through association or reference.

Type “yes” or “no” to indicate your response.

- If yes, go to [Part 2](#)
- If no, answer [question 4](#) and submit questions 1 to 4 to your Privacy Officer. You do not need to complete the rest of the PIA template.

**4. How will you reduce the risk of unintentionally collecting personal information?**

Some initiatives that do not require personal information are at risk of collecting personal information inadvertently, which could result in an information incident.

**PART 2: COLLECTION, USE AND DISCLOSURE**

This section will help you identify the legal authority for collecting, using and disclosing personal information, and confirm that all personal information elements are necessary for the purpose of the initiative.

## 5. Collection, use and disclosure

Use column 2 to identify whether the action in column 1 is a collection, use or disclosure of personal information. Use columns 3 and 4 to identify the legal authority you have for the collection, use or disclosure.

<b>Use this column to describe the way personal information moves through your initiative step by step as if you were explaining it to someone who does not know about your initiative.</b>	<b>Collection, use or disclosure</b>	<b>FOIPPA authority</b>	<b>Other legal authority</b>
Step 1:			
Step 2:			
Step 3:			
Step 4:			

**Optional:** Insert a drawing or flow diagram here or in an appendix if you think it will help to explain how each different part is connected.

## 6. Collection Notice

**If you are collecting personal information directly from an individual the information is about, FOIPPA requires that you provide a collection notice (except in limited circumstances).**

Review the [sample collection notice](#) and write your collection notice below. You can also attach the notice as an appendix.

### **PART 3: STORING PERSONAL INFORMATION**

If you are storing personal information outside of Canada, identify the sensitivity of the personal information and where and how it will be stored.

## 7. Is any personal information stored outside of Canada?

Type “yes” or “no” to indicate your response.

## 8. Where are you storing the personal information involved in your initiative?



**9. Does your initiative involve [sensitive personal information](#)?**

Type “yes” or “no” to indicate your response.

- If yes, go to [question 10](#)
- If no, go to [Part 5](#)

**10. Is the sensitive personal information being disclosed outside of Canada under [FOIPPA section 33\(2\)\(f\)](#)?**

Type “yes” or “no” to indicate your response.

- If yes, go to [Part 5](#)
- If no, go to [Part 4](#)

**PART 4: ASSESSMENT FOR DISCLOSURES OUTSIDE OF CANADA**

Complete this section if you are disclosing sensitive personal information to be stored outside of Canada. You may need help from your organization’s Privacy Officer. More help is available in the [Guidance on Disclosures Outside of Canada](#).

**11. Is the sensitive personal information stored by a service provider?**

Type “yes” or “no” to indicate your response.

- If yes, fill in the table below (add more rows if necessary) and go to [question 13](#)
- If no, go to [question 12](#)

Name of service provider	Name of cloud infrastructure and/or platform provider(s) (if applicable)	Where is the sensitive personal information stored (including backups)?

**12. Provide details on the disclosure, including to whom it is disclosed and where the sensitive personal information is stored.**

**13. Does the contract you rely on include privacy-related terms?**

Type “yes” or “no” to indicate your response.

- If yes, describe the contractual measures related to your initiative.

**15. What controls are in place to prevent unauthorized access to sensitive personal information?**

**16. Provide details about how you will track access to sensitive personal information.**

DRAFT

**17. Describe the privacy risks for disclosure outside of Canada.**

**Use the table to indicate the privacy risks, potential impacts, likelihood of occurrence and level of privacy risk. For each privacy risk you identify describe a privacy risk response that is proportionate to the level of risk posed.**

This may include reference to the measures to protect the sensitive personal information (contractual, technical, security, administrative and/or policy measures) you outlined. Add new rows if necessary.

Privacy risk	Impact to individuals	Likelihood of unauthorized collection, use, disclosure or storage of the sensitive personal information (low, medium, high)	Level of privacy risk (low, medium, high, considering the impact and likelihood)	Risk response (this may include contractual mitigations, technical controls, and/or procedural and policy barriers)	Is there any outstanding risk? If yes, please describe.

#### Outcome of Part 4

The outcome of Part 4 will be a **risk-based decision made by the Privacy Officer of the CRD on whether to proceed with the initiative**, with consideration of the risks and risk responses, including consideration of the outstanding risks in question 17. **The CRD may document the decision in an appropriate format as determined by the Head of the public body or by using this PIA template.**

### PART 5: SECURITY OF PERSONAL INFORMATION

In Part 5 you will share information about the privacy aspect of securing personal information. People, organizations or governments outside of your initiative should not be able to access the personal information you collect, use, store or disclose. You need to make sure that the personal information is safely secured in both physical and technical environments.

#### 18. Does your initiative involve digital tools, databases or information systems?

Type “yes” or “no” to indicate your response.

- If yes, work with your Privacy Officer to determine whether you need a security assessment to ensure the initiative meets the reasonable security requirements of [FOIPPA section 30](#)

##### 18.1 Do you or will you have a security assessment to help you ensure the initiative meets the security requirements of [FOIPPA section 30](#)?

Type “yes” or “no” to indicate your response.

