

POLICY COMMITTEE MEETING
AGENDA

Date: Tuesday, November 8, 2016
Time: 7:00 pm
Location: Catholic Education Centre - Board Room
802 Drury Lane
Burlington, Ontario

	Pages
1. Opening Prayer - H. Karabela	
2. Approvals	
2.1 Approval of Agenda	
2.2 Approval of Minutes	1 - 7
3. Action Items	
3.1 Policy I-08 Staff Allocation Elementary; Policy I-17 Secondary Staff Allocation Committee; and Policy I-17(a) Secondary Staff Allocation Committee Factors - T. Overholt	8 - 15
3.2 Policy II-18 Bicycle Safety - T. Overholt	16 - 19
4. Discussion Items	
4.1 Policy I-12 Emergency Response Plans for Fire and Evacuation Procedures - T. Pinelli	20 - 25
5. Information Items	
5.1 Administrative Procedure VI-20 Emergency Response Plans for Fire, Evacuation, LockDown , Bomb Threat - T. Pinelli	26 - 30
5.2 Administrative Procedure VI-81 - Privacy Procedure - T. Overholt	31 - 48
5.3 Administrative Procedure VI-82 Records and Information Management - T. Overholt	49 - 62
5.4 Administrative Procedure VI-83 Video Surveillance Procedure - T. Overholt	63 - 76
5.5 Upcoming Agenda Items - T. Overholt	
5.5.1 Policy IV-03 Playground Equipment	
5.5.2 Policy II-17 Pastoral Reference	
5.5.3 Policy I-23 Catholic School councils and Catholic Parent Involvement Committee	
5.5.4 Policy I-06 Delegations to the Board	
5.5.5 Policy III-04 Employee Assistance Program	

6. Miscellaneous Information
7. Correspondence
8. In Camera
9. New Business
10. Motion to Excuse Absent Committee Members
11. Motion to Adjourn/ Closing Prayer

MINUTES OF THE POLICY COMMITTEE MEETING

Date: October 22, 2016
Time: 7:00 pm
Location: Catholic Education Centre - Board Room
802 Drury Lane
Burlington, Ontario

Members Present: J. M. Rowe A. Danko
A. Iantomasi D. Rabenda – by Teleconference
H. Karabela P. Marai
J. Michael A. Quinn
S. Trites

Staff Present: P. Dawson, Director of Education
L. Frees, Senior Administrator, Human Resources
A. Lofts, Senior Administrator Financial Services, Business Services
R. Negoï, Superintendent Business Services
J. O'Hara, Executive Officer, Human Resources
T. Overholt, Superintendent of Education
F. Thibeault, Administrator, Planning Services, Planning & Assessment Services
D. Tkalcic, Manager, Purchasing Services
A. Swinden, Administrator, Strategic Communications

Recording Secretary: J. Neuman

1. **CALL TO ORDER**

1.1 **Opening Prayer**

The meeting opened at 7:00 p.m. with a prayer led by A. Iantomasi.

2. **APPROVALS**

2.1 **Agenda**

#P07/16

Moved by: D. Rabenda

Seconded by: J.M. Rowe

THAT, the agenda be approved.

A. Quinn recommended that item 3.6 be addressed after the scheduled trip to Israel. Discussion ensued regarding the motion to amend the agenda, and clarification of the motion.

#P07/16 (amendment)

Moved by: A. Quinn

Seconded by: H. Karabela

THAT, the agenda be amended to defer Item 3.6 to a later meeting.

DEFEATED

The Chair called for a vote. Recommendation **#P07/16 CARRIED**.

2.2 **Approval of Minutes – September 13, 2016**

#P08/16

Moved by: J.M. Rowe

Seconded by: A. Iantomasi

THAT, the minutes of the Policy Committee Meeting held on September 13, 2016 be approved, as submitted.

CARRIED

3. ACTION ITEMS

3.1 Policy III-16 Workplace Harassment (J. O'Hara)

J. O'Hara reviewed the final version of Policy III-16 Workplace Harassment and referenced the two significant changes in keeping with Bill 132 "Sexual Violence and Harassment Action Plan Act (Supporting Survivors and Challenging Sexual Violence and Harassment), 2015", which became Law in September 2016.

#P09/16

Moved by: J.M. Rowe

Seconded by: A. Iantomasi

THAT, the Policy Committee recommends that Policy III-16 Workplace Harassment be forwarded to the October 18, 2016 Regular Board Meeting for approval.

In response to questions, J. O'Hara clarified the requirements of the annual review of the policy under the Occupational Health and safety Act. It was noted that the definition of Sexual Harassment has been taken directly from legislation, and that Denominational rights will be protected under the Human Rights Act.

The Chair called for a vote. Recommendation **#P09/16** and it **CARRIED**.

3.2 Policy III-17 Attendance Support Program Second and Third Reading (J. O'Hara)

J. O'Hara noted that Policy III-17 had been presented previously to the Policy committee and forwarded to stakeholders for input. It was also noted that stakeholder feedback is included in the report. An explanation was given regarding the OECTA Elementary feedback. Feedback from the Secondary President was provided but not submitted through the stakeholder response venue.

#P10/16

Moved by: A. Quinn

Seconded by: A. Iantomasi

THAT, the Policy Committee recommends that Policy III-17 Attendance Support Program be forwarded to the October 18, 2016 Regular Board Meeting for approval.

Regarding a question determining the supervisor's role in assessing medical situations, J. O'Hara noted that the normal course of management is to ensure people are recording absences properly and to address staffing concerns as part of normal conversation that should be happening.

A. Danko indicated that he was opposed to the policy as written and that it should include more wording from the operational procedure.

Discussion ensued regarding clarification of the stakeholder feedback. It was noted that the policy is not in violation of the collective agreement.

Questions were raised regarding the OECTA incentive program. J. O'Hara responded that an opportunity was offered during central bargaining to bank some sick days, in order to curb some of the increase of absenteeism. It was noted that data has indicated that there is not much improvement in staff absences; only a slight positive change has been noted in the Secondary panel and no improvement in the Elementary panel.

A. Danko provided clarification in terms of the wording that he would like incorporated to the policy.

The Chair called for a vote. Recommendation **#P10/16 CARRIED**.

3.3 Policy I-31 Apparel Purchases and Fair Labour Practices (D. Tkalcic)

D. Tkalcic reviewed the modifications made to Policy I-31 Apparel Purchases and Fair Labour Practices as a follow-up to the Policy as discussed at the June Policy Committee Meeting.

#P11/16**Moved by: S. Trites****Seconded by: J. Michael**

THAT, the Policy Committee recommends that Policy I-31 Apparel Purchases and Fair Labour Practices be forwarded to the October 18, 2016 Regular Board Meeting for approval.

A. Quinn objected to the Policy as it dictates to parents how they must spend their money regarding uniform purchases. He presented the following amendment.

#P11/16 (amendment)**Moved by: A. Quinn****Seconded by: H. Karabela**

That the wording “using tax payer money” be added to the Application and Scope section of Policy I-31 Apparel Purchases and Fair Labour Practices.

DEFEATED

Discussion ensued regarding clarification of the request to amend. A. Quinn noted that because school uniforms are not a Board purchase, or a school generated funds purchase, it is not the duty of the Board to dictate to parents how to spend their money. Clarification regarding vendors being in compliance with the School Board’s standards was given. R. Negoï noted that the revisions already included in the Policy addressed concerns raised by A. Quinn.

It was noted that unlike elementary schools, secondary schools do not have a choice regarding students wearing uniforms.

The Chair called for a vote on recommendation **#P11/16**. A. Quinn requested a recorded vote.

In Favour	Opposed
A. Danko	H. Karabela
A. Iantomasi	A. Quinn
J. Michael	
D. Rabenda	
M. Rowe	
S. Trites	

Recommendation **#P11/16 CARRIED**.

3.4 **Policy I-01 Catholic School Support (R. Negoï)**

R. Negoï presented revisions to Policy I-01 Catholic School Support, in order to better align with current practices. She noted that a full review of the Administrative Procedure will be completed and revisions will be brought back as information to the Policy Committee at a future meeting.

#P12/16**Moved by: J. Michael****Seconded by: H. Karabela**

THAT, the Policy Committee recommends that Policy I-01 Catholic School Support be forwarded to the October 18, 2016 Regular Board Meeting for approval.

In response to a question, R. Negoï provided clarification between “attendance” and “support”. She explained that the funding that comes from the province is based on actual student enrollment, while support assists in enrollment forecasts, number of trustees on the Board, etc.

A. Iantomasi acknowledged that the Policy aligns with OCSTA’s information regarding voting for trustees in each municipality.

T. Overholt noted that as families move to new homes, they may not be aware that they need to ensure that their support is continued to be directed to Catholic Schools. F. Thibeault noted that the direction of school support form is attached to the report and that it is common school practice, as part of the Administrative Procedure, to forward this form to parents at registration or if they are notified of a change of address.

A. Iantomasi asked if the information is consistently made available on the public website, and suggested that the information be forwarded to the local parishes to request regular publication in their bulletins.

It was noted that the information is only available on the website at election time, but will be moved to a more prominent place, perhaps the enrollment tab, so that it is always accessible.

Final revisions, based on the discussion will be brought to the Board meeting for approval.

The Chair called for a vote. Recommendation **#P12/16 CARRIED.**

3.5 **Policy V-07 Cash Donations Requests to a School or to the Board (R. Negoï)**

R. Negoï provided changes to Policy V-07 Cash Donations Requests to a School or to the Board and indicated that the policy relates to donations that require a separate bank account or a trust fund, that are spent in a pre-determined way. It was noted that minor changes have been made.

#P13/16

Moved by: M. Rowe

Seconded by: A. Iantomasi

THAT, the Policy Committee recommends that Policy V-07 Cash Donations Requests to a School or to the Board be forwarded to the October 18, 2016 Regular Board Meeting for approval.

Discussion ensued and questions regarding a philanthropic policy were asked and answered.

R. Negoï indicated that a Donation button is available on the website; however, any monies that are donated through the website are generally allocated for school fundraising use, as chosen by the donor, generally as a holding account for transfer of funds to the designated donation.

The Chair called for a vote. Recommendation **#P13/16 CARRIED.**

3.6 **Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees**

P. Marai indicated that this item was brought forward following discussion of Trustee Travel and Expenses at the last Board meeting

#P14/16

Moved by: A. Danko

Seconded by: J. Michael

THAT, the Policy Committee recommends that Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees be forwarded to the October 18, 2016 Regular Board Meeting for approval.

A. Quinn read a letter from the CEO of the Simon Wiesenthal Centre, Toronto; and indicated that the purpose of this discussion should be about all trustee expenses.

A. Iantomasi indicated that she spoke with the president of OCSTA and cautioned that rather than rule out all international travel, it may be wiser to consider reviewing each request on a case by case basis which would allow a 30 to 60 day information, action, approval process.

Discussion ensued regarding trustees invitations to events within the GTA and expenses that occur as a result; the benefit of international travel to the Board; proper use of funds and the review of all expenses.

The following amendment to the Policy was presented:

#P14/16 (amendment)

Moved by: A. Quinn

Seconded by: H. Karabela

THAT, Items 11 and 12 in Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees, be amended to change the maximum expense amount from \$3000.00 to \$300.00.

