
POLICY DEVELOPMENT COMMITTEE MEETING

TUESDAY, APRIL 3, 2018

6:30 – 8:30 P.M.

CATHOLIC EDUCATION CENTRE – BOARDROOM

Chairperson: Linda Ainsworth

Trustees who are unable to attend the meeting are asked to please notify Pam Smith.

A. Call to Order:

1. Opening Prayer, Mr. Dan Demers.
2. Approval of Agenda.
3. Declarations of Conflicts of Interest.
4. Approval of the Minutes of the Policy Committee Meeting held on January 30, 2018.
5. Business Arising from the Minutes.

B. Presentations/Recommended Actions:

1. R.A.: Draft Administrative Procedure #313 (New) Student Acceptable Use of Technology.
(This will combine Policy/Administrative Procedure # 902).
Mrs. Laurie Corrigan, Superintendent of Learning/Innovation Technologies
Mr. Sean Heuchert, Manager of Information Technology
2. R.A.: Draft Administrative Procedure #511 (New) Employee Acceptable Use of Technology.
(This will combine Policy/Administrative Procedure # 903).
Mrs. Laurie Corrigan, Superintendent of Learning/Innovation Technologies
Mr. Sean Heuchert, Manager of Information Technology
3. R.A.: Draft Administrative Procedure #1203 (New) Ontario Student Record (OSR) Management.
(This will combine Policy/Administrative Procedure #307).
Mr. Galen Eagle, Manager of Communications
Mrs. Nancy Massie, Records and Information Management Coordinator
4. R.A.: New Draft Administrative Procedure # 503 (New) Workplace Accommodation.
Ms. Joan Carragher, Superintendent of Learning/Leadership and Human Resources.
Mr. Daren Kahler, Manager of Human Resource Services.

C. Information Items: No Items.

D. Next Meeting:

1. Date: Tuesday, May 29, 2018 6:30 p.m. – 8:30 p.m.
2. Selection of Member for Opening Prayer.
3. Selection of Member for Closing Prayer.

E. Conclusion:

1. Closing Prayer, Mr. Dave Bernier.
2. Adjournment.



Minutes

THE MINUTES OF THE POLICY DEVELOPMENT COMMITTEE MEETING held on Tuesday, January 30, 2018 at 6:30 p.m. in the Boardroom, 1355 Lansdowne Street West, Peterborough

PRESENT

Trustees: Mmes. Linda Ainsworth (Chairperson), Michelle Griepsma.

Messrs. Dave Bernier, Dan Demers.

Administration: Mmes. Joan Carragher, Laurie Corrigan, Anne Marie Duncan, Isabel Grace, Dawn Michie.

Messrs. Darren Kahler, Michael Nasello, Timothy Moloney, Winston Steward (Student Trustee).

Regrets: Mmes. Ruth Ciraulo, Christine Dunn, Helen McCarthy, Cali Brake (Student Trustee).

Recorder: Mrs. Pamela Smith

1. **Call to Order:**

1. Opening Prayer.

The Committee Chairperson, Mrs. Linda Ainsworth, called the meeting to order at 6:37 p.m. and asked Mr. Dave Bernier, to lead the Opening Prayer.

2. Approval of the Agenda.

MOTION: Moved by Mr. Dan Demers, seconded by Mr. Dave Bernier, that the Policy Committee Agenda dated January 30, 2018 be approved as presented.

Carried.

3. Declarations of Conflicts of Interest.

There were no declarations of conflicts of interest.

4. Approval of the Minutes of the Policy Development Committee Meeting held on, November 21, 2017.

MOTION: Moved by Mr. Dave Bernier, seconded by Mr. Dan Demers, that the minutes of the November 21, 2017, Policy Development Committee Meeting be approved as presented.

Carried.

5. Business Arising from the Minutes.

There was no business arising from the minutes.

B. Presentations/Recommended Actions:

1. RA.: Draft Directional Policy # 1300 Student Transportation (Feedback from Website).
Mrs. Isabel Grace, Superintendent of Business and Finance/Facility Services.

Mrs. Isabel Grace, Superintendent of Business and Finance/Facility Services, reviewed the feedback received from the Board website input form for the Draft Directional Policy #1300 Student Transportation with Trustees and answered questions.

Mrs. Grace indicated that there were 546 visitors to website with 75 comments. Some respondents chose to review but make no comments.

The change to the walk distance was the main concern. One concern noted was the impact on existing congestion of cars and that this may increase. Mrs. Grace will follow up on the congestion concern.

Mrs. Grace reviewed that a parent had done a survey in Northumberland with a petition to request grades 1-3 remain on the bus.

Trustees inquired around costing relating to changes to the walk distance and the new childcare/babysitting transportation and what the financial implications would be. Mrs. Grace advised Trustees that they would balance and the Board would not see much of an increase or decrease in costs versus savings.

Mrs. Grace will review the communication process to parents. A notice would be sent to parents in early spring.

Mrs. Grace informed Trustees that Administration would not be recommending changes to the Draft Directional Policy based on the feedback process relating to this Draft Directional Policy but did indicate that the terminology for JK/SK would be adjusted to reflect Year One and Year Two.

MOTION: Moved by Mr. Dan Demers, seconded by Mrs. Michelle Griepsma, that the system feedback collected regarding the DRAFT Directional Policy #1300 – Student Transportation, be received.

AND

that the final DRAFT Directional Policy #1300– Student Transportation, reflecting changes if made from the feedback process be brought back to the Board for approval.

Carried.

2. R.A.: New Draft Administrative Procedure #905 Bomb Threat.

Mr. Tim Moloney, Superintendent of Learning/Student Success, presented the Draft Administrative Procedure #905 Bomb Threat and Appendixes and answered questions.

Mr. Moloney shared a powerpoint with Trustees and explained the Ministry and Police/School Board Protocol connections.

Trustees requested that the language and responsibilities be kept simple and align with the School/Board Protocol. After discussion, it was requested that appendixes be referenced in the Administrative Procedures but not be posted on the website and that the Individual school plans also not be posted on the website.

Trustees also made inquiries regarding the communication process to parents. Mr. Moloney advised the Trustees that he will work with Mr. Galen Eagle, Communications Manager, on this process.

Trustees reviewed Draft Administrative Procedure #905 Bomb Threat, and made the below recommendations, (~~strikeout in red~~ –remove from document, red no ~~strikeout~~ is added wording):

1. The Principal/Manager is responsible for:

- Developing a site specific Bomb Threat Plan (~~Appendix A~~);

Sub Section –Bomb Threat Intake Procedures

(bulleted checklists were removed under below areas)

- ~~Ensuring those staff members identified as most likely to receive a bomb threat, receive training to properly record precise information during a bomb threat call. Information to record should include as much of the following detail as possible:~~
- ~~Providing a checklist of information to assist with recording the information (Bomb Threat Intake Checklist – Appendix B).~~
- Ensuring those staff members identified as most likely to receive a bomb threat, receive training and are provided with a checklist to assist with recording information.
- ~~Conducting initial assessment. To assist with the assessment, consider:~~
- Conducting initial assessment;

MOTION: Moved by Mr. Dave Bernier, seconded by Mr. Dan Demers,

that the new Administrative Procedure – Bomb Threat #905 that will fall under Directional Policy Safe and Accepting Schools #900 be received and posted as deemed appropriate.

Carried.

3. R.A.: New Draft Administrative Procedure # 507 Disability Management.

Ms. Joan Carragher, Superintendent of Learning, Leadership and Human Resource Services and Mr. Darren Kahler, Manager of Human Resource Services, reviewed the Draft AP #507 Disability Management with Trustees and answered questions. Mr. Kahler noted to Trustees that this draft AP has been shared and reviewed with unions.