- If yes, you may want to append the security assessment to this PIA. Go to [question 20](#)
- If no, go to [question 19](#)

#### 19. What technical and physical security do you have in place to protect personal information?

Describe where the digital records for your initiative are stored (e.g., on your organization’s local area network, on your computer desktop, etc.) and the technical security measures in place to protect those records. Technical security measures include secure passwords,

encryption, firewalls, etc. Physical security measures include restricted access to filing cabinets or server locations, locked doors, security guards, etc.

If you have completed a security assessment, you may want to append it to the PIA.

**20. Controlling and tracking access**

Please check each strategy that describes how you limit or restrict who can access personal information and how you keep track of who has accessed personal information in the past.

Insert your own strategies if needed.

<b>Strategy</b>	
We only allow employees in certain roles access to information	
Employees that need standing or recurring access to personal information must be approved by department manager	
We use audit logs to see who accesses a file and when	
<b>Describe any additional controls:</b>	

**PART 6: ACCURACY, CORRECTION AND RETENTION**

In Part 6 you will demonstrate that you will make a reasonable effort to ensure the personal information that you have on file is accurate and complete.

**21. How will you make sure that the personal information is accurate and complete?**

[FOIPPA section 28](#) states that a public body must make every reasonable effort to ensure that an individual’s personal information is accurate and complete.

**22. Requests for correction**

[FOIPPA](#) gives an individual the right to request correction of errors or omissions to their personal information. You must have a process in place to respond to these requests.

**22.1 Do you have a process in place to correct personal information?**

Type “yes” or “no” to indicate your response.

22.2 Sometimes it is not possible to correct the personal information.

[FOIPPA](#) requires that you make a note on the record about the request for correction if you are not able to correct the record itself. Will you document the request to correct or annotate the record?

Type “yes” or “no” to indicate your response.

22.3 If you receive a request for correction from an individual and you know you disclosed their personal information in the last year, [FOIPPA](#) requires you to notify the other public body or third party of the request for correction. Will you ensure that you conduct these notifications when necessary?

Type “yes” or “no” to indicate your response.

23. Does your initiative use personal information to make decisions that directly affect an individual?

Type “yes” or “no” to indicate your response.

- If yes, go to [question 24](#)
- If no, skip ahead to [Part 7](#)

24. Do you have an information schedule in place related to personal information used to make a decision?

[FOIPPA](#) requires that public bodies keep personal information for a minimum of one year after it is used to make a decision.

Type “yes” or “no” to indicate your response.

- If no, describe how you will ensure the information will be kept for a minimum of one year after it is used to make a decision that directly affects an individual.

## **PART 7: PERSONAL INFORMATION BANKS**

A Personal Information Bank (PIB) is a collection of personal information searchable by name or unique identifier.

25. Will your initiative result in a Personal Information Bank?

Type “yes” or “no” to indicate your response.

- If yes, please complete the table below.

<b>Describe the type of information in the bank</b>
<b>Name of main organization involved</b>
<b>Any other ministries, agencies, public bodies or organizations involved</b>
<b>Business contact title and phone number for person responsible for managing the Personal Information Bank</b>

#### **PART 8: ADDITIONAL RISKS**

Part 8 asks that you reflect on the risks to personal information in your initiative and list any risks that have not already been addressed by the questions in the template.

#### **26. Risk response**

**Describe any additional risks that arise from collecting, using, storing, accessing or disclosing personal information in your initiative that have not been addressed by the questions on the template.**

Add new rows if necessary.

<b>Possible risk</b>	<b>Response</b>
Risk 1:	
Risk 2:	
Risk 3:	
Risk 4:	

#### **PART 9: SIGNATURES**

You have completed a PIA. Submit the PIA to your Privacy Officer for review and comment, and then have the PIA signed by those responsible for the initiative.

## Privacy Officer Comments

## Privacy Officer Signatures

This PIA is based on a review of the material provided to the Privacy Officer as of the date below.

Role	Name	Electronic signature	Date signed
<b>Privacy Officer / Privacy Officer Representative</b>			

## Program Area Signatures

This PIA accurately documents the data elements and information flow at the time of signing. If there are any changes to the overall initiative, including to the way personal information is collected, used, stored or disclosed, the program area will engage with the Privacy Officer and if necessary, complete a PIA update.

## Program Area Comments:

Role	Name	Electronic signature	Date signed
<b>Initiative lead</b>			
<b>Program/Department Manager</b>			
<b>Contact Responsible for Systems Maintenance and/or Security</b> Only required if they have been involved in the PIA			
<b>Head of public body, or designate (if required)</b>			



**Schedule B—Information Sharing Agreement**

If your initiative includes or will be part of a regular and systematic exchange of personal information with partners in or outside of the CRD, you may require an Information Sharing Agreement (ISA).

Please provide information about your ISA and once complete, submit to the Privacy Officer.

<b>Description of ISA</b>
<b>Name of CRD department involved:</b>
<b>Any other ministries, agencies, public bodies or organizations involved:</b>
<b>Business contact title and phone number for person responsible for maintaining the ISA:</b>
<b>ISA start date:</b>
<b>ISA end date:</b>

\*\*\* END OF POLICY \*\*\*

<u>Amended (Y/N)</u>	<u>Date Reissued</u>	<u>Authority (Resolution #)</u>