DEFEATED

The following amendment to the Policy was presented:

#P14/16 (amendment)

Moved by: J.M. Rowe

Seconded by: A. Danko

THAT, Item 12 in Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees be amended to say "Expenses for any travel outside of Canada and the United States will not be reimbursed."

CARRIED

The following amendment to the Policy was presented:

#P14/16 (amendment)

Moved by: A. Quinn

Seconded by: H. Karabela

THAT, that item 12 in Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees, be amended to include "a report brought back to the board for an action item and approval".

DEFEATED

A. Quinn noted that all events and conferences attended should include reports and accounting of expenses in order to broaden accountability to all expenses not just travel.

Discussion followed regarding Trustee attendance at events.

The following amendment to the Policy was presented:

#P14/16 (amendment)

Moved by: A. Quinn

Seconded by: H. Karabela

THAT, Item 14 in Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees, be amended and that Item 12, point 2, be amended to include "all costs must be pre-approved".

DEFEATED

The following amendment to the Policy was presented:

#P14/16 (amendment)

Moved by: H. Karabela

Seconded by: A. Quinn

THAT, Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees, be amended to include "Trustees attending educational seminars/conferences briefly report highlights as an information item at a board meeting, for which the trustee has used their expense account for".

DEFEATED

It was noted that trustee reporting is already covered in the Policy and doesn't require this amendment.

#P14/16**Moved by:** A. Danko**Seconded by:** J. Michael

THAT, the Policy Committee recommends that Policy I-34(b) Reimbursement of Board Business Expenses for Trustees and External Members of Board Committees, **as amended**, be forwarded to the October 18, 2016 Regular Board Meeting for approval.

A. Quinn requested a recorded vote:

In Favour	Opposed
A. Danko	H. Karabela
A. Iantomasi	A. Quinn
J. Michael	
D. Rabenda	
M. Rowe	
S. Trites	

Recommendation **#P14/16 CARRIED** as amended.

It was noted that Trustee expenses are posted on the Public website in November/December.

D. Rabenda excused herself from the meeting at 8:30 p.m.

4. **DISCUSSION ITEMS**

There were no discussion items.

5. **INFORMATION ITEMS**

5.1 **Administrative Procedure VI-05 Secondary School Cafeteria Commissions**

5.2 **Administrative Procedure VI-06 Charitable Receipts**

5.3 **Administrative Procedure VI-16 Student Retreat Funds**

Staff responded to questions regarding the student retreat funds.

5.4 **Administrative Procedure VI-26 Cheque Requisitions**

5.5 **Administrative Procedure VI-31 Trust Funds**

5.6 **Policy Review Schedule - Three Year Cycle**

T. Overholt acknowledged that the Policy Review Schedule has been finalized.

6. **MISCELLANEOUS INFORMATION**

There was no miscellaneous information.

7. **CORRESPONDENCE**

There was no correspondence.

8. **IN CAMERA**

There was no in-camera session.

9. **NEW BUSINESS**

There was no new business.

10. **MOTION TO EXCUSE COMMITTEE MEMBERS**

There were no trustees absent.

11. **MOTION TO ADJOURN**

#P15/16

Moved by: J. Michael

Seconded by J.M. Rowe

THAT, the meeting adjourn.

CARRIED

The meeting closed with a prayer led by P. Marai at 8:40 p.m.

ACTION REPORT

ITEM 3.1

POLICIES I-08 STAFF ALLOCATION ELEMENTARY, I-17 SECONDARY STAFF ALLOCATION COMMITTEE, AND I-17 (A) SECONDARY STAFF ALLOCATION COMMITTEE FACTORS

PURPOSE:

To rescind policies, *I-08 Staff Allocation Elementary, I-17 Secondary Staff Allocation Committee, and I-17 (a) Secondary Staff Allocation Committee Factors* based on the current Ministry Regulations that govern staffing at School Boards in Ontario.

COMMENTS:

The following policies originated back in 1981 and 1991 to address board staffing ratios based on the board's financial ability and availability of acceptable staff and classrooms. The determination of class sizes is now determined through Regulation 132/12 of the Education Act that stipulates the average class sizes for Kindergarten classes, maximum classes sizes for Primary (Grade 1, 2 and 3), average class sizes for grade 4 – 8, as well as average class sizes for secondary school.

With class sizes being mandated through regulation along with a collaborative, internal operational process that has existed between both the Elementary and Secondary OECTA units and the Senior Administration and committee from the board here at Halton Catholic District School, and with the new Central Terms and Conditions of both the Elementary and Secondary Teachers unions having a specific clause about Board Level Joint Staffing Committee; the current policies are both no longer relevant nor required.

It is recommended that *policies I-08 Staff Allocation Elementary, I-17 Secondary Staff Allocation Committee, and I-17 (a) Secondary Staff Allocation Committee Factors* be rescinded.

RECOMMENDATION:

Moved by:
Seconded by:

RESOLVED, that the Policy Committee recommends that *Policies I-08 Staff Allocation Elementary, I-17 Secondary Staff Allocation Committee, and I-17 (a) Secondary Staff Allocation Committee Factors* be forwarded to the November 15, 2016 Regular Meeting of the Board to be rescinded.

REPORT PREPARED BY:

T. OVERHOLT
SUPERINTENDENT OF EDUCATION

REPORT SUBMITTED BY:

P. DAWSON
DIRECTOR OF EDUCATION AND SECRETARY OF THE BOARD

Policies I-08 Staff Allocation Elementary, I-17 Secondary Staff Allocation Committee, I-17 (a) Secondary Staff Allocation Committee Factors

PURPOSE

Subject to the Board's financial ability and availability of acceptable staff and classrooms as determined by the Board, the Board shall maintain its staffing ratios system-wide in accordance with Policy I-8 inclusive of the School Staff Allocation Factors identified in Policy Addendum, I-8 (a).

APPLICATION AND SCOPE**STAFF ALLOCATION COMMITTEE:**

Subject to the conditions specified within this policy, a Staff Allocation Committee shall be established not later than January 15th in each year.

TERMS OF REFERENCE:

The Staff Allocation Committee shall submit to the Board, in accordance with the procedures listed below, the following reports:

a) Staff Allocation Report which shall contain:

- suggested staff allocation factors at school sites, and
- an overview of the effect of these factors at each school, and
- suggestions with respect of other staff requirements for the development and/or implementation of programs for grades Junior Kindergarten to eight.

b) Staff Allocation Overview Report which shall contain:

- an outline of the effect at September 30th of the annual determination by the Board of its staffing provisions which must adhere to Ministry of Education staffing ratios.

Note: Special Education staffing requirements will remain the prerogative of the administration and/or the Special Education Advisory Committee and is, therefore, excluded from the terms of reference of the Staff Allocation Committee.

COMMITTEE MEMBERSHIP:

The Staff Allocation Committee shall consist of the following members:

- the Director of Education and/or designate(s)
- two (2) elementary school principals
- one (1) communications consultant
- three (3) classroom teacher representatives selected jointly by the Halton unit of OECTA

REQUIREMENTS

- The Principals shall submit to the appropriate school Superintendent proposed school organization plans for the subsequent school year, not later than January 31st in any given year. Such proposed organization plans shall indicate the anticipated student population in the school, and in each given grade. Principals shall include with their submission, a rationale for their school enrolment projections. The organization plans will be made available to the Staff Allocation Committee.
- The Staff Allocation Committee shall meet as required to prepare the reports.
- The Board shall include in its supply teacher budget allocations, sufficient provision for nine (9) supply teacher days for use by the Staff Allocation Committee.

MINORITY REPORT:

- Provision for receipt by the Board of one or more minority reports is herewith included.

TRANSFER AND REDUNDANCY:

- It is recognized that suggestions made by the Staff Allocation Committee will effect the transfer of staff from one school to another and may result in school site staff redundancies. In either case the appropriate articles of the Collective Agreement shall apply.

BOARD DETERMINATION:

- Upon receipt of the reports indicated above, and/or any additional analysis by the administrative staff, the Board shall make such final decisions with respect to staff allocations, staff allocation factors, program staff and other academic staff requirements as it may from time to time determine.

APPROVED: Regular Meeting of the Board

Authorized by:
Chair of the Board

**STAFF ALLOCATION COMMITTEE
ELEMENTARY**

**Operating Policy: I-8 (a)
Date: November 10, 1981
Amended: September 5, 2006**

1991 STAFF ALLOCATION FACTORS

NOTE: 1

Factors indicated are considered to be divisors. Therefore:

Number of Students = Number of Teachers

NOTE: 2

The total "Basic Classroom" teachers shall be rounded to one place of decimals.

NOTE: 3

The number of teachers shall be rounded to one place of decimals.

NOTE: 4

It is the responsibility of the school Principal, subject to the authority of the appropriate Superintendent, to deploy the allocated staff and to assign duties to teachers in accordance with the program requirements of the system and the organizational needs of the school.

It is understood that actual class size in most schools will differ from the classroom factors because of program and organizational needs. Thus, the staff allocation factors are not equivalent to school site class loading.

APPROVED: Regular Meeting of the Board

DISTRIBUTION: Board Members, Administration, Principals & Staff

Authorized by:
Chair of the Board

STAFF ALLOCATION COMMITTEE SECONDARY

Operating Policy:	I-17
Date:	June 11, 1991
Amended:	July 30, 1991
Amended:	September 5, 2006

PURPOSE

Subject to the Board's financial ability and availability of acceptable staff and classrooms as determined by the Board, the Board shall maintain its staffing ratios system-wide in accordance with Policy I-17 inclusive of the School Staff Allocation Factors identified in Policy Addendum, I-17(a).

APPLICATION AND SCOPE**STAFF ALLOCATION COMMITTEE:**

Subject to the conditions specified within this policy, a Staff Allocation Committee shall be established not later than September 15th in each year.

TERMS OF REFERENCE:

The Staff Allocation Committee shall submit reports to the Board, through the Director of Education based on the following terms of reference

(a) application of negotiated staffing formulae.

NOTES:

- i. The Director may determine and approve variances from the SAC report based on program needs and/or changing enrolment figures. Such variances not to exceed staffing provisions of the contract.
- ii. Special Education staffing requirements will remain the prerogative of the Director or his designate and is therefore excluded from the terms of reference of the SAC.

COMMITTEE MEMBERSHIP:

The Staff Allocation Committee shall consist of the following members:

- the Director of Education and/or designate(s)
- a Superintendent of Education
- two (2) representatives of OECTA (Secondary)
- two (2) representatives of the Principal's Association (Secondary).

PROCEDURES:

- A. The Principal shall prepare reports for the appropriate Superintendent of Education that will include the following data:

STAFF ALLOCATION COMMITTEE SECONDARY**Operating Policy:****I-17****Date:****June 11, 1991****Amended:****July 30, 1991****Amended:****September 5, 2006**

-
- i. List of courses offered during the semester/terms.
 - ii. List of course sections complete with number of students enrolled and teachers assigned to teach the classes.
 - iii. Student enrolment figures as of September 30th and February 28th.
 - iv. Full count of teaching staff expressed in FTE.
 - v. Verification of Superintendent's approval for any class loading using the "10% factor".
 - vi. Supervision Schedule for teaching staff.