Trustees reviewed Draft Administrative Procedure #507 Disability Management, and made the below recommendations, (~~strikeout in red~~ –remove from document, red no ~~strikeout~~ is added wording):

1. Under Action Required:

1.0 Background

All employees will be treated with fairness, consistency, respect and compassion. The Board's Disability Management Procedure is an integrated partnership among employees, supervisors/administrators, union representatives, and health care providers that support employees who cannot remain at work or return to work. The Procedure provides direction for the management of long-term absences from work. **A long-term absence is defined as an absence of five (5) consecutive days or greater.**

Employees ~~are expected~~ have a responsibility to take an active ~~and responsible~~ role in their own medical care ~~so that well-being can be maintained and absences from work minimized to maintain their health and well-being and minimize absences from work.~~

The Board will make every reasonable effort to keep employees in the workplace and to return employees to work safely and quickly. This will be accomplished through communicating before, during, and after an employee's absence and offering suitable modified work (see **pending** AP - ~~530~~ **503 Workplace** Accommodation).

Participation in the Disability Management **Administrative** Procedure is a requirement for all employees of the Board.

2.0 Purpose of the Program

Paragraph one (see **pending** AP ~~530~~ **503-Workplace** Accommodation)

3.0 Confidential Medical Information

Inquiry as to function and further assessment, **as well as** contact with Human Resource Services or the Wellness Coordinator or designate is not considered private medical information.

It is not appropriate for any employee to ask for confidential medical information, nor is it required that the employee reveal or discuss confidential information / details of their treatment plan. However, some medical issues (e.g. the effects of medications, medical conditions) can impact an employee's fitness to perform various tasks, their safety, the safety of students, or others. The employee, Wellness Coordinator **or designate** and/or the Supervisor, ~~and~~ need to be aware of this issue and manage it responsibly to avoid placing the employee, or others in the workplace, at risk.

The completed medical documentation will be sent directly to the Board's Wellness Coordinator or designate within the agreed upon time frame. The medical **documentation** can be provided via e-mail or fax machine.

4.0 Planned Absences from Work

~~Often~~ On occasion an employee may know in advance of an absence from work and/or may know approximately how long he/she may be absent from work. In a case such as this, the following steps will take place.

When an employee is expected to be absent from work for five (5) consecutive days or greater and he/she is aware of said absence (i.e. a pre-planned procedure/surgery), he/she will immediately call his/her supervisor and call the Board's Wellness Coordinator or designate to advise him/her of the anticipated first date of absence and advise his/her supervisor.

5.0 Ongoing Absences from Work

When an employee is off work (5) consecutive days or greater, reasonable follow up requests and reasonable periodic updates, may be required. Regular and ongoing communication with the Board's Wellness Coordinator or designate is required. The Wellness Coordinator or designate determines the frequency of communication with the employee and obtains further clarification, as needed.

6.0 Return to Work

Should accommodation be required during to facilitate a return to work, accommodation procedures will be followed (see pending Administrative Procedure 530 AP – 503 Workplace Accommodation) for further details.

Responsibilities

Principals, Vice-Principals, Managers and Supervisors are responsible for:

- Informing the Wellness Coordinator or designate by phone and/or e-mail of employees who are absent for five (5) consecutive days or greater days consecutively.

References:

AP ~~530~~ 503- Accommodated Work Workplace Accommodation (pending)

MOTION: Moved by Mrs. Michelle Griepsma, seconded by Mr. Dan Demers,

that the new Administrative Procedure – Disability Management #507 that will fall under Directional Policy Employee Relations #500 be received and posted with suggested revisions.

4. R.A: Draft Administrative Procedure #319 (New) Anaphylaxis – Reducing the Risks. (This will combine Policy/Administrative Procedure #404).

Mrs. Anne Marie Duncan, Superintendent of Learning/Special Education Services, presented the Draft Administrative Procedure #319 Anaphylaxis-Reducing the Risks and answered questions.

Mrs. Duncan reviewed this administrative procedure and brought forward changes stemming from PPM 161 which include new wording around medical conditions and plan of care terminology. Mrs. Duncan noted that Maplewood is being developed to populate forms and that transportation will also be able to pull data from Maplewood regarding the

plan of care.

Trustees reviewed Draft Administrative Procedure #319 Anaphylaxis and made the below recommendations.

(~~strikeout in red~~ –remove from document, ~~red no strikeout~~ is added wording):

1. Section-Action Required:

PPM 161: *Supporting Children and Students with Prevalent Medical Conditions (~~Anaphylaxis, Asthma, Diabetes, and/or Epilepsy~~) in Schools*, states that any policy developed to support students with life-threatening allergies should have as its goals:

2. Section-The Superintendent with responsibility for Transportation and for Purchasing is responsible for:

2. ensuring that school principals are aware that a Plan of Care for Prevalent Medical Conditions - ~~Health Form 5, Appendix A (see Appendix A)~~ is completed ~~in the Maplewood database~~ for each student with a life-threatening medical condition, and that a copy of this form must be provided to the student's transportation provider;

3. Section-The Superintendent of Schools are responsible for:

1. ensuring each school has developed a school-wide Anaphylaxis Prevention and Management Plan (see Appendix ~~F E~~), as well as a Plan of Care for each student and staff member with life-threatening allergies.

4. Section-Principals and Vice-Principals are responsible for:

3. communicating to parents and appropriate staff the process for parents to notify the school of their child's medical condition(s), as well as the expectation for parents to co-create, review, and update a Plan of Care ~~for Prevalent Medical Conditions form in the Maplewood database~~ with the principal. This process should be communicated to parents, at a minimum:

- a. during the time of registration;
- b. each year during the first week of school, by providing an updated Authorization for Administration of Medication ~~Health Form 5~~ (see Appendix ~~B A~~) to be completed and returned;
- c. when a child is diagnosed and/or returns to school following a diagnosis;

Remove Section 4 sub section 5 below and renumber remaining accordingly.

~~5. co-creating, reviewing, or updating the Plan of Care for students with life-threatening allergies at a minimum annually with the parent(s), in consultation with school staff (as appropriate) and with the student (as appropriate), using Plan of Care for Prevalent Medical Conditions – Health Form 5, Appendix A;—~~

7. providing relevant information from the student's Plan of Care to school staff, and others who are identified in the Plan of Care, as well as to occasional staff, volunteers, co-operative education students, student teachers, and other service providers, as appropriate, ~~using Plan of Care for Prevalent Medical Conditions – Health Form 5, Appendix A;~~ including when there are any revisions made to the plan

8. providing relevant information from the student's Plan of Care to the student's transportation provider ~~using Plan of Care for Prevalent Medical Conditions –~~

~~Health Form 5, Appendix A~~, including updates when the plan is revised;

- 10.c. providing anaphylaxis information through distribution of the PVNC brochure, 'Keeping Schools Safe - Protecting ~~Anaphylactic~~ Students with Life-threatening Allergies" (see Appendix ~~GB~~), ~~in~~ through student agenda books, ~~on~~ the school website, and ~~via~~ social media;
 13. informing parents of students with life-threatening allergies in writing (see sample letter in Appendix ~~DC~~) that the school requires 2 EpiPens®: one which is to be worn on the student's person at all times, and one which is to be kept at a central location in the school, accessible to staff if needed for that student;
 15. requesting the cooperation of parents and students of the school community in creating an allergy-safe environment (see sample letter Appendix ~~ED~~);
5. Section-School Staff are responsible for:
2. being aware of all students with life-threatening allergies in the school via the Plan of Care for Prevalent Medical Conditions - ~~Health Form 5, Appendix A forms~~ provided by the school administration;
 4. reviewing the contents of the Plan of Care, ~~specifically information outlined in Plan of Care for Prevalent Medical Conditions - Health Form 5, Appendix A~~, for any student with whom they have direct contact;
 - 11.leaving appropriate student ~~medical needs Plan of Care~~ information for occasional staff replacing them, in a prominent and accessible format;
6. Section-Parents are responsible for:
4. ~~co-creating the Plan of Care for their child with the principal and completing the Authorization for Administration of Medication form, in conjunction with~~ the child's health care professional on an annual basis;
 5. supplying their child and the school with ~~2~~ two current EpiPens® (one which is worn on the student's person, and one which is kept in a central, accessible location in the school) in their original, clearly labelled containers, as prescribed by a health care professional and as outlined in the Plan of Care, and tracking the expiration dates;
 6. completing the Plan of Care for Prevalent Medical Conditions ~~-Health Form 5, Appendix A form~~ in conjunction with the school administration;
 9. providing their child with safe foods, including for special occasions ~~celebrated at school events~~;
 - 11.encouraging their children to respect ~~anaphylactic students and~~ school prevention plans.
7. Students are responsible for:
5. wearing medical alert identification ~~that they and/or their parent(s) deem appropriate;~~ as provided by their parents;

MOTION: Moved by Mr. Dan Demers, seconded by Mr. Dave Bernier,
that the current Policy and Administrative procedure, *P-404 and AP-404 – Anaphylaxis-Reducing the Risks* be deleted and the relevant information be captured and incorporated into the new format as Administrative Procedure – #319 Anaphylaxis-Reducing the Risks and will be under Directional Policy-#300 Student Achievement and Well-Being.

Carried.

5. R.A.: Draft Administrative Procedure # 206 (New) Admission to Catholic Schools.
Mrs. Laurie Corrigan, Superintendent of Learning/Information Technologies and Mrs. Dawn Michie, Superintendent of Learning/Program K-12 reviewed the Draft Administrative Procedure #206 Admission to Catholic Schools with Trustees and answered questions including inquiries into taxes and guardianship.

Trustees reviewed Draft Administrative Procedure #507 Disability Management, and made the below recommendations, (~~strikeout in red~~ –remove from document, red no strikeout is added wording):

Definitions (add):

GUARDIAN

- A person who has lawful custody of a child, other than the parent of the child; includes anyone who has received into his or her home a person, other than his or her own child, of compulsory school age and that person resides with him or her or is in his or her care. Education Act 2006, c. 28, s. 4.

MOTION: Moved by Mr. Dan Demers, seconded by Mrs. Michelle Griepsma,

that the current Policy and Administrative procedure, *P-813 and AP-813 – Admission to Catholic Schools* be deleted and the relevant information be captured and incorporated into the new format as Administrative Procedure – #206 Admission to Catholic Schools and will be under Directional Policy-#200 Catholic Education.

Carried.

C. Information Items: No Items.

D. Next Meeting:

1. Tuesday, April 3, 2018 6:30 p.m. – 8:30 p.m.
1. Selection of Member for Opening Prayer – Mr. Dan Demers
2. Selection of Member for Closing Prayer – Mr. Dave Bernier

E. Conclusion:

1. Closing Prayer.

The Committee Chairperson, Mrs. Linda Ainsworth, asked Mrs. Michelle Griepsma to lead the Closing Prayer.

2. Adjournment.

MOTION: Moved by Mr. Dave Bernier, seconded by Mr. Dan Demers, that the meeting adjourn at 8:43 p.m.

Carried.

Linda Ainsworth
Committee Chairperson
pls

Michael Nasello
Director of Education

BOARD ADMINISTRATIVE PROCEDURE

Administrative Procedure

Student Acceptable Use of Technology

Administrative Procedure
Number

313 (NEW)
902 (OLD)

Directional Policy

300: Student Achievement and Well Being

TITLE OF ADMINISTRATIVE PROCEDURE:

Student Acceptable Use of Technology

DATE APPROVED: TBD

PROJECTED REVIEW DATE: April 2023

DIRECTIONAL POLICY ALIGNMENT: Student Achievement and Well Being

ALIGNMENT WITH MULTI-YEAR STRATEGIC PLAN:

The Student Acceptable Use of Technology Administrative Procedure supports our Vision for achieving Excellence in Catholic Education by ensuring the Board has clearly outlined the requirement for the acceptable use of technology for our students. The board is committed to creating a shared understanding and a systematic approach to the implementation of effective and responsible use of our technology systems. Technology is everywhere in our lives. This necessitates a collective effort and active engagement of our entire community, including students and parents, to ensure that technology use helps further our mission and strategic priorities.



Strategic Priorities 2017-2020

Vision
Achieving Excellence in Catholic Education
LEARN • LEAD • SERVE

Mission
To educate students in faith-filled, safe, inclusive Catholic learning communities by nurturing the mind, body and spirit of all.

LEARN

Achieve excellence in instruction and assessment to enable all students to become reflective, self-directed, lifelong learners.

LEAD

Foster critical thinking, creativity, collaboration, and communication, to enable all students to realize their God-given potential.

SERVE

Inspire engagement and commitment to stewardship for creation to enable all students to become caring and responsible citizens.

The Peterborough Victoria Northumberland and Clarington Catholic District School Board (the “Board”) is committed to establishing guidelines and expectations regarding the ethical and responsible use of the Internet and Technology systems.

The Board will, from time to time and without prior notice to the student, access and/or monitor the Board’s Electronic Information Systems. Principals will be informed of any serious infraction of the Student Acceptable Use of Technology Policy. Disciplinary actions of a student will be handled in accordance with the discipline policies of the Board and the school.

In our digital world it is imperative our students are well equipped to meet our Catholic Graduate Expectations and become effective communicators. This includes having the knowledge and skills to navigate social media and the internet in a safe, ethical and affirming manner. We know that access to technology can significantly deepen and enrich the learning opportunities for our students. The board is committed to providing digital citizenship resources for both staff and students that support the safe and responsible use of technology.

Students will abide by the terms of the applicable Student Acceptable Use of Technology Agreement and refrain from unlawful activity. Failure to comply with the Student Acceptable Use of Technology Agreement may result in the loss of computer/network privileges, financial compensation to the Board, pursuance of criminal charges, and/or other disciplinary action consistent with the School Code of Behaviour, Board Code of Conduct, Board Policy, and/or the Education Act. Inappropriate use of technology that impacts on the school community may fall under the purview of this policy even if not on school property.

RESPONSIBILITIES:

The Board of Trustees is responsible for:

- Ensuring alignment with the Student Achievement and Well Being Directional Policy.
- Reviewing the Student Acceptable Use of Technology Administrative Procedure as part of its regular policy and procedure review cycle.

The Director of Education is responsible for:

- Designating resources for ensuring the implementation and compliance with this Administrative Procedure.

Superintendent of Learning/Innovation Technologies is responsible for:

- Supporting technical innovation by overseeing the development of this acceptable use Administrative Procedure.

Superintendents of Schools and System Portfolios are responsible for:

- Supporting implementation of this Administrative Procedure.
- Promote a culture of positive digital citizenship that reinforces our Catholic virtues.

Manager of Information Technology is responsible for:

- Monitoring usage of the board's network systems.
- Establishing through school and community consultation internet filtering which protects students while maximizing educational opportunities.
- Providing digital citizenship and internet safety resources for staff and students.

Principals and Vice-Principals are responsible for:

- Notifying parents about the Student Acceptable Use of Technology Administrative Procedure.
- Securing on an annual basis the signatures of each student and their parent/guardian on the appropriate Acceptable Use of Technology Agreement for their grade. An electronic acknowledgement of the agreement may also serve as the official record in lieu of a paper copy.
- Establish the steps to be taken by students and staff to respond to the inadvertent access of inappropriate/illegal content on the internet.
- Cooperate fully with Education Centre staff and local authorities in any investigation related to any illegal activities conducted through the technology systems of the Board.
- Ensure that the provided digital citizenship training is completed by their staff and students.