PROCEDURES:

B. The Principal shall prepare reports for the appropriate Superintendent of Education that will include the following data:

- vii. List of courses offered during the semester/terms.
- viii. List of course sections complete with number of students enrolled and teachers assigned to teach the classes.
- ix. Student enrolment figures as of September 30th and February 28th.
- x. Full count of teaching staff expressed in FTE.
- xi. Verification of Superintendent's approval for any class loading using the "10% factor".
- xii. Supervision Schedule for teaching staff.

C. Staff will be allocated to specific Secondary schools in accordance with a formula developed in concert with the Collective Agreement and Board policy.

D. The Superintendent(s) after reviewing and approving the individual school reports shall forward a comprehensive system report to the SAC for consideration and recommendation to the Board through the Director of Education.

E. The reports shall be submitted for Board approval no later than October 28th and April 28th of any school year.

MINORITY REPORT:

Provision for receipt by the Board of one or more minority reports is herewith included.

STAFF ALLOCATION COMMITTEE SECONDARY

Operating Policy:	I-17
Date:	June 11, 1991
Amended:	July 30, 1991
Amended:	September 5, 2006

TRANSFER AND REDUNDANCY:

It is recognized that suggestions made by the Staff Allocation Committee will effect the transfer of staff from one school to another and may result in school site staff redundancies. In either case the appropriate articles of the Collective Agreement shall apply.

BOARD DETERMINATION:

Upon receipt of the reports indicate in Procedures above, and/or any additional analysis by the administrative staff, the Board shall make such final decisions with respect to staff allocations, staff allocation factors, program staff and other academic staff requirements as it may from time to time determine.

REVIEW PROCEDURES:

The Board will review its factors identified in policy addendum 1-17(a) as required.

APPROVED: Regular Meeting of the Board

DISTRIBUTION: Board Members, Administration, Principals & Staff

Authorized by:
Chair of the Board

Date: June 11, 1991
Amended: July 30, 1991
Amended: September 5, 2006

APPLICATION AND SCOPE

It is the responsibility of the School Principal, subject to the authority of the appropriate Superintendent, to deploy the allocated staff and to assign duties to teachers in accordance with the program requirements of the system and the organizational needs of the school.

It is understood that actual class size in most schools will differ from the classroom factors because of program and organizational needs. Thus, the staff allocation factors are not equivalent to school site class loading.

APPROVED: Regular Meeting of the Board

DISTRIBUTION: Board Members, Administration, Principals & Staff

Authorized by:
Chair of the Board

ACTION REPORT

ITEM 3.2

POLICY II-18 BICYCLE SAFETY

PURPOSE:

To ensure that student safety is in place for various modes of non-motorized transportation for students.

COMMENTS:

Policy II-18 is a policy that originally dealt with bicycle safety as this was the most common mode of student transportation. With the ever increasing modes of non-motorized transportation available to students, the need to address all types on a school site was required.

The need to work with the home to ensure the safety of our students remains as part of the policy along with the requirement of school administrators to communicate rules and expectations to students and parents.

The policy working committee recommends that the changes to the policy be approved.

RECOMMENDATION:

Moved by:
Seconded by:

RESOLVED, that the Policy Committee recommends that Policy II-18 Bicycle Safety be forwarded to the November 15, 2016 Regular Meeting of the Board for approval.

REPORT PREPARED BY:

T. OVERHOLT
SUPERINTENDENT OF EDUCATION

REPORT SUBMITTED BY:

P. DAWSON
DIRECTOR OF EDUCATION AND SECRETARY OF THE BOARD

NON-MOTORIZED TRANSPORTATION SAFETY**BICYCLE SAFETY ~~Safety~~**

POLICY No.:

II-18

DATE :

August 30, 1983

AMENDED :

July 30, 1991

AMENDED :

June 5, 2007

PURPOSE

To promote an awareness of non-motorized transportation mode safety and to establish rules and expectations for various personalized transportation devices while on school property for all pupils enrolled in the ~~the~~ Halton Catholic District School Board.

~~recognizes that the primary responsibility for the development of pupil safety awareness and for ensuring the suitability of the pupil's bicycle concerning size, maintenance and proper equipment (bell or horn, and reflector or lights) rests with the parents of such pupils.~~

APPLICATION AND SCOPE

~~This policy applies to all schools under the jurisdiction of the Halton Catholic District School Board.~~

REFERENCES

~~The policy is in accordance with provisions of the Education Act, the Safe Schools Act, and specifically Ontario Regulation 298.~~

DEFINITIONS

~~Non-Motorized Transportation Mode – Any mode of transportation that includes walking, bicycling, and variants such as small-wheeled transports (e.g., skates, skateboards, push scooters, hand carts etc.).~~

PRINCIPLES

- ~~• The primary responsibility for the development of pupil safety awareness and for ensuring the suitability of the pupil's non-motorized transportation mode concerning size, maintenance and proper equipment (e.g., bell or horn, and reflector or lights, helmet use etc.) rests with the parents of such pupils.~~
- ~~• The Board further recognizes that prior to allowing their children to use non-motorized ~~ride bicycles~~ transportation modes, ~~a school~~, parents should ensure that their children understand ~~non-motorized transportation mode safety rules, the rules of the road in relation to these transportation modes and, most importantly, that their children are physically capable of operating such transportation modes in a safe manner.~~~~
- ~~•~~
- The schools of the Halton Catholic District School Board partner with parents to ensure the safe use of these non-motorized transportation modes while on school property.

NON-MOTORIZED TRANSPORTATION SAFETY**BICYCLE SAFETY ~~Safety~~**

POLICY No.:	II-18
DATE :	August 30, 1983
AMENDED :	July 30, 1991
AMENDED :	June 5, 2007

REQUIREMENTS

- The Principal shall communicate rules and expectations around the use of non-motorized modes while on school property through a variety of school sources (e.g. website, school newsletter, announcements, assemblies, student agenda, emails, etc).
- The Principal may consider adopting safety programs related to these modes (e.g. Bicycle Safety Awareness Week, Helmet Safety workshops etc.).

REQUIREMENTS

~~The Board further recognizes that prior to allowing their children to ride bicycles to school, parents should ensure~~

~~that their children know Bicycle Safety rules, the rules of the road in relation to bicycles and most importantly, that their children are physically capable of riding a bicycle in a safe manner.~~

BICYCLE SAFETY PROGRAM:

~~The Board, however, supports and encourages the parents in the development of safety awareness of pupils with respect to the operation of bicycles, bicycle equipment and in the rules of the road.~~

~~Accordingly, each principal shall arrange:~~

~~1. during the month of September in each school year:~~

- ~~(a) a communication to parents reminding them of their responsibility to ensure that their children's bicycles are 'road worthy',~~
- ~~(b) that their children are aware of the rules of the road, and that their children's bicycles conform to local municipal by-laws with respect to licensing, operation and equipment prior to allowing their children to ride their bicycles to school,~~

~~2. during the months of April and May in each school year:~~

- ~~(a) a Bicycle Safety program for the school,~~
- ~~(b) the visitation(s) of the Halton Police Safety Officer to supplement the school's Bicycle Safety program,~~
- ~~(c) an appropriate communication to parents to ensure that they are reminded of their responsibilities with respect to safety and road worthiness.~~

NON-MOTORIZED TRANSPORTATION SAFETY~~BICYCLE SAFETY~~ Safety

POLICY No.:	II-18
DATE :	August 30, 1983
AMENDED :	July 30, 1991
AMENDED :	June 5, 2007

APPROVED: Regular Meeting of the Board

AUTHORIZED BY: _____
Chair of the Board

DISCUSSION REPORT

ITEM 4.1

***Policy I-12 Emergency Response Plans -
Fire and Evacuation Procedures***

PURPOSE:

To provide an opportunity for discussion on Policy I-12 Emergency Response Plans for Fire and Evacuation Procedures, to include Lockdown, and Bomb-Threat Response Plans.

COMMENTARY:

The Halton Catholic District School Board is committed in providing a safe and welcoming learning and working environment for all students, staff and visitors. The commitment to safe schools is a shared responsibility of Ministries of government, school board trustees and administrators, principals, teachers, support staff, students, parents, police and community partners.

On September 2015, the Provincial Model for Local Police/School Board Protocol and Ministry of Community Safety and Correctional Services mandated that all Boards and Police Services update their local Protocols. The document has been revised "Halton School Board Protocol 2016: Support Every Child and Reach Every Student" in partnership with the Halton Regional Police, the Halton District School Board and the Halton Catholic District School Board. The revisions reflect the mandatory requirements regarding Lockdown and Bomb Threat Response Plans and all other required updates.

The goal of emergency preparedness is to ensure a rapid, co-ordinated and effective response when an emergency occurs. These response plans do not capture all situations/eventualities however, at the same time recognizes the uniqueness of each school site. It also provides a guideline, for careful planning, staff and students familiarity with the plan and mandated practices in all areas.

In light of these requirements, revisions to Operating Policy I-12 Emergency Response Plans for Fire and Evacuation Procedures should also reflect a name change to include Lockdown, and Bomb-Threat.

Policy I-12 Emergency Response Plans for Fire and Evacuation Procedures has been revised to reflect the Ministry and Local Police/School Board Protocol and is attached for Trustees' consideration

**REPORT PREPARED
& SUBMITTED BY:**

T. PINELLI
SUPERINTENDENT OF EDUCATION

REPORT APPROVED BY:

P. DAWSON
DIRECTOR OF EDUCATION AND SECRETARY OF THE BOARD

**EMERGENCY RESPONSE PLANS FOR-
FIRE, AND EVACUATION, LOCKDOWN, AND BOMB
THREAT RESPONSE****POLICY No.: I-12****DATE :** OCTOBER 29, 1985**AMENDED:** ~~SEPTEMBER 5, 2006~~**AMENDED:** ~~OCTOBER 21, 2014~~**AMENDED:** ~~NOVEMBER 15, 2016~~**PURPOSE**

~~The Ontario Fire Code requires the establishment and implementation of an Emergency Response Plan for every school plant and administration centre(s) to assure effective utilization of life safety features and to protect students and employees from fire.~~

~~The Halton Catholic District School Board endorses this requirement.~~

The purpose of this Operating Policy is to ensure that the Board and its schools are prepared for and can respond efficiently to emergency situations that may arise.

APPLICATION AND SCOPE

This policy applies to all schools under the jurisdiction of the Halton Catholic District School Board.