Staff are responsible for:

- Ensuring that students understand the acceptable use of technology as part of an instructional plan.
- Providing students with instruction on the appropriate use of the internet and protocols for use of electronic mail prior to using those tools.
- Provide students with digital citizenship instruction on an annual basis.
- Ensuring that the guidelines, resources and frameworks developed for board use of digital tools are followed.

Students are responsible for:

- Using available technology to further their educational goals and promote Catholic teaching.
- Reading and acknowledging the Student Acceptable Use of Technology Agreement appropriate for their grade on an annual basis. An electronic version of the agreement may also serve as the official record in lieu of a paper copy.

Parents are responsible for:

- Reading, supporting, and acknowledge by signing the Student Acceptable Use of Technology Agreement appropriate for their child's grade on an annual basis. An electronic acknowledgement of the agreement may also serve as the official record in lieu of a paper copy.

PROGRESS INDICATORS:

- Yearly completion of Student Acceptable Use of Technology forms by students and parents.
- Student access of Digital Citizenship resources.

DEFINITIONS:

- **Digital Tools** - Electronic tools that are used to help deliver instruction or for other classroom purposes. A movie maker app is an example of a digital tool that can be used to help students create a movie to help explain a concept they are learning.
- **Technology** - all forms of technology used to create, store, exchange, and use digital information in its various forms (data, audio, still images, motion pictures, multimedia presentations, and other forms, including those not yet conceived).

REFERENCES:

- [Catholic Curriculum Corporation - Ethical and Responsible Use of Information and Communication Technology](#)
- [Bill 13, Accepting Schools Act, 2012](#)
- [Student Achievement and Well Being Directional Policy - 300](#)

BOARD ADMINISTRATIVE PROCEDURE

Administrative Procedure

Employee Acceptable Use of Technology

Administrative Procedure Number

511 (NEW)
903 (OLD)

Directional Policy

Employee Relations

TITLE OF ADMINISTRATIVE PROCEDURE:

Employee Acceptable Use of Technology

DATE APPROVED: TBD

PROJECTED REVIEW DATE: April 2022

DIRECTIONAL POLICY ALIGNMENT: Employee Relations

ALIGNMENT WITH MULTI-YEAR STRATEGIC PLAN:

The Employee Acceptable Use of Technology Administrative Procedure supports our Vision for achieving Excellence in Catholic Education by ensuring the Board has clearly outlined the requirement for the acceptable use of technology for our employees. The board is committed to ensuring that technology is used for proper work-related purposes and in a manner that is not detrimental or harmful to the interests of others or that compromise the confidentiality or proprietary nature of information belonging to the Board. The intent is to create a shared understanding of the expectations the Board has with respect to employees' conduct with and via technology.



Strategic Priorities 2017-2020

Vision

Achieving Excellence in Catholic Education
LEARN • LEAD • SERVE

Mission

To educate students in faith-filled, safe, inclusive Catholic learning communities by nurturing the mind, body and spirit of all.

LEARN

Achieve excellence in instruction and assessment to enable all students to become reflective, self-directed, lifelong learners.

LEAD

Foster critical thinking, creativity, collaboration, and communication, to enable all students to realize their God-given potential.

SERVE

Inspire engagement and commitment to stewardship for creation to enable all students to become caring and responsible citizens.

ACTION REQUIRED:

It is the practice of the Peterborough Victoria Northumberland and Clarington Catholic District School Board to provide authorized employees and service providers with access to the Board's Technology systems, including (but not limited to) its electronic mail, internet, and voice mail systems.

The Board shall maintain electronic mail, internet, and voice mail systems as part of its technology platform. These systems are provided to assist in the conduct of Board business and may be utilized only as directed or outlined by the Board. All email and internet communications sent and received by users shall remain the property of the Board. Employee email, internet, or voice-mail communications are not private or personal despite any such designation by the sender or the recipient. Personal or private communications transmitted on the Board's electronic information system may be accessed, reviewed, copied, deleted, retained, or disclosed by the Board at any time and without notice. Records created by Board staff in the performance of their duties are subject to the Municipal Freedom of Information and Protection of Privacy Act and may be subject to public disclosure.

The Board reserves the right, without prior notice to the employee, to monitor the Technology systems at the work site. The Board may access any of these technology systems, devices, or networks any time and without prior notice to the employee or service provider. Staff members are permitted to use board technology for incidental personal use but the board will, nevertheless, retain the right to search the technology to ensure compliance with this policy, including searching personal files that might be stored on the hardware.

Failure to comply with this Administrative Procedure may result in the loss of access privileges, financial compensation to the Board, pursuance of criminal charges, and/or other disciplinary action up to and including discharge.

RESPONSIBILITIES:**The Board of Trustees is responsible for:**

- Ensuring alignment with the Employee Relations Policy.
- Reviewing the Employee Acceptable Use of Technology Administrative Procedure as part of its regular policy and procedure review cycle.

The Director of Education is responsible for:

- Designating resources for ensuring the implementation and compliance with this Administrative Procedure.

Superintendents of Schools and System Portfolios are responsible for:

- Supporting implementation of this Administrative Procedure.
- Reviewing and authorising requests for access to technology systems that supports curriculum outcomes but may be outside the stated guidelines of the policy.

Manager of Information Technology is responsible for:

- Monitoring usage of the board's technology systems and establishing guidelines for IT staff for monitoring.
- Providing digital citizenship and internet safety resources for employees.
- Providing a unique username and password for each employee for their exclusive access to the Board's technology systems.

Manager of Human Resources is responsible for:

- Ensuring all new staff acknowledge they have read and understood the Administrative Procedure and will place a signed copy of the acknowledgement form in the employee's personnel file. An electronic acknowledgement of the policy may also serve as the official record in lieu of a paper copy.

Principals and Vice-Principals and Managers are responsible for:

- Ensuring that on an annual basis each of their staff complete the Employee Acceptable Use of Technology Agreement. An electronic acknowledgement of the policy may also serve as the official record in lieu of a paper copy.
- Providing access to the Administrative Procedure at the work site and, upon request of an employee, will provide a personal copy of the Administrative Procedure.

Staff are responsible for:

- Completing on an annual basis the Employee Acceptable Use of Technology Agreement. An electronic version of the agreement may also serve as the official record in lieu of a paper copy.
- Protecting the integrity of their board user account credentials and being accountable for their use by:
 - o Never sharing their password
 - o Not using the same password for work as for personal accounts
 - o Not writing down passwords or including them in email
 - o Not storing passwords electronically unless encrypted

- Abide by generally accepted rules of etiquette, including the following:
 - Be polite and respectful. Do not be abusive in your exchanges with others.
 - Use appropriate language. The use of abusive, harassing, or profane language is prohibited.
 - Do not post chain letters or engage in “spamming”.
- Conserving internet bandwidth by limiting activities known to consume large amounts of bandwidth.
 - e.g. video streaming to multiple individual devices when a single stream to a projector would be more appropriate.
 - e.g. audio streaming during the school day when a radio would be more appropriate.
- Complying with the Board’s Personal Network Device policy if using a Personal Network Device.
- Ensuring that when sending Commercial Electronic Messages that the message is compliant with the Canadian Anti Spam Legislation requirements
- Alerting their immediate supervisor upon learning of misuse of technology systems on the work site.
- From time to time, staff will have in their possession electronic versions of student data, it is the employee’s responsibility to safeguard that data under the Ontario Student Record Guidelines and if applicable, the Municipal Freedom of Information and Protection of Privacy Act and/or the Ontario Health Information Protection Act. Employees who suspect that this data has been compromised shall notify their immediate supervisor.
- Ensuring they do not send confidential or proprietary information to technology systems external to the board, nor forwarding emails marked as confidential. Employees may, with the approval of a Supervisory Officer, exchange proprietary information with an Approved Service Provider over technology systems provided the appropriate level of encryption is in place (in transit and at rest).
- Ensuring they do not establish internet or external connections that could allow unauthorized access to the Board’s computer systems and information. These connections include (but are not limited to) the establishment of multi-computer file systems, ftp servers, email servers, telnet, internet relay chat or remote control software.
- Ensuring they do not use technology systems to store, distribute, post, download, or view any defamatory, abusive, obscene, profane, pornographic, sexually oriented, threatening, racially or ethnically offensive, sexist or illegal material.