~~The following safety procedures and items where applicable, shall be included in developing an Emergency Response Plan:~~

- ~~• activating the fire alarm,~~
- ~~• notifying the Fire Department,~~
- ~~• proper access for fire fighting,~~
- ~~• instruction for occupants when alarm sounds,~~
- ~~• assistance for disabled occupants, evacuation chairs~~
- ~~• confining, controlling and extinguishing the fire,~~
- ~~• appointment of supervision staff,~~
- ~~• instruction to supervision staff with respect to responsibilities,~~
- ~~• conducting of fire drills,~~
- ~~• control of fire hazards in the building,~~
- ~~• maintenance of building facilities provided for safety such as fire alarm, sprinkler systems, emergency lighting, standpipe systems, voice communication systems, automatic extinguishing systems, evacuation chairs, kitchen equipment, emergency generators, portable extinguishers, exit lights, fire doors and other such maintenance as required,~~
- ~~• alternate measures to be taken during shut-down of any fire protection equipment,~~
- ~~• schematic diagrams showing the type, location and operation of all building fire systems to be maintained,~~
- ~~• a copy of the fire emergency procedures to be posted in the school office for perusal by supervisory staff,~~
- ~~• arrangements made for emergency shelter and transportation if required.~~
- ~~• provisions for evacuation during extreme cold weather.~~

REFERENCES

- Education Act,
- Halton School Board Protocol 2016: Support Every Child and Reach Every Student

**EMERGENCY RESPONSE PLANS FOR-
FIRE, AND EVACUATION, LOCKDOWN, AND BOMB
THREAT RESPONSE**

POLICY No.: I-12

DATE : OCTOBER 29, 1985

AMENDED: ~~SEPTEMBER 5, 2006~~

AMENDED: ~~OCTOBER 21, 2014~~

AMENDED: ~~NOVEMBER 15, 2016~~

- Fire Code
- Administrative Procedure VI-20 - Emergency Response Plans for Fire, Evacuation, Lockdown and Bomb Threat

DEFINITIONS

Emergency situations refer to and can include:

- fire or other emergencies requiring evacuation;
- bomb threats or other serious threats of harm;
- emergencies requiring school lockdowns;
- municipal level emergencies;

PRINCIPLES

Staff, students, and members of the school community have the right to learn, work and be present in a safe and secure school environment. However, incidents may arise within the school environment that put that safety at risk.

In order to provide for the health and safety of its students and staff, the Halton Catholic District School Board (Board) has established emergency response plans and procedures designed to address emergency situations.

REQUIREMENTS

This policy shall be considered to be pursuant to the Education Act and/or related Ministry of Education materials, all of which shall be sufficient for the purposes of implementing the requirements of the Education Act and/or Ministry of Education Policy/Program Memoranda (PPM) or the Police-School Board Protocol; and authorizes the creation of Administrative Procedures for implementation, which might include requirements described in the Education Act and/or Ministry of Education materials such as PPMs or the Provincial Model for Local Police-School Board Protocol 2015 as matters of policy.

As per Administrative Procedure VI-20 – Emergency Response Plans and the Halton School Board Protocol 2016: Support Every Child and Reach Every Student.

1. All schools shall develop and implement individual school emergency response plans in accordance with Administrative Procedure VI-20– Emergency Response Plans and the Halton School Board Protocol 2016: Support Every Child and Reach Every Student.

**EMERGENCY RESPONSE PLANS ~~FOR-~~
FIRE, ~~AND~~ EVACUATION, ~~LOCKDOWN~~, AND ~~BOMB~~
~~THREAT RESPONSE~~**

POLICY No.: I-12

DATE : OCTOBER 29, 1985

AMENDED: ~~SEPTEMBER 5, 2006~~

AMENDED: ~~OCTOBER 21, 2014~~

AMENDED: ~~NOVEMBER 15, 2016~~

2. Individual school emergency response plans and procedures shall be included in each school's Emergency and Crisis Response Plan, and relevant portions must be appended to the Halton School Board Protocol 2016: Support Every Child and Reach Every Student..

3. Individual school emergency response plans shall

- a. include expectations with respect to staff, students, parents and police, emergency medical services (EMS) and/or the fire department, as appropriate;
- b. address issues such as accessibility and communications for students with special education needs; and
- c. outline training opportunities to inform school staff, students and other community partners of their obligations/responsibilities within the individual school emergency response plans.

FIRE DRILLS:

~~The Principal shall be responsible for conducting annual routine fire and evacuation drills. Evacuation fire drills shall be held a minimum of three (3) times in each of the Fall and Spring school terms. All staff and students shall participate in each fire and evacuation drill.~~

~~Such drills shall be recorded in a log book by the Principal. The log will record date and time required to evacuate the building during each drill practice.~~

LOCK DOWN DRILLS:

~~Lock Down Drills must be held at least twice (2) a year. See Requirements in Board Policy Protocol Handbook.~~

PLAN TO BE FILED:

~~In accordance with the Ontario Fire Code, a copy of the approved Emergency Response Plan for each school shall be filed in the Principal's office, the Central Office and with a generic copy available.~~

DUTIES OF THE SCHOOL PRINCIPAL:

~~The Principal shall be responsible for drafting the School Emergency Response Plan in the required standard format and shall submit it to the appropriate School Superintendent for approval. Following Plan approval, the Plan will be posted and reviewed annually with all school personnel. The Principal shall designate and train sufficient staff members to act in the absence of the Principal.~~

~~The Principal shall be responsible for ensuring that after-hours groups are familiar with the School Emergency Response Plan.~~

**EMERGENCY RESPONSE PLANS ~~FOR-~~
FIRE, ~~AND~~ EVACUATION, ~~LOCKDOWN~~, AND ~~BOMB~~
~~THREAT RESPONSE~~**

POLICY No.: I-12

DATE : OCTOBER 29, 1985

AMENDED: ~~SEPTEMBER 5, 2006~~

AMENDED: ~~OCTOBER 21, 2014~~

AMENDED: ~~NOVEMBER 15, 2016~~

~~The Principal shall prepare and shall post on each floor or area a schedule of primary and secondary exits for use by the occupants in case of need for evacuation.~~

~~DUTIES OF THE SUPERINTENDENT OF SCHOOLS:~~

~~Each School Emergency Response Plan shall be submitted in standard format by the Principal to the appropriate Superintendent for approval. Such approval shall be in accordance with local Fire Department requirements. Plans shall be updated as required. Changes to the Emergency Response Plans shall be approved by the appropriate Superintendent and shall be in accordance with local Fire Department requirements and/or Board directives.~~

~~DUTIES OF THE SCHOOL CUSTODIAN:~~

~~Regular checks, tests and inspections of equipment and system facilities shall be conducted as directed by the Superintendent of Facilities Management and as specified in the Emergency Response Plan.~~

~~Such system and equipment inspections shall include:~~

- ~~• portable fire extinguishers,~~
- ~~• fire alarm and voice communication systems,~~
- ~~• standpipe and hose systems where applicable,~~
- ~~• water supplies for fire fighting where applicable,~~
- ~~• emergency lighting systems,~~
- ~~• exit routes from the building, and~~
- ~~• fire department access to school grounds.~~

~~The results of these inspections shall be recorded by the school custodian in a manner designated by the Superintendent of Facilities Management. The Custodial Supervisor shall assure that such checks, tests and inspections are completed on schedule and that records are retained for a period of two (2) years.~~

~~DUTIES OF THE MAINTENANCE SUPERVISOR:~~

~~Checks, inspections and tests of systems not the responsibility of the Maintenance Supervisor shall assure that the following tests and checks are completed on schedule and that records are reviewed annually and are retained for a period of two (2) years:~~

- ~~• service equipment, ducting, chimneys,~~
- ~~• commercial cooking equipment and automatic extinguishing equipment and hoods, and~~
- ~~• yearly fire alarm and emergency lighting inspections.~~

~~PERMANENT LOG AND SYSTEM SERVICE:~~

~~A permanent log of the maintenance work shall be kept by the Maintenance Supervisor in accordance with the Manual of Operation and Maintenance Instructions and such log shall include:~~

- ~~• description and date of work carried out,~~

OPERATING POLICY**HALTON CATHOLIC DISTRICT SCHOOL BOARD****EMERGENCY RESPONSE PLANS ~~FOR-~~
FIRE, ~~AND~~ EVACUATION, ~~LOCKDOWN~~, AND ~~BOMB~~
~~THREAT RESPONSE~~****POLICY No.: I-12****DATE :** OCTOBER 29, 1985**AMENDED:** ~~SEPTEMBER 5, 2006~~**AMENDED:** ~~OCTOBER 21, 2014~~**AMENDED:** ~~NOVEMBER 15, 2016~~

- ~~the name of person performing such work,~~
- ~~note of parts repaired/replaced,~~
- ~~a note of any unsatisfactory conditions and steps taken to correct them, and~~
- a note verifying that any equipment/controls deactivated for repairs have been restored

~~All malfunctioning systems shall be serviced immediately.~~

~~DUTIES OF ALL SCHOOL PERSONNEL:~~

~~Each school staff member, academic and non-academic, shall be familiar with the Emergency Response Plan for the school in which the staff member is located and shall fully understand his/her role in the event of an emergency.~~

~~REPORTING FIRE:~~**~~ALL FIRES SHALL BE REPORTED TO THE FIRE DEPARTMENT, THE APPROPRIATE SCHOOL SUPERINTENDENT AND TO THE SUPERINTENDENT OF FACILITIES MANAGEMENT.~~****~~GENERAL ADMINISTRATION:~~**

~~The Director of Education or designate shall be responsible for the development of a Fire Safety Plan for the Central Administration. Such Fire Safety Plan shall include where applicable, the components identified within this policy.~~

APPROVED: Regular Meeting of the Board

AUTHORIZED BY:
Chair of the Board

PURPOSE

The Ontario Fire Code requires the establishment and implementation of an Emergency Response Plan for every school plant and administration centre(s) to assure effective utilization of life safety features and to protect students and employees from fire, lockdown and bomb threat.

The Halton Catholic District School Board endorses this requirement.

APPLICATION AND SCOPE

The following safety procedures and items where applicable, shall be included in developing an Emergency Response Plan:

- activating the fire alarm,
- notifying the Fire Department,
- proper access for fire fighting,
- instruction for occupants when alarm sounds,
- assistance for disabled occupants, evacuation chairs
- confining, controlling and extinguishing the fire,
- appointment of supervision staff,
- instruction to supervision staff with respect to responsibilities,
- conducting of fire drills,
- control of fire hazards in the building,
- maintenance of building facilities provided for safety such as fire alarm, sprinkler systems, emergency lighting, standpipe systems, voice communication systems, automatic extinguishing systems, evacuation chairs, kitchen equipment, emergency generators, portable extinguishers, exit lights, fire doors and other such maintenance as required,
- alternate measures to be taken during shut-down of any fire protection equipment,
- schematic diagrams showing the type, location and operation of all building fire systems to be maintained,
- a copy of the fire emergency procedures to be posted in the school office for perusal by supervisory staff,
- arrangements made for emergency shelter and transportation if required.
- provisions for evacuation during extreme cold weather.

REQUIREMENTS**I. FIRE AND EVACUATION PROCEDURES BOMB THREAT RESPONSE PLAN****FIRE DRILLS:**

The Principal shall be responsible for conducting annual routine fire and evacuation drills. Evacuation fire drills shall be held a minimum of three (3) times in each of the Fall and Spring school terms. All staff and students shall participate in each fire and evacuation drill.

Such drills shall be recorded in a log book by the Principal. The log will record date and time required to evacuate the building during each drill practice.

LOCK-DOWN DRILLS:

~~Lock-Down Drills must be held at least twice (2) a year. See Requirements in Board Policy Protocol Handbook.~~

PLAN TO BE FILED:

In accordance with the Ontario Fire Code, a copy of the approved Emergency Response Plan for each school shall be filed in the Principal's office, the Central Office and with a generic copy available.