- Ensuring technology systems at a work site are not used for any unlawful activity as outlined in Appendix A.

PROGRESS INDICATORS:

- Completion of Acceptable Use Agreement at time of hire and annually thereafter
- Results of IT and Security audits

DEFINITIONS:

- **Approved Service Provider** – An organization that provides educational or ancillary services to the Board, for example, a transportation consortium.
- **Commercial Electronic Message (CEM)** - an electronic message that encourages participation in a commercial activity, including, but not limited to: offering, advertising or promoting a product, a service or a person.
- **Employee** - a person who performs any work for, or supplies any services to, an employer for wages (excluding honoraria).
- **Personal Network Device** - a device, owned by the user, which has the capability to connect to a computer network, either through a network wire or using a radio designed to connect to a wireless computer network. Examples include: laptops, netbooks, some portable music players, some portable game devices, and most cellular telephones.
- **Spamming** - sending an annoying or unnecessary message to a large number of users.
- **Technology Systems** - all forms of technology used to create, store, exchange, and use digital information in its various forms (data, audio, still images, motion pictures, multimedia presentations, and other forms, including those not yet conceived).
- **Unlawful Activity** - Appendix 'A'

REFERENCES:

- [PVNC Catholic District School Board Vision and Strategic Priorities 2017-2020](#)
- [Employee Relations Directional Policy - 500](#)
- [Personally Owned Network Device Policy - 904](#)
- [Canadian Anti-Spam Legislation](#)
- [Municipal Freedom of Information and Protection of Privacy Act](#)
- [Ontario Student Record Guidelines](#)
- [Ontario Personal Health Information Protection Act](#)
- [Ontario Libel and Slander Act](#)

Appendix A - Unlawful Activity

For the purpose of this policy, “unlawful activity” is interpreted broadly and includes any criminal activity or other illegal activity.

The following are examples of “**unlawful activity**” for the purpose of the policy:

Child pornography	possessing, downloading or distributing any child pornography.
Intellectual Property	infringing on another person’s copyright, trademark, trade secret or any other property without lawful permission. This includes possession of tools to defeat intellectual property controls (e.g. key generators and cracking software)
Other Criminal Activity	using electronic transmission as a means to commit criminal activity (examples include but are not limited to fraud, extortion, sale and/or purchase of restricted goods)
Defamatory Libel	A matter published without lawful justification or excuse, that is likely to injure the reputation of any person by exposing that person to hatred, contempt or ridicule, or that is designed to insult the person. - <i>The Libel and Slander Act, RSO 1990, Chapter L.12.</i>
Disclosing or Gathering Personal Information	Disclosing personal information in a manner inconsistent with the <i>Municipal Freedom of Information and Protection of Privacy Act</i> .

Hacking and other crimes related to computer system	Examples include (but are not limited to): <ul style="list-style-type: none">-gaining unauthorized access to a computer system-trying to defeat the security features of network connected devices-use of software and/or hardware designed to intercept, capture and/or decrypt passwords-intentionally spreading a computer virus-destroying or encrypting data without authorization and with the intent of making it inaccessible to others' with a lawful need to access it.-interfering with other's lawful use of data and technology.
Harassment	sending electronic messages, without lawful authority, that causes people to fear for their safety or the safety of anyone known to them.
Hate Propaganda	communicating messages that promote or incite hatred against an identifiable group that is likely to lead to a breach of the peace.
Interception of private communications or electronic mail	unlawfully intercepting someone's private communications or electronic mail.
Obscenity	distributing, publishing or possessing for the purpose of distributing or publicly displaying any obscene material.



BOARD ADMINISTRATIVE PROCEDURE

ADMINISTRATIVE PROCEDURE

OSR
(Ontario Student Record)
Management

ADMINISTRATIVE PROCEDURE
NUMBER

1203

Directional Policy

Records and Information - 1200

TITLE OF ADMINISTRATIVE PROCEDURE:

Ontario Student Record (OSR) Management

DATE APPROVED:

PROJECTED REVIEW DATE: 2023

DIRECTIONAL POLICY ALIGNMENT: This Board Administrative Procedure aligns with Board Directional Policy – **Records and Information – 1200** – by operationalizing the Board’s commitment to managing student information as a strategic asset that must be managed securely, efficiently and effectively for present and future generations as part of a coordinated and integrated approach to records and information management.

ALIGNMENT WITH MULTI-YEAR STRATEGIC PLAN: This Board Administrative Procedure aligns with the Board’s vision of Achieving Excellence in Catholic Education and supports the Board’s Strategic Priorities.

Strategic Priorities 2017-2020



Vision

Achieving Excellence in Catholic Education
LEARN • LEAD • SERVE

Mission

To educate students in faith-filled, safe, inclusive Catholic learning communities by nurturing the mind, body and spirit of all.

LEARN

Achieve excellence in instruction and assessment to enable all students to become reflective, self-directed, lifelong learners.

LEAD

Foster critical thinking, creativity, collaboration, and communication, to enable all students to realize their God-given potential.

SERVE

Inspire engagement and commitment to stewardship for creation to enable all students to become caring and responsible citizens.

ACTION REQUIRED:**1.0 Background**

An Ontario Student Record (OSR) is a collection of records documenting a student's academic career for elementary and secondary education in Ontario. One OSR will be established for every enrolled student including international, out of province, and exchange students.

The Education Act and the Ministry of Education's Ontario Student Record Guideline, 2000 obligates school boards to create and maintain an OSR for every student. These authorities set out the policies of the Ministry of Education with regard to the establishment, maintenance, use, retention, transfer and disposal of the OSR.

Additionally, these authorities set out minimum content for OSRs and direct school boards to identify further student information "conducive to the improvement of instruction and other education" to be retained in the OSR.

Actions impacting the collection, access or use, disclosure or destruction of student information contrary to Ontario legislation and this Administrative Procedure are prohibited.

2.0 Content

OSR content is personal and subject to the provisions of the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), and, in some cases, the Personal Health Information Protection Act (PHIPA).

Ministry Directed Content:

1. OSR folder
2. Report cards
3. Ontario Student Transcript
4. Documentation file (when records exist)
5. Office Index Card (an associated record not filed in the OSR)
6. Accumulated instruction in French as a second language in elementary school

Board Directed Content:

1. Achievement/assessment
2. Biographical information
3. Communications/consents
4. Enrolment
5. Scheduling
6. Program
7. Behaviour, discipline and safety

The OSR Content Directory, a supporting document of this Administrative Procedure, includes the complete list of records to be retained in the OSR, should they exist, and prescribes the organization, retention, format and transferability of the records. This content directory is subject to change and changes will be communicated to all staff through a Board memo from Communication Services.

3.0 Security

Mechanisms for the security and confidentiality of OSRs must be adhered to. These include:

1. Storing OSRs in locked cabinets or rooms.
2. Logging out of online platforms (e.g. Maplewood) when not in use.
3. Adhering to a sign-out procedure for OSR access.
4. Returning all OSRs to locked storage at the end of each work day.
5. Restricting access as described in this procedure.
6. Transporting OSRs using mechanisms that ensure security and confidentiality (e.g. carefully sealing mailing envelopes and marking them “confidential”).

4.0 Access

Right of access to OSRs is established in Ontario acts of legislature, Board procedure and Ministry directives.

Right of access:

In the school:

1. Student.
2. Parents/guardians, unless access rights have been revoked by a court.
3. Principals, teachers, secretaries, early childhood educators, and special education consultants and safe schools teachers assigned to the school.

Within the Board:

1. Superintendents.
2. Board staff with responsibilities associated with the management of student information such as information technology, records and information management, freedom of information and protection of privacy and administrative assistants.

External:

1. The police can access a student's OSR in pressing circumstances without a warrant, under section 487.1.1 of the Criminal Code. Section 32 (g) of MFIPPA expressly permits a school board to disclose confidential information to the police to aid in an investigation undertaken with a view to where a law enforcement proceeding is likely to result.

2. Children's Aid Society.
3. The Office of the Information and Privacy Commission of Ontario.
4. In response to a court order, subpoena or search warrant and as outlined in s.266 of the Education Act.
5. The Medical Officer of Health.
6. Lawyers representing the Office of the Children's Lawyer.

Access with written permission:

1. Parents/guardians when the student is aged 18 or older.
2. Special educational support staff of the board (e.g. social workers, educational assistants, speech and language pathologists and psychometrists).
3. Anyone granted permission by a legal guardian with custodial powers.

No right of access:

1. Parents/guardians where access rights have been revoked by a court of law.
2. Foster parents unless confirmed as legal guardians.
3. Volunteers.
4. Trustees.

RESPONSIBILITIES:

The Board of Trustees is responsible for:

- Ensuring alignment with the Records and Information Directional Policy.
- Reviewing the Ontario Student Record (OSR) Management Administrative Procedure as part of its regular policy and procedures review cycle.

The Director of Education is responsible for:

- Designating resources for ensuring the implementation of and compliance with this Administrative Procedure.

Superintendents are responsible for:

- Ensuring principals are consistent with the application of this Administrative Procedure.
- Ensuring that any employee for whom they have supervisory responsibility are aware of the requirements under this Administrative Procedure and that employees follow the requirement and adhere to the confidentiality and security requirements afforded the OSR.
- Assist the school principal with responsibilities and duties as assigned.
- Rule on disagreements with respect to parent/guardian requests to alter OSR records.

Principals are responsible for:**A. Oversee the management of OSRs at the school as follows:**

1. Ensure the creation, acquisition, maintenance, retention, transfer and disposition of OSRs is in accordance with legislation, Board procedure and Ministry instruction.
2. Ensure security, access and content of OSRs is in keeping with Ministry guidelines and this Administrative Procedure.
3. Delegate responsibilities as necessary to vice principals, teachers, guidance teachers and secretaries.

B. Oversee the accuracy of biographical information of each student as follows:

1. Delegate responsibility to verify date of birth, legal name, gender, and assigned identification numbers using appropriate identity documents and confirming the verification by initialing the OSR folder.
2. Delegate responsibility to update biographical information at the start of each school year. This includes home address, contact information, and parent/guardian information.
3. Accept a “repute” name where it is in the best interest of the student to do so, e.g. the student has been known by the repute name exclusively. The legal surname remains recorded on the OSR in parentheses following the repute name. Both names are recorded in Maplewood. The Ontario Education Number (OEN) remains the same.
4. Accept a new legal name or change in gender designation when presented with new identity documentation from the Ontario Registrar General e.g. Birth Certificate. Keep a record of verification of documentation. Update the OSR and Maplewood accordingly, both the active and inactive record.

C. Ensure proper access as follows:

1. Permit access by those who have a right of access and deny access to those with no right of access. Principals should notify superintendents when requests for access are made by law enforcement or lawyers.
2. Enforce the use of the Consent to Access form when permission is required.
3. Communicate to students and parents/guardians about the OSR and their access rights as follows:
 - i. Students or parents/guardians, once parental custodial rights have been confirmed (acquire and file a copy of the current custody documents, where they exist, in the OSR), can examine the OSR under supervision by the principal or delegate.
 - ii. Should parents/guardians or students request the removal or correction of a record, the principal will decide the request based upon the accuracy and date of the record, how the record assists in the improvement of instruction, what other policy obligations exist, and statutory retention requirements.

- iii. Should the principal agree to remove or correct a record, both the OSR record and the electronic record (where it exists) must be equally adjusted.
 - iv. Should the principal disagree to the removal or correction of a record, the matter may be referred to the family of schools superintendent.
 - v. If the superintendent rules that a record should remain in the OSR against the wishes of a student or parent/guardian, allow a statement of disagreement to be attached to any record that a student or parent/guardian wishes corrected or removed.
- 4. Create and file in the OSR, a notation of any copies taken of OSR content.
 - 5. Contact family of schools superintendent when served with a search warrant or a court subpoena, prior to complying.
- D. Review or delegate the review of the OSR to update and remove expired records:
- 1. At the end of each elementary division (primary and junior).
 - 2. Upon transfer.
 - 3. Prior to promotion to secondary school.
 - 4. Five years post retirement before the OSR is transferred centrally to the Records and Information Management Office.
- E. Ensure the confidentiality of the OSR is protected at all times and report breaches to Communication Services.
- F. Transfer single OSRs as follows:
- 1. Within the Board – upon receipt of a written request from the receiving school and using the Board courier system in a sealed envelope marked “confidential.”
 - 2. Outside of the Board to another Ontario school board – upon receipt of a written request from the receiving school and using a commercial courier.
 - 3. To a First Nation school, a federally or provincially operated school (a demonstration school), or a private school (inspected by the Ministry of Education) upon receipt of written requests from the receiving school and the parents/guardians and using a commercial courier.
 - 4. Out of Ontario – upon receipt of written requests from the receiving school and the parents/guardians, provide copies only. The original OSR must be retained.

And further,

- i. Record the transfer in Maplewood.
- ii. Retain a record of the transfer for two full school years.
- iii. Transfer in hard copy form (do not fax or email).
- iv. Return an OSR to the sending school if the student does not arrive as expected.

- v. Do not transfer the Office Index Card. Retain for five years by year of retirement and then transfer to Records and Information Management central storage.

G. Transfer of OSRs for Grade 8 transition to secondary school as follows:

1. In June, secondary schools send a list of students who have registered for September to feeder schools.
2. Elementary schools transfer the appropriate OSRs by the end of June.
 - a) The elementary school staff person will use the OSR Transfer label, filling it out completely and adhering one to each box.
 - b) Regular board courier will be used to deliver the boxes.
 - c) The elementary school staff person will advise the contact at the secondary school once the boxes have been picked up for delivery.
 - d) The contact at the secondary school will confirm receipt of the proper number of boxes with the sending elementary school by email. The OSR boxes will be placed in a secure, locked room until records can be filed in the school's OSR cabinets.
3. OSRs of students who do not begin classes by Friday of the first week of school in September are returned to the elementary school to await an official OSR request from the secondary school at which the student has registered.

H. Education outside of the normal classroom setting:

1. When a student is actively enrolled in a PVNCCDSB day school and attends a Continuing Education program, the OSR remains with the PVNCCDSB day school. Information on credits completed is forwarded to the PVNCCDSB day school for inclusion in the Ontario Student Transcript (OST). The Continuing Education Program includes night school and summer school.
2. When a student has retired from a PVNCCDSB day school and registers in program of continuing education offered externally to PVNCCDSB, the program will request in writing that the OSR to be transferred. Schools and Central Records will transfer the OSR and maintain a record of the transfer.
3. When a student is provided with instruction out of school; receiving home schooling; or is attending New Leaf (a program for suspended or expelled students), the school at which the student is currently or last enrolled is responsible for the management of the OSR. If the student is Grade 9 age appropriate, the elementary school will transfer the OSR to the secondary school that the parent/guardian declares the home schooling status to each year. The OSR is not sent to Records and Information Management central storage unless the student is no longer enrolled.