DUTIES OF THE SCHOOL PRINCIPAL:

The Principal shall be responsible for drafting the School Emergency Response Plan in the required standard format and shall submit it to the appropriate School Superintendent for approval. Following Plan approval, the Plan will be posted and reviewed annually with all school personnel. The Principal shall designate and train sufficient staff members to act in the absence of the Principal.

The Principal shall be responsible for ensuring that after-hours groups are familiar with the School Emergency Response Plan.

The Principal shall prepare and shall post on each floor or area a schedule of primary and secondary exits for use by the occupants in case of need for evacuation.

DUTIES OF THE SUPERINTENDENT OF SCHOOLS:

Each School Emergency Response Plan shall be submitted in standard format by the Principal to the appropriate Superintendent for approval. Such approval shall be in accordance with local Fire Department requirements. Plans shall be updated as required. Changes to the Emergency Response Plans shall be approved by the appropriate Superintendent and shall be in accordance with local Fire Department requirements and/or Board directives.

DUTIES OF THE SCHOOL CUSTODIAN:

Regular checks, tests and inspections of equipment and system facilities shall be conducted as directed by the Superintendent of Facilities Management and as specified in the Emergency Response Plan.

Such system and equipment inspections shall include:

- portable fire extinguishers,
- fire alarm and voice communication systems,
- standpipe and hose systems where applicable,
- water supplies for fire fighting where applicable,
- emergency lighting systems,
- exit routes from the building, and
- fire department access to school grounds.

The results of these inspections shall be recorded by the school custodian in a manner designated by the Superintendent of Facilities Management. The Custodial Supervisor shall assure that such checks, tests and inspections are completed on schedule and that records are retained for a period of two (2) years.

DUTIES OF THE MAINTENANCE SUPERVISOR:

APPROVED OCTOBER 31, 2016

PAGE 2 OF 5

Checks, inspections and tests of systems not the responsibility of the Maintenance Supervisor shall assure that the following tests and checks are completed on schedule and that records are reviewed annually and are retained for a period of two (2) years:

- service equipment, ducting, chimneys,
- commercial cooking equipment and automatic extinguishing equipment and hoods, and
- yearly fire alarm and emergency lighting inspections.

PERMANENT LOG AND SYSTEM SERVICE:

A permanent log of the maintenance work shall be kept by the Maintenance Supervisor in accordance with the Manual of Operation and Maintenance Instructions and such log shall include:

- description and date of work carried out,
- the name of person performing such work,
- note of parts repaired/replaced,
- a note of any unsatisfactory conditions and steps taken to correct them, and
- a note verifying that any equipment/controls de-activated for repairs have been restored

All malfunctioning systems shall be serviced immediately.

DUTIES OF ALL SCHOOL PERSONNEL:

Each school staff member, academic and non-academic, shall be familiar with the Emergency Response Plan for the school in which the staff member is located and shall fully understand his/her role in the event of an emergency.

REPORTING FIRE:

ALL FIRES SHALL BE REPORTED TO THE FIRE DEPARTMENT, THE APPROPRIATE SCHOOL SUPERINTENDENT AND TO THE SUPERINTENDENT OF FACILITIES MANAGEMENT.

GENERAL ADMINISTRATION:

The Director of Education or designate shall be responsible for the development of a Fire Safety Plan for the Central Administration. Such Fire Safety Plan shall include where applicable, the components identified within this policy.

II. LOCK DOWN PROCEDURES:

1. Each school principal shall be responsible for developing and maintaining an emergency response plan to deal emergency situations that require a school lockdown.
2. Every school must conduct a minimum of two (2) lockdown practice drills each school year and a record of such drills shall be maintained.
3. All schools will develop school specific Lockdown procedures as part of their Safe Schools planning process and be guided by Appendix D of the Police Protocol for appropriate name, the School Board Protocol 2016: Support Every Child and Reach Every Student. Such procedures will take into account:
 - lockdown/hold and secure terminology;

ADMINISTRATIVE PROCEDURE

HALTON CATHOLIC DISTRICT SCHOOL BOARD

EMERGENCY RESPONSE PLANS FOR

FIRE, EVACUATION, LOCKDOWN AND BOMB THREAT

Administrative Procedure No.:

VI-20

Date:

October 31, 2016

Amended:

- site-specific special needs such as mechanisms to communicate messages to those who may not adequately hear verbal communications and those who may not be readily mobile without assistance.
- school preparations for lockdown procedures;
- roles and responsibilities for staff, students, police, parents/guardians;
- procedures for initiating a lockdown;
- procedures when a lockdown/Hold and Secure is initiated;
- procedures for evacuation and end of a lockdown; and
- training for staff and students and other community partners on the lockdown procedures.

PLAN TO BE FILED

4. Each school's lockdown plans and procedures shall be included in the school's Emergency and Crisis Response Plan, which must be appended to the ~~Police Protocol~~ for appropriate name School Board Protocol 2016: Support Every Child and Reach Every Student.
5. Each school plan, as well as the Board plan, shall be thoroughly reviewed annually.

III. BOMB THREAT RESPONSE PROCEDURES

1. All schools of the Board must establish a bomb threat response plan in accordance with ~~Police Protocol~~ the School Board Protocol 20416: Support Every Child and Reach Every Student.
2. Every school's individual bomb threat response plan, procedures and related Checklists shall be in accordance with Appendix E of the Police Protocol.
3. An individual school bomb threat response plan shall include information on:
 - roles and responsibilities of staff, students, parents/guardians, police, EMS and/or Fire Department;
 - receiving information on a bomb threat/ intake procedures;
 - contacting police, EMS and/or Fire Department;
 - search procedures;
 - evacuation and re-entry procedures;
 - reporting procedures; and
 - Training for staff, students and other community partners with respect to their respective obligation/responsibilities within individual school plans.

PLAN TO BE FILED

4. Each school's bomb threat response plans and procedures shall be included in the school's Emergency and Crisis Response Plan, which must be appended to the ~~Police Protocol~~ for appropriate name School Board Protocol 2016: Support Every Child and Reach Every Student.
5. Each school plan, as well as the Board plan, shall be thoroughly reviewed annually.

APPROVED: _____ Regular Meeting of the Board

AUTHORIZED BY: _____
Chair of the Board

ADMINISTRATIVE PROCEDURE

HALTON CATHOLIC DISTRICT SCHOOL BOARD

EMERGENCY RESPONSE PLANS FOR

Administrative Procedure No.:

VI-20

FIRE, EVACUATION, LOCKDOWN AND BOMB THREAT

Date:

October 31, 2016

Amended:

PURPOSE

The purpose of this procedure is to establish the roles, responsibilities and operational requirements for the protection of personal information and personal health information collected, used, disclosed and disposed of the Halton Catholic District School Board, here after known as the Board.

It is also to ensure compliance with the requirements of the *Education Act*, the *Municipal Freedom of Information and Protection of Privacy Act*, and the *Personal Health Information Protection Act* by implementing practices that will facilitate open access to public records while protecting the privacy of personal and confidential information.

SCOPE AND OBJECTIVE

This procedure applies to all Halton Catholic District School Board staff who collect, use, retain, and disclose personal information related to students and Board employees, and to operations and procedures in all facilities within the Halton Catholic District School Board.

PRINCIPLES

1. The Board is committed to the protection of privacy and recognizes that all employees are responsible for the protection of personal, confidential and sensitive information entrusted to them.
2. All records, regardless of their physical form or characteristics are the property of the Board and subject to its control:
3. The public has a right of access to information of a publicly funded institution.
4. The Board recognizes its responsibility to raise awareness on matter of public trust and confidence with respect to privacy.
5. The Board acknowledges that a privacy culture needs to be embedded into daily practices to support the needs and expectations of parents, students, and staff with respect to information security and the protection of personal information.
6. The Board recognizes the importance of establishing a protocol to respond when there has been a potential breach of privacy.
7. An individual has the right to personal privacy with respect to records in the custody and/or control of the Board.
8. Personal information may only be obtained as authorized under the Act and used for the specific purpose for which it was gathered. The management and safekeeping of such information is the responsibility of each designated employee. Confidentiality must be protected by each employee who is authorized to have access to the information for the purpose for which it was collected including but not limited to personal program management, the provision of personnel services and administrative services to the files.
9. Access to an individual's personal information can be gained during normal business hours, upon appointment.

10. Copies of any personal information will only be provided to the individual or his/her agent with the specific written consent of the individual. A record of all such transactions must be kept in the file where the information resides.
11. Any specific personal or sensitive information on private individuals or employees shall be provided to the members of the Board **only** through the Director of Education, if required as part of the Trustees' decision making function. Any information provided shall be supplied in accordance with the specified Act.
12. Any personal information of a private individual or employee that is no longer required for either administrative, financial, legal or historical purposes and its retention is not regulated by any statute, may be destroyed in a confidential manner.

REQUIREMENTS

COLLECTION OF PERSONAL INFORMATION

MFIPPA and PHIPA govern the circumstances under which personal information and personal health information may be collected by the Board. The Board has adopted the following practices to standardize how it collects personal information and personal health information:

1. Personal information and personal health information collected by the Board shall be done in accordance with the provisions of the *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA) and the *Personal Health Information Protection Act* (PHIPA) as well as any other applicable privacy legislation, and Ministry guidelines.
2. Personal information and personal health information collected by Board staff shall be limited to only that information which is required in order to administer programs and services of the Board.
3. In addition to the above requirements and subject to certain exceptions stipulated under MFIPPA and PHIPA, the Board, when collecting personal information and personal health information should:
 - a. Whenever possible, collect personal information directly from the individual to whom it relates. If using an indirect or alternative manner of collection, staff must adhere to the specific provisions stipulated in MFIPPA and PHIPA;
 - b. Make every attempt to ensure the accuracy and integrity of personal information and personal health information collected;
 - c. Obtain, prior to collection, the necessary consents as prescribed by the relevant legislation;
 - d. Inform individual(s) of the legal authority by which the information is being collected which may include citing the applicable section(s) of the legislation(s). This information is to be included on all Board forms where personal information is being collected;
 - e. State the principle purpose(s) for which the personal information is to be used; and
 - f. Provide the contact information of the appropriate staff position that will be able to answer questions regarding the collection.
4. A notice of collection may be in writing, orally or other manner which adequately informs the individual about the collection.

USE AND PROTECTION OF PERSONAL INFORMATION AND PERSONAL HEALTH INFORMATION

Use of Information

The Board is committed to protecting the privacy of individuals and any personal information and/or personal health information which is collected and used by the Board.

Pursuant to MFIPPA and PHIPA, personal information collected by the Board will be used for the purpose or activity for which it was originally collected or for a “consistent purpose”. The use of personal information and/or personal health information for any other purpose shall only be permitted with the consent of the individual to whom the information relates, or in accordance with the provisions of MFIPPA and PHIPA as they relate to use of personal information.

Consent

The Board will seek consent, if required, for the use or disclosure of personal information and/or personal health information at the time of collection.