I. Oversee the response to a lost OSR as follows:

1. Search thoroughly to confirm the OSR is lost.

2. Inform the parent/guardian and student of the loss and contact the Communications Manager.
3. Create a replacement OSR by:
 - i. Noting that this is a replacement OSR on the folder.
 - ii. Referencing the Office Index Card for biographical data and completing the succession of schools attended.
 - iii. Accessing Maplewood for information for inclusion in the OSR.
 - iv. Collecting special education and information from other sources in the Board.

J. In the event of a school closure;

1. OSRs for active students are forwarded to the school(s) where the students enrol.
2. OSRs for inactive students and Office Index Cards for all students will be sent to Records and Information Management central storage.

School Staff are responsible for:

1. Retain and manage the content of each OSR in accordance with this procedure, the OSR Content Directory and as instructed by the school principal.
2. Ensure the confidentiality of OSR content and maintain OSRs securely.
3. Organize retired OSRs chronologically by year of retirement in the school for five years. At the end of the five years, the OSR will be purged at the school and then transferred to Records and Information Management central storage for the remaining 50 years of legal retention.
4. When a student moves out of province, record the last date attended and that the student “moved out of province” in the retirement section of the OSR jacket and in Maplewood and print a final office index card.

Records and Information Management Staff are responsible for:

1. Research student record retention obligations and keep resources up-to-date.
2. Provide support in the management of active OSRs.
3. Centrally store inactive OSRs.
4. Shred purged OSR content under the authorization of the school principal.
5. Return an OSR to the appropriate school should a student re-enrol.
6. Audit the management of OSRs.

Computer Technology Staff are responsible for:

1. Maintain electronic student records.

PROGRESS INDICATORS:

OSR Compliance Checklist

DEFINITIONS:***Ontario Student Record (OSR)***

The Ontario Student Record is the official record required by the Ministry of Education that documents the educational progress of the student such as achievement results, credits earned, and other information important to the education of the student. It is a legal record that can be used for identification purposes.

It serves to guide instructional decisions and to provide the student, parents/guardians and educators with important information about the student's progress. For the purpose of access, the content of an OSR can be retained in paper and in electronic formats.

Active OSR

The official student record maintained at the school while the student is actively enrolled at that school.

Inactive OSR

The official student record retained by the school for five years after the student retires from school. Parts of the record are retained a further 50 years in Records and Information Management central storage. After 55 years, the records are destroyed under written authorization by the school principal.

Office Index Card

The office index card provides the school with immediate access to information about a student. It will remain at the school during the period in which the student is enrolled at the school. The card is not filed in the OSR folder and is not transferred with the OSR when the student transfers from the school.

Legal Guardian

A person with legal custody of a person under the age of 18. This includes biological parents where custody has not been revoked by a court of law; anyone granted legal custodianship by a court of law such as Power of Attorney for Personal Care; and child welfare agencies staff where the student is their legal ward. Custody means full right to make decisions regarding the child's health, education and welfare and to have access to their information maintained by the school.

Legal Name

A legal name is the full name given for the purpose of birth registration and which then appears on a birth certificate identifying a person for legal, and other official purposes. It includes given names (first and middle) and surnames. The legal name appears on all documents produced by the Board.

Repute Name

A repute name is one by which a person is generally referred. It is not a legally changed name and does not legally or officially replace a legal name.

Retired

A student is considered retired when they leave a publicly-funded school in Ontario. The OSR is retired when the student graduates, leaves Ontario, drops out of school or dies.

Demonstration School

Provincial demonstration schools are unique facilities for learning by deaf, blind, deafblind and/or severely learning-disabled students that are operated by the Ministry of Education.

Maplewood

Maplewood is the current student management/information system used by PVNCCDSB. It contains student information and achievement data electronically, some of which is printed (e.g. report cards) and stored in the official OSR.

REFERENCES:

- [Education Act R.S.O. 1990, Chapter E.2](#)
- [The Ontario Student Record \(OSR\) Guideline 2000](#), Ontario Ministry of Education
- [Municipal Freedom of Information and Protection of Privacy Act R.S.O. 1990, Chapter M.56](#)
- [Personal Health Information Protection Act S.O. 2004, Chapter 3, Schedule A](#)

Supporting Documents

OSR Content Directory

OSR Content Directory Quick Reference

OST Transfer Label

Forms

Consent to Transfer an OSR

Consent to Share Information with Third Parties

Consent to Access the OSR

Consent for Information Sharing- Students at the Age of Majority

Request to Alter an OSR

OSR Copy Tracking Log

Declaration of Independence Students at Ages Sixteen and Seventeen

Related Policy and Procedure

Parent/Guardian Access to Student Information

Records and Information Management

Information Access and Privacy Protection

BOARD ADMINISTRATIVE PROCEDURE

ADMINISTRATIVE PROCEDURE

**Workplace
Accommodation**

ADMINISTRATIVE PROCEDURE
NUMBER

503

Directional Policy

Employee Relations - 500

TITLE OF ADMINISTRATIVE PROCEDURE:

Workplace Accommodation

DATE APPROVED: April 3, 2018

PROJECTED REVIEW DATE: April, 2023

DIRECTIONAL POLICY ALIGNMENT: Employee Relations

ALIGNMENT WITH MULTI-YEAR STRATEGIC PLAN:

The Board values and respects all individuals and is committed to providing an equitable workplace that supports accessibility, diversity and the equitable treatment of all current and prospective employees. The Workplace Accommodation Administrative Procedure endeavours to keep employees with a disability in the workplace and assist in the return to work of employees who cannot perform the full scope of their duties, permanently or temporarily.



Strategic Priorities 2017-2020

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Mission

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LEARN

Achieve excellence in instruction and assessment to enable all students to become reflective, self-directed, lifelong learners.

LEAD

Foster critical thinking, creativity, collaboration, and communication, to enable all students to realize their God-given potential.

SERVE

Inspire engagement and commitment to stewardship for creation to enable all students to become caring and responsible citizens.

ACTION REQUIRED:

1.0 Background

All employees will be treated with fairness, consistency, respect and compassion. The Board's Workplace Accommodation Administrative Procedure is an integrated partnership among employees, supervisors/administrators, union representatives, and health care providers that support employees who are unable to perform their regular duties because of a disability.

The Board acknowledges and understands the obligation of an employer to take steps to eliminate the disadvantage caused by systemic, attitudinal, or physical barriers that unfairly exclude individuals or groups protected under the Ontario Human Rights Code.

Participation in the Workplace Accommodation Administrative Procedure is a requirement for all employees of the Board.

2.0 Process for Workplace Accommodation

Each person with a disability will be considered individually, on a case-by-case basis, in order to determine workplace accommodation requirements.

The workplace accommodation process includes the following phases:

(note – Phase 5 is only applicable if there is an issue with the accommodation request)

Phase 1 - Recognize the Need for Accommodation:

The need for accommodation can be:

- Requested by the employee in writing to the Board's Wellness Coordinator or designate. This may be related to an employee requiring an accommodation because of a disability or an employee returning to work following a disability;
- Identified by the employee's Principal/Supervisor or Board employees involved in the recruitment process;
- Requested by a prospective employee to the Board employee coordinating the recruitment process.

Employees or prospective employees may request the participation of a support person if required. Employees may request the participation of their Union Representative in the process, if applicable. In some cases, a Union Representative is required:

- When an employee requests the union's involvement;
- When the union has participated in creating a discriminatory policy or rule;
- When the union's agreement is necessary to facilitate accommodation (by alleviating the application of a term of the collective agreement).

When a Union Representative is participating in the accommodation process they take an active role as a partner in the accommodation process and share joint responsibility with the employer to facilitate accommodations in accordance with the Ontario Human Rights Code (OHRC) and the Accessibility for Ontarians with Disabilities Act (AODA).

Phase 2 - Duty to Inform, Gather Relevant Information and Assess Needs:

The Board will accept the employee's or prospective employee's request for accommodation in good faith, unless there are legitimate reasons for requiring additional information from a health care professional who can speak to the disability and disability needs as they relate to employment.