1. In certain circumstances, consent with respect to the use or disclosure will be sought after the information has been collected but before use;
 - a. For example, when the Board wants to use information for a purpose not previously identified and not consistent with the purpose the information was originally collected.
2. The Board collects personal information for reasonable purposes and will not require an individual to consent to the collection, use, or disclosure of personal information and/or personal health information beyond what is necessary for the Board to carry out its mandate, duties and obligations;
3. Individuals can give consent in many ways, but the type or form of consent is dependent upon the circumstances; for example:
 - a. Explicit, Written Consent, where a form is used to seek consent, inform the individual of the use that will be made of the information, and collected the information to be used. By completing and signing the form, the individual is giving consent to the collection and the specified uses.
 - b. Implicit Consent will be used to allow individuals to request that their names and addresses not be given to organizations. Individuals who do not check the box are assumed to consent to the transfer of this information to third party service providers.
 - c. Oral Consent in limited circumstances, consent will be accepted orally when information is collected over the telephone and is:
 - i. Subject to legal or contractual restrictions and reasonable notice, an individual may withdraw consent at any time
 - d. The Board will inform the individual of the implications of such a withdrawal;
 - e. If an individual withdraws his/her consent the Board will stop collecting, using, disclosing or retaining information upon receipt of the withdrawal of consent, or abiding by the directions of the individual in the case of variation of consent.

- f. The Board will collect, use, disclose or retain personal information about an individual without consent of that individual as provided in MFIPPA.

Protection of Information

To protect the personal information and the personal health information within the custody and/or control of the Board the following standards shall apply:

1. Access to personal information and personal health information shall be restricted to only those employees requiring access in order to carry out their duties;
2. Personal information and personal health information shall not be disclosed to member of the public, the Board, Trustees, or other staff without the consent of the individual to whom the information relates, or in accordance with legislation;
3. Personal information and personal health information should not be discussed in public areas where it may be overheard by others who are not otherwise authorized to have such information;
4. Personal information and personal health information should not be left exposed or visible on desks or on computer screens. Staff should lock computer screens and put physical records containing personal information and/or personal health information away in a secure location when it is not in use;
5. Records and files containing personal information and/or personal health information should not be removed from Board worksites, unless required to complete duties and responsibilities of the position, for example, the marking of tests;
6. If documents are opened or reviewed in public places, the personal information and/or personal health information contained in the records should be protected;
7. System, software and email passwords allowing access to personal information and/or personal health information should not be shared or disclosed to others;
8. Confidentiality and privacy statements are to be included on all email and fax transmissions;
9. Cabinets or storage locations containing personal information and/or personal health information should be secured at the end of each day or when not in use.

Limiting Collection

1. The Board will only collect information necessary for the purposes that have been identified;
2. The Board will monitor the implementation of the collection procedures by employees and third party service providers by conducting periodic checks and other measures.

LIMITING USE, RETENTION AND DISCLOSURE

The Board will comply with Privacy legislation that restricts the use of personal information and/or personal health information to the purpose for which it was collected, a consistent purpose, purposes to which the individual consents and other limited circumstance:

1. The Board will only retain records containing personal information in accordance with the Board's Retention Schedule and for the period stated in the appropriate privacy legislation;

2. Disclosure of information means the release of information in a record to those other than employees in the program/service area of the Board's record, except where otherwise limited by the law. MFIPPA permits the disclosure of personal information only under certain circumstances;
3. The Board will make an informed decision considering all relevant circumstances before disclosing the personal information;
 - a. These considerations will include whether the disclosure is in the interest of the individual(s) and whether the disclosure is absolutely necessary for providing for the education of students or administering the employment of Board employees. Consequently, disclosure of personal information is only provided to employees and third party service providers who require this information to perform their duties.
 - b. When the Board receives requests for personal information from the Ministry of Education, other ministries, other Ontario school boards/authorities or private agencies, they will verify the legal authority for the disclosure;
 - c. The Board will monitor the implementation of their procedures limiting use, retention and disclosure by employees and third party service providers by conducting periodic checks and measures.

DISCLOSURE OF INFORMATION

The disclosure of personal information and personal health information shall be administered in accordance with MFIPPA and PHIPA, and any other relevant privacy legislation and/or Ministry guidelines.

Accuracy

1. The Board will not routinely update personal information but only in the context of its use:
 - a. Record correction requests as they are made;
 - b. Identify and transfer misdirected requests in a timely manner; and
 - c. Communicate corrections to affected individuals.
2. When an individual successfully demonstrates the inaccuracy or incompleteness of personal information or personal health information, the Board will amend the information as required.
3. Depending upon the nature of the information challenged, amendment involves the correction, deletion, or addition of information.
 - a. Where appropriate, the amended information will be transmitted to third party service providers having access to the information in question.
4. The Board will monitor the implementation of accurate recording of personal information and personal health information by employees and third party service providers by conducting periodic checks, random checks, and other measures. Any inconsistencies will be addressed.

Security Safeguards

The Board will protect personal information and personal health information regardless of format in which it is held. The security safeguards will protect personal information against loss or theft, as well as unauthorized access, disclosure, copying, use and modification.

1. The Board will limit access to personal information to authorized employees based upon their assigned roles and responsibilities. Users will be authenticated, by user name and password.
2. Methods of protection will include but are not limited to:
 - a. Physical measures;
 - i. locked filing cabinets
 - ii. restricted access to offices
 - iii. sign-in logs
 - iv. limited distribution of reports containing personal information and/or personal health information
 - v. securely disposing of confidential information (shredding)
 - vi. protecting personal information sent by courier or mail
 - b. Organizational measures;
 - i. Security clearances
 - ii. Limiting access to
 - iii. The ability to change personal information in hard copy and in electronic form
 - c. Technology measures;
 - i. Passwords
 - ii. Firewalls
 - iii. Level of encryption
 - iv. Controls are ensured for remote access and when transmitting data/information via the internet
 - v. Restricted access to system configuration
 - vi. Super User functionality
 - vii. Master passwords
 - viii. Other security measures – that may be put in place depending on the technology
 - d. Disaster recovery plans in case of destruction, accidental loss of personal information, for example a natural disaster;
 - e. Measures applicable to the use of personal information off-site;
 - f. Upon resignation from the Board or transfer to another location, all files containing personal information on employees in paper or electronic format will be forwarded to the Human Resources Department, for storage in their personal file;
 - g. All parent personal information provided to a Catholic School Council for purposes of supporting parent engagement will be returned to the principal at the end of the school year and destroyed as per the Board's records retention schedule.

3. The Board will monitor the implementation of security safeguards and privacy risk management by employees and third party service providers by conducting periodic checks and other measures.
4. Identifiable threats to safeguarding personal information and personal health information will be addressed and alternate practices put in place.

Social Media Requirement

1. Any information shared via the Board's social media accounts are subject to the provisions of MFIPPA and PHIPA. This means that social media information may be accessed and disclosed in response to a request under MFIPPA, PHIPA or a legal proceeding.
2. To protect their own privacy and privacy of others, employees should not include personal information in comments or any other content posted within a Social Media account registered to the Board. Personal information includes home addresses and telephone numbers, photographs containing images of identifiable individuals, and any other information consisting of personal information as defined in the Act.

ACCOUNTABILITY

Trustees – General Information

Trustees may have a right of access to certain types of information that would not be available to the general public if they require that information in their capacities as Trustees in order to carry out duties of that function. Trustees seeking access to information that is not ordinarily available to the public should direct their request to the Director of Education. The Director of Education, along with the appropriate Superintendent will review the information to ensure the disclosure of information to the Trustee is in accordance with the legislative requirements.

There may be circumstances in which a Trustee, who is not acting within his/her official capacity as a member of the Board, requests access to information. In this case, the Trustee may submit a formal request under MFIPPA and the Trustee has the same status as any member of the public when requesting this information. Staff will apply MFIPPA in the normal manner to determine where access may be granted.

Trustees – Personal Information

Where a Trustee seeks access to personal information of a third party, (for example, an employee or a constituent), he/she may only obtain the personal information or personal health information if disclosure is specifically authorized under section 32 of MFIPPA:

1. With the consent of the individual;
2. In compelling circumstances affecting the health or safety of an individual;
3. In compassionate circumstances, to facilitate contact with the next of kin or friend of an individual who is injured, ill or deceased; or
4. Where disclosure to the Board as a whole (for example in a Board meeting) or the individual Trustee is required to fulfill a duty as an officer under the *Education Act* or other legislation.

Trustee(s) who have received access to personal information or personal health information in the performance of their duties have a responsibility to protect this information while it is in their possession. Trustee(s) must, therefore, ensure that the privacy of the individual to whom the information relates is protected at all times, and must keep the information physically secure to avoid unauthorized disclosure or destruction.

Trustee(s) Own Records

The provisions of MFIPPA and PHIPA cover records that are in the custody or under the control of the Board. This includes information created by a third party that has been provided to, or obtained by the Board. Trustee(s) records are considered personal records and are not subject to MFIPPA if they are not related to the discharge of the Trustee(s) responsibilities as a member of the Board and they are not in the custody and/or control of the Board.

Director of Education

The Director of Education is accountable for the action taken and decisions made under MFIPPA and PHIPA. The Director of Education will also ensure there is oversight of and compliance with the privacy policy and procedure. The Director of Education may appoint a staff designate who shall, pursuant to applicable legislation be responsible for:

1. Administering and ensuring compliance with respect to the collection, use, disclosure and retention of personal information and personal health information in accordance with MFIPPA and PHIPA;
2. Ensuring that procedures are in place regarding third party service providers who have custody of personal information and personal health information on behalf of the Board whom are held accountable under MFIPPA and PHIPA.

Superintendents, Administrators, Managers and Supervisors

Superintendents, Administrators, Managers and Supervisors shall be responsible for overseeing the collection, use, and routine disclosure of information and records associated within their area of responsibility. This includes:

1. Administer all requests for access to **general non-confidential** information in accordance with MFIPPA and PHIPA;
2. Ensuring all personal information is managed and protected in accordance with the privacy policy and procedure and all applicable privacy legislation and Ministry guidelines;
3. Administer and ensure communication of the privacy policy and procedure to all staff;
4. Ensure programs and services within their service area integrate protection of personal privacy and personal health information privacy requirement into the development, implementation, evaluation and reporting activities;
5. Promote a culture and business practices that ensures Board information is shared and accessible to the greatest extent possible while respecting the security and privacy requirements of personal information and personal health information.

Manager, Privacy, Records and Information Management Services

The Manager, Privacy, Records and Information Management Services will be designated by the Director of Education, as the individual to oversee compliance of MFIPPA and PHIPA legislation.