In cases where the Board requires additional documentation from a health care professional, the Board may request this information directly from the employee or the prospective employee, or may request an evaluation by an outside third party expert (per relevant Collective Agreements and Terms & Conditions), at the Board's expense in order to assist in determining how the accommodation can be achieved.

The duty to inform requires the employee or prospective employee to cooperate in answering questions or providing information regarding the relevant restrictions or limitations (as stated in the OHRC), including information from a Health Care Professional where appropriate and as needed. The employee or prospective

employee is not required to disclose specific information about their disability such as diagnosis.

Medical or other documentation relating to the employee's disability will be provided to the Board's Wellness Coordinator or designate. This information is kept in a file which is kept separate from their personnel file and is secured within the Disability Management office

Phase 3 - Formalizing an Individual Accommodation Plan (IAP) / Return to Work Plan (RTWP):

The employee and Wellness Coordinator or designate will work together to identify the appropriate workplace accommodation, in consultation with the Supervisor/Principal, Human Resource Services, the Union Representative (if applicable) or other relevant stakeholders.

Once the appropriate accommodation has been identified, the accommodation details will be formally documented using the IAP or RTWP.

In accordance with the AODA O. Reg. 191/11, s. 28 (3), individual accommodation plans must be documented and must include:

- How the Board will provide workplace information in an accessible format, if requested;
- How the Board will provide accessible emergency information, if needed;
- Any other accommodation that is to be provided. The accommodation plan is provided to the employee in a format respecting any accessibility needs, as appropriate.

The Wellness Coordinator or designate will be responsible for leading the accommodation process and formalizing the IAP or RTWP. A copy of the draft IAP/RTWP will be provided to the employee, Principal/Supervisor, and Union Representative (if required/applicable). Feedback will be considered and discussed as necessary. Any of the stakeholders involved in the workplace accommodation process may request a meeting to discuss the IAP / RTWP. The Board may require a meeting before an IAP / RTWP begins.

Phase 4 - Monitoring and Reviewing the Individual Accommodation Plan:

The employee and Principal/Supervisor will monitor the IAP / RTWP to ensure it is meeting the employee's needs. The Wellness Coordinator or designate will ensure the IAP / RTWP is reviewed on a regular basis.

An employee may request that an IAP / RTWP be reviewed or updated if changes to the workplace accommodation(s) are required due to changes in the employee's accessibility need due to disability.

When an employee's work location changes, the employee's new supervisor will be made aware of the IAP / RTWP by the Wellness Coordinator or designate. A meeting may be convened to discuss if necessary.

Any updates or reviews to the IAP / RTWP will be provided to the employee in a format that takes into consideration the employee's accessibility need due to disability.

Where an employee is dissatisfied with an identified accommodation, a review can be undertaken by the Wellness Coordinator or designate. The employee must provide a rationale in writing of the request for review and must provide any new relevant information.

In the event that the internal review processes remain unsatisfactory, the employee maintains access to grievance processes as afforded through their collective agreement, as applicable.

Phase 5 - Inability to Provide Workplace Accommodation:

The workplace accommodation process is a partnership between employees, the Board and where appropriate other relevant parties, however, the final decision(s) regarding accommodation remains the responsibility of the Board.

If an accommodation need meets the threshold of undue hardship, the employee will be provided with a rationale in an accessible format.

3.0 Equipment

Occasionally an employee may require certain equipment as part of their accommodation needs. The Board may require medical documentation to support these requests in some cases.

The Wellness Coordinator or designate will review options and decide on which equipment meets the employee's needs in a cost effective way. All equipment purchases are coordinated by the Wellness Coordinator or designate and approved by the Manager of Human Resource Services.

Any equipment purchased for a workplace accommodation is property of the Board.

RESPONSIBILITIES:

The Board of Trustees is responsible for:

- Ensuring alignment with the employee Relations Directional Policy.
- Reviewing the Workplace Accommodation Administrative Procedure as part of its regular policy and procedures review cycle.

The Director of Education is responsible for:

- Designating resources for ensuring the implementation of and compliance with this Administrative Procedure.

Superintendents are responsible for:

- Ensuring Principals/Supervisors are consistent with the application of this Administrative Procedure.
- Ensuring that any employee for whom they have supervisory responsibility are aware of the requirements under this Administrative Procedure and that employees follow the requirement for workplace accommodation.

Principals, Vice-Principals, Managers and Supervisors are responsible for:

- Ensuring staff who they supervise are aware of the requirements under this Administrative Procedure.
- Participating in the Workplace Accommodation process including but not limited to attending meetings, providing feedback on IAPs / RTWPs, and ensuring workplace accommodations are being met.

The Wellness Coordinator or designate is responsible for:

- Responding to workplace accommodation requests in a timely manner.
- Collecting and assessing information on abilities and limitations & restrictions in an effort to identify the appropriate workplace accommodation.
- Evaluating and identifying any workplace barriers and providing strategies to resolve workplace barriers.
- Attempting to provide suitable employment that is available and consistent with the worker's functional abilities.
- Communicating with the Board, union and supervisor such information as the Board may request concerning the employee's workplace accommodation.
- Facilitating the purchase of equipment required for workplace accommodation.

Staff are responsible for:

- Informing the Wellness Coordinator or designate of any accommodation requirement.
- Collaborate with the Board to identify the appropriate workplace accommodation.
- Sharing information regarding their disability needs when they are pertinent to identifying the most appropriate, reasonable and necessary accommodation.

PROGRESS INDICATORS:

- PVNCCDSB will achieve a culture and work environment that is supportive of employees with disabilities and promotes dignity, independence, integration, and equal opportunity;
- This administrative procedure will comply with all applicable legislation, collective agreement provisions and Board policy and will be consistent with principles of confidentiality and shared responsibility.

DEFINITIONS:

Accommodation - Any modification to the work or the workplace, including but not limited to reduced hours, reduced productivity requirements, and/or the provision of assistive devices, that results in work becoming available that is consistent with the worker's functional abilities and that respects applicable human rights legislation.

Disability - As per the Ontario Human Rights Code, a disability is defined as any of the following:

- Any degree of physical disability, infirmity, malformation or disfigurement that is caused by bodily injury, birth defect or illness, including, but not limited to, diabetes, mellitus, epilepsy, a brain injury, any degree of paralysis, amputation, lack of physical coordination, blindness or visual impediment, deafness or hearing impediment, muteness or speech impediment, or physical reliance on a guide dog or other animal or on a wheelchair or other remedial appliance or device.
- A condition of mental impairment or a developmental disability.
- A learning disability or a dysfunction in one or more of the processes involved in understanding or using symbols or spoken language.
- A mental disorder.
- An injury or disability for which benefits were claimed or received under the insurance plan established under the Workplace Safety and Insurance Act, 1997.

Duty to Accommodate - The obligation of an employer to take steps to eliminate the disadvantage caused by systemic, attitudinal, or physical barriers that unfairly exclude individuals or groups protected under the Ontario Human Rights Code.

Undue Hardship - The point at which an employer is not legally required to accommodate an employee's particular needs, as the action would impose significant strain or risk to the operation of the business. The Ontario Human Rights Commission prescribes three considerations in assessing whether an accommodation could cause undue hardship: cost, outside source of funding, and health and safety considerations. Budgetary restrictions cannot be assumed to be a barrier to accommodation, and therefore cannot be presumed to be the point of undue hardship.

REFERENCES:

[PVNC Catholic District School Board Vision and Strategic Priorities 2017-2020](#)

[Cover Letter for Accommodated work availability](#)

[Non-Teaching Employees Medical Certificate](#)

[OECTA/ OTBU Medical Certificate](#)

[AP 506 - Reporting Absences](#)

[AP 507 - Disability Management](#)