1. Develop and implement policies, programs and services for the management and protection of personal information and personal health information based on MFIPPA, PHIPA, Ministry Ontario Student Record (OSR) guidelines, Privacy and Information Management (PIM) toolkit, and Privacy by Design (PbD) principles;
2. In partnership with Superintendent, Administrators, Managers and Supervisors of Departments and programs, ensure implementation of this policy and review practices for collecting and managing personal information and personal health information holdings at the Board;
3. Consult with staff to meet privacy requirements as identified in the privacy policy and procedures, applicable legislation, and privacy standards;
4. Ensure proper notice is given and the required level of consent is obtained (as required) prior to the collection of all personal information and personal health information;
5. Coordinate the response to complaints regarding the misuse of personal information and/or personal health information;
6. Investigate reports of privacy breaches
7. Sign-off and execute recommendations of any Privacy Impact Assessment (PIA) report prior to implementation of technology, system, program or service involving the collection or use of personal information or personal health information;
8. Develop guidelines, training material and other tools as required to assist Trustees, the Administrative Team, staff and the public on matters pertaining to the collection, use and disclosure of information;
9. Ensure that legislative updates are incorporated into the Board's collection, use and disclosure processes;
10. Ensure that adequate disposal processes for personal information are in place and adhered to;
11. Be responsible for the receipt, coordination and formulation of responses for all formal access requests received pursuant to MFIPPA and PHIPA in collaboration with all Departments and Program Areas;
 - a. Official requests for access to information will be directed to the FOI Officer, for registration, documentation and receipt acknowledgement;
 - b. A copy of all requests will be directed to the Director of Education or designate for information and to the appropriate supervisory officer for response;
 - c. All responses will be forwarded to the FOI Officer for review, final documentation and dispatch to the requestor;
 - d. Any delay in preparing a response within thirty (30) calendar day limit, as noted in MFIPPA, will be promptly forwarded to the FOI Officer, to ensure appropriate notice is given to the requestor and in accordance with MFIPPA;
 - e. Where permissible request processing fees are estimated to exceed \$25.00, a cost estimate will be sent to the FOI Officer, for the appropriate action.
12. Assist the public with requests for access to information as required.

Senior Administrator Information Technology

The Senior Administrator, Information Technology shall be responsible for:

1. In collaboration with the Manager, Privacy, Records and Information Management Services, implement Privacy by Design principles in Enterprise Architecture, Information Technology policies, standards, procedures and technologies where appropriate;
2. Create personal information privacy and security standards for technologies that will ensure adequate safeguards and compliance for those technologies or technological processes that collect, use, disclose or retain personal information and/or personal health information;
3. Conduct Risk Assessments (such as Privacy Impact Assessments Threat Risk Assessments and Vulnerability Assessments) on technological systems involving the collection or use of personal information or personal health information to implement or deployment.

Staff

Staff shall be responsible to:

1. Understand their responsibilities to protect privacy in executing their operational duties;
2. Ensure responsibility for the privacy of the Halton Catholic District School Board business information regardless of the technology used to manage the information;
3. Be aware of and adhere to their privacy responsibilities noted in the Board's Acceptable Use Policy;
4. Be aware and adhere to their privacy responsibilities noted in the Video Surveillance Policy;
5. Make every reasonable attempt to ensure that all personal information and personal health information collected is accurate, complete and up-to-date;
6. Assist the public with requests for access to information and disclosure of routine records and information (where appropriate) that are within their scope of responsibility;
7. Adhere to the disposal requirements contained in this and other records management policies and procedures of the Board

IMPLEMENTATION**Privacy Protection**

Any concerns or questions regarding the protection of privacy should be referred to the Manager, Privacy, Records and Information Management Services.

Access Requests

Processing of requests for information under MFIPPA and PHIPA shall be administered by the Privacy, Records and Information Management Services, under the direction of the Manager.

As part of the regular process for completing requests under MFIPPA and PHIPA, Privacy, Records and Information Management Services will be contacted and the applicable information requested.

Upon the Director of Education or his/her designate being satisfied that the principles and intent of the legislation have been met, a decision letter shall be issued to the requestor containing the following information:

1. The access decision;
2. If refused, specific provisions of the Act under which the information was refused and the reason;
3. The name and position of the person responsible for the decision; and
4. That the requestor may appeal the decision to the Privacy Commissioner of Ontario (IPC), along with a brief description of the appeal process and the contact information for the Commissioner.

Access and Security

Personal information should, at all times, be protected against unauthorized access, loss, theft, and inadvertent destruction or damage. Security measures should include administrative, technical and physical safeguards.

Records should be stored in a manner that prevents loss through misplacement, deterioration, accidental destruction, theft, and unauthorized or inappropriate access.

Security provisions shall be included in contracts with outside providers of storage and disposal services.

Privacy Breach

A privacy breach occurs when personal information is collected, used, disclosed, retained, or destroyed in a manner inconsistent with MFIPPA, PHIPA, and Board policy. Potential privacy breaches can occur when personal information is lost, stolen, or inadvertently disclosed due to human error, or a system malfunction. Some examples of a privacy breach include:

1. Lost/stolen flash drive containing student or staff information;
2. Unlocked shredding bins,
3. Correspondence being mailed or emailed to the wrong person

A separate Privacy Breach Protocol will be developed for the Board to use, investigate and respond to breach or possible breach of privacy.

Approved: Regular Meeting of the Administrative Council

Authorized By:

Director of Education and Secretary of the Board

PRIVACY BREACH CHECKLIST

Definition of a Privacy Breach

A privacy breach occurs when personal information is compromised, that is, when it is collected, used, disclosed, retained or destroyed in a manner inconsistent with MFIPPA or PHIPA. Personal information can be compromised in many ways. Most privacy breaches are caused by human error, I left my laptop on the train and it wasn't password protected, I have all my records on a memory stick, which I lost, and it wasn't encrypted, I left my paper files on the desk and when I came back some students were looking at them, I sent an email to someone, however, when I responded I selected respond to all, etc. Sometimes a privacy breach can be on a large scale; those financial records were supposed to be shredded but somehow they ended up in the garbage, a computer program that has student information is installed improperly and causes the confidential information to be compromised.

Samples of examples of privacy breaches:

Breach	Student Records	Employee Records	Business Records
Inappropriate disclosure/use of personal information	<p>Two teachers discussing (and identifying) a student in a local grocery store.</p> <p>Student's report card mailed to the wrong address</p> <p>Digital images of individuals taken and displayed without consent.</p> <p>Hard copy psychological assessments kept in openly accessible file cabinets that are not secured or controlled.</p> <p>Confidential student health records inadvertently blown out of a car trunk and scattered over a busy street.</p>	<p>Employee files containing social insurance numbers left in unlocked boxes near the open shipping/receiving area.</p> <p>Budget reports (containing employee numbers and names) found in the recycle bins and garbage bins.</p> <p>Theft from car of a briefcase containing a list of home addresses of teaching staff</p>	<p>A list of names, including credit card numbers, left on the photocopier.</p> <p>Personal information disclosed to Trustees who did not need it to effectively decide on a matter.</p>
Technology/computer error	Lost memory stick containing student data.	Sending very sensitive personal information to	Stolen laptop containing names and addresses

	<p>Theft from teacher's car of a laptop containing Special Education student records on the hard drive.</p>	<p>an unattended, open-area printer.</p> <p>Password written on a sticky note and stuck to a monitor.</p> <p>Resumes faxed or emailed to a wrong destination or person</p>	<p>of permit holders.</p> <p>Tender information scanned and not cleared for multi-functional office machine.</p> <p>Disposal of equipment with memory capabilities (for example memory sticks, CD/DVDs, laptops, photocopiers, or cell phones) without secure destruction of the personal information that may be on them.</p>
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Roles and Responsibilities when Responding to a Privacy Breach

The following personnel may need to be involved when the Board responds to a privacy breach. Some of the following roles may be undertaken concurrently.

Individuals	Roles	Responsibilities
Employees	<p>All Board employees need to be alert to the potential for personal information to be compromised, and therefore potentially play a role in identifying notifying and containing a privacy breach.</p> <p>Employees dealing with student, employee and/or business records need to be particularly aware of how to identify and address a breach.</p>	<p>All Board employees have the responsibility to:</p> <ol style="list-style-type: none"> 1. Notify their supervisor immediately, or in his/her absence their School/Board, SO and the Manager, Privacy, Records and Information Management when they become aware of a breach or suspect a breach has occurred; 2. Contain (if possible) the suspected breach by suspending the process or activities that caused the breach.
Senior Administration, Managers, Principals	<p>Senior administration, managers and principals are responsible for alerting the Manager, Privacy, Records and Information Management of the breach or suspected breach and will work with the Manager to implement the response and reporting of the breach.</p>	<p>Senior Administrators, Managers, and Principals have the responsibility of:</p> <ol style="list-style-type: none"> 1. Obtaining all available information about the nature of the breach (or suspected breach) and determine what happened; 2. Alert the Manager, Privacy, Records and Information Management and provide as much detail as possible

		<p>about the breach;</p> <ol style="list-style-type: none"> 3. Work with the Manager, Privacy, Records and Information Management, to undertake all appropriate actions to contain the breach; 4. Ensure details of the breach and the corrective measures taken are well documented.
Manager, Privacy, Records and Information Management	The Manager, Privacy, Records and Information Management plays a central role in the response to the breach by ensuring that the response protocol and the breach reporting are implemented and documented.	<p>The Manager, Privacy, Records and Information Management will follow:</p> <ol style="list-style-type: none"> 1. Respond 2. Contain 3. Investigate 4. Notify 5. Implement Change
Accountable Decision Maker (Supervisory Officer and/or Director)	The responsibility for protection of personal information affected by a privacy breach is assigned to the identified position who is the accountable decision maker in responded to privacy breaches and therefore need to be familiar with the Board's roles, responsibilities, and the response plan.	<p>The accountable decision maker has the responsibility of:</p> <ol style="list-style-type: none"> 1. Brief Senior Management and Trustees as necessary and appropriate; 2. Review internal investigation reports and approve required remedial action plan; 3. Monitor implementation of remedial action plan; 4. Ensure that those whose personal information has been compromised are informed as required.
Third Party Service Providers	<p>The Board may have third party providers for either manage or deliver some of our programs and services.</p> <p>Third party providers are commercial school photographers, bus companies, external data warehouses, outsourced administrative services for example, Children's Aid Societies (CAS), Public Health Units (PHU), and external researcher and consultants.</p> <p>However, the Board retains the responsibility for protecting the personal information in accordance</p>	<p>Third party providers have the responsible for:</p> <ol style="list-style-type: none"> 1. Inform the Board contact as soon as the privacy breach or suspected breach is discovered; 2. Take all the necessary actions to contain the breach as directed by the Board; 3. Document how the breach was discovered, what corrective actions were taken and report back to the Board; 4. Undertake a full assessment of the breach in accordance with third party contractual obligations;

	<p>with privacy legislation.</p> <p>Third party providers must take reasonable steps to monitor and enforce their compliance with the privacy and security requirements defined in the contracts or service agreements and are required to inform the Board of all actual and suspected privacy breaches.</p>	<p>5. Take all necessary remedial action to decrease the risk of future breaches;</p> <p>6. Fulfill contractual obligations to comply with privacy legislation.</p>
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The following checklist will assist in the initial response to a privacy breach

1. Take immediate action to contain the privacy breach.

Note: Use this information to populate the containment section of the Privacy Breach Report

 - a. Contain the privacy breach (i.e. recover the information, shut down the system, locks changed, access removed)
 - b. Ensure privacy is protected during the containment (NB: don't further breach privacy)
2. Immediately contact the Manager, Privacy, Records and Information Management. If there is a security breach (i.e. theft, unauthorized access) contact IT.
 - a. Be prepared to provide a brief assessment of the breach?
 - i. What personal information do the records contain?
 - ii. To whom do the records relate?
 - iii. What is the format of the records (paper or electronic or both)?
 - iv. How many individuals does the breach affect?
 - v. What is the immediate vulnerability to the affected individuals?
 - vi. What is the immediate vulnerability to the Board?
3. Assess and document the incident.
 - a. What happened? Please provide as much detail as possible.
 - b. Where did it happen?
 - c. When did it happen?
 - d. When and how was it discovered?
 - e. Who or what group of individuals were affected (no names, students, employees, Trustees, etc.)
4. Begin the full assessment. To understand the magnitude of the breach and assess the risk involved.
 - a. What personal information was involved?
 - i. What personal information was involved (name, contact info, financial, medical?)
 - ii. What form was it (paper, electronic, others or a combination of?)
 - iii. What physical or technical security measures were in place (i.e. locks, encryption)?
 - b. What was the cause and extent of the breach?
 - i. Has the breach been contained?
 - ii. Is the threat over or is it continuing?

- iii. How did it happen?
 - iv. How broadly has the personal information been disclosed?
 - c. Who are the parties at risk?
 - i. Whose information is it (students, employees, contractors, trustees, etc?)
 - ii. How many individuals have been affected by the breach?
 - d. What is the foreseeable harm from the breach?
 - i. What harm to the affected individuals could result from the breach (i.e. identity theft, injury to the person, their reputation or financial standing)
 - ii. Do you know who received the information and what is the risk of a further breach or access, use & disclosure?
 - iii. What harm could come to the public as a result of the breach? (i.e. risk to public health or safety?)
 - iv. What harm to the Board could result from the breach (loss of trust, assets, legal proceedings)?
 - v. What harm to other parties could result from the breach (other organizations or third parties)?
 - e. Is there any other investigations related to the breach?
 - i. Security, criminal?
 - 1. If yes please provide details if appropriate
 - ii. At what point is it at?
 - iii. Who is in charge of the investigation?
 - f. What is being done to prevent future privacy breaches?
 - i. To determine what short and long-term steps need to be taken to correct the situation (i.e. staff training, policy review or development, audit)
 - ii. Mitigate the risks identified during the breach assessment.
- 5. Notification (use this information to complete the notification of affected parties in the Report appendix "A")
 - a. In consultation with Manager, Privacy, Records and Information Management notify the following:
 - i. Affected individuals and/or
 - ii. Internal Senior Official(s) and/or
 - iii. External Stakeholder Official, for example OSBIE.
- 6. Notification to the Information and Privacy Commissioner
 - a. The Manager, Privacy, Records and Information Services, in consultation with the Director of Education and the Superintendent responsible for the affected Division will determine if a report to the Information and Privacy Commissioner is required.

Privacy Breach Report

Date of Incident

Name of Organization

Contact information (include contact name, title, facility address and work number/email)

Sector (Board Office/Service Area, School, Other Facility)

Third Party reporting the Breach

Coordinates of other contacts if applicable

Identification of Third Party (include contact name, title, facility address and work number/email)

Details of the Incident:

1. Description of the breach (include the cause, any technological issues involved, location and discovery).
2. Description of the type of personal information involved (name(s) of individuals, contact information, financial, medical, etc.). **Do not include the personal information in your response, stick to the types of information that was breached)
3. If the breach involved the loss or theft of a computer, tablet, USB stick, was it password protected or encrypted and if so, what is the procedure for implementing the protection?
4. How many individuals are affected?
5. What is the status of the individuals affected? Are they student, employees, trustees, others?
6. Do the parties know each other? (Co-workers, ex-spouses?)
7. Does the breach involve paper or electronic records?
8. How broadly has the personal information been disclosed?
9. Has any other organization (such as law enforcement) been notified of the breach? If so, when were they notified?

10. Is there any other investigation related to this breach? (Security, criminal, insurance, other?)
11. Describe the measures taken to contain the breach.
12. Has the information been recovered? If not, please explain the steps you have or will be taking to obtain the records?
13. Have the affected individuals been notified of the breach and of their right to complain to the Information and Privacy Commission of Ontario? (Was it my letter, email, telephone, other?)
14. Describe the measures contemplated or being taken to prevent a recurrence of this incident? Please include details of the training, new policies or procedures, other actions you will be taking?
15. Submit report to the Director of Education, cc appropriate Supervisory Officer.

PURPOSE

Records and Information Management (RIM) is a systematic management of all records created or received at any site operated by the Halton Catholic District School Board (HCDSB), to their final disposition, that being destruction or archival retention.

SCOPE AND OBJECTIVE

Maintaining a Records and Information Management program facilitates:

1. Timely, relevant, and accurate management of information to support the provision of programs and services that best meet students' needs;
2. Informed decision-making and policy development;
3. Effective, efficient, trustworthy program and service delivery;
4. Transparency and accountability;
5. Access to and privacy of information in accordance with legislations and policies;
6. Recording and management of business decisions and transactions that preserve corporate memory; and
7. Access to information for legal purposes.

PRINCIPLES

1. Record keeping practices must comply with the *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA), the *Personal Health Information and Protection Act* (PHIPA), the *Education Act*, the *Ontario Evidence Act*, the *Canada Evidence Act*, and other statutory provisions, as well as the guidelines from the Privacy and Information Management (PIM) toolkit developed by the PIM taskforce, 2008.
2. Information is readily available and accessible for as long as it is required.
3. Accountability for managing information in the custody and control of the organization is clearly defined, communicated and monitored.
4. Risks to information are managed and practices and processes are in place to protect information assets.
5. Records management meets the needs of staff and stakeholders. Records management is timely, accurate, reliable, and relevant, has integrity and is easy to use.
6. Coordinated planning for records management is linked to organizational goals, objectives and financial planning.

7. Records management is integrated with program planning and other business processes.
8. A Records Retention Schedule is the official schedule for the HCDSB. It will outline retention of Board records according to their administrative, fiscal, legal, research and archival value. It will include records that must be retained according to legislation and/or Board procedures and a notation of the archival/historical importance of each record series where appropriate. The Records Retention Schedule will be updated annually.

REQUIREMENTS

The Records and Information Management program applies to all records in the custody and/or control of the HCDSB related to all aspects of Board operations regardless of the medium in which those records are stored and maintained.

All records and information created, received and maintained in the day-to-day business operations of the Board within HCDSB departments and schools support the operations of the Board and as such are the property of the Board regardless of the medium in which those records are stored and/or maintained.

This includes records and information holdings relating:

1. To the operation and administration of the Board and to employees and students individually;
2. To all business applications and information technology systems used to create, store and manage records and information including email, database applications and websites;
3. To all Board staff and third party contractors or agents who collect or receive records and information on behalf of the Board.

This procedure applies to all records and information holdings within the custody or under the control of the Board.

The Board

The HCDSB supports the management of records and information, including electronic and paper records, in a disciplined, coordinated, and strategic manner, and as such, has designated the Director of Education as the official "Head" of the institution as defined in Section 3 (2) of the *Municipal Freedom of Information and Protection of Privacy Act*, (MFIPPA), 1989. The Board further delegates the responsibility of the general administration of the Act and operational decision to the Director of Education.

Director of Education and Supervisory Officers

The Director of Education and the Supervisory Officers are assigned the highest level of responsibility for ensuring a successful records management program. This support is translated into the allocation of resources at a lower level. They promote compliance with records and information management procedures throughout the organization.

The Director of Education and Supervisory Officers are responsible for establishing, implementing and maintaining a program that manages information optimally and best serves the interest of the Board, Schools and the Community.

Principals, Departments Managers/Supervisors

The Principals, Department Managers/Supervisors are responsible for ensuring their staff create and keep records as an integral part of their work and in accordance with established policies, procedures and standards. They provide the resources necessary for the management of records and liaise with the Privacy, Records and Information Management Department on all aspects pertaining to records and information management.

1. Create, receive and manage Board records and information to provide details about and evidence of the activities of the Board;
2. Manage all records and information regardless of format (paper, electronic, audio, videotapes and microfiches, etc.) according to applicable Federal and Ontario laws, and Board by-laws and procedures;
3. Manage print and file records and information in the departmental records as if there is not an electronic content/records management system in place;
4. Maintain records and information according to the Board's classification scheme in collaboration with the Privacy, Records and Information Management Department;
5. Ensure that appropriate access and security rules are in place to protect both paper and electronic records;
6. Apply records and information retention schedules and securely dispose of records in accordance with those schedules and in conjunction with the Privacy, Records and Information Management Department;
7. Ensure all third party organizations, contractors or agents who receive or collect personal information on behalf of the Board are aware of and comply with the RIM program.

Privacy, Records and Information Management Services

The Privacy, Records and Information Management Services has the primary responsibility for implementation and maintaining a records and information management program. In particular, the establishment of overall records management policies, procedures, standards for the organization and implementing of that process.

1. Oversee the records and information management program;
2. Facilitating the development of filing systems and maintaining these to meet administrative, legal and financial requirements;

3. Develop, implement and maintain the Board's Records Retention Schedule annually to ensure it complies with any changes in Federal and Provincial legislation and Ministry guidelines on an annual basis:
 - a. This includes the storage plan for short and long-term housing of inactive physical records and digital information;
4. Ensure the preservation of all recorded information on permanent value;
5. Oversee the management of records storage areas, ensure that records are properly stored;
6. Evaluate records storage equipment and participate in negotiation of vendor contracts and agreements, as they relate to records storage;
7. Ensure that appropriate access and security rules are in place to protect both paper and electronic records as required;
8. Continue to incorporate all electronic records into the records and information management program;
9. Ensure service components (such as archives management, forms management, retention and disposition scheduling, filing systems, legal issues, information security, ethical and quality issues, etc.);
10. Identify roles and responsibilities for the efficient management of recorded information and provide training to employees;
11. Conduct periodic audits for compliance with the policy and procedures;
12. Respond to all record requests related to students who have left school more than five years ago (including formal assessments, confirmation of attendance, etc.) as well as all education verifications;
13. Review and upgrade the Records Management Program as required and in accordance with appropriate legislative and Ministry guidelines.

Staff

Staff create, receive and keep records as part of their daily work, and should do so in accordance with the RIM policies, procedures and standards, this includes disposing of records only in accordance with the retention schedule.

1. Be responsible for all records and information regardless of format (paper, electronic, audio, videotapes, microfiches, etc.) according to applicable Federal/Ontario laws and Board by-laws and procedures;
2. Apply the records and information management retention schedules and securely dispose of records in accordance with the retention schedule;
3. Employees will be aware of the Records Management Policy and Procedure, along with their requirements and will ensure ongoing compliance with it.

Accessibility

1. Access to records internally and outside of the Board will be given priority, while balancing the requirements of business, confidentiality, data privacy and public access;
2. Information to support evident of Freedom of Information actions and decisions will be routinely recorded and stored;
3. Information will be accessible to staff who require it in the performance of their duties and are authorized to access it;
4. Information will be shared across the organization and with social agencies in accordance with operational needs and statutory provisions;
5. Plans and practices to actively make records available to the public will be in place, and records that contain personal information will be available to the public by request, and subject to statutory requirement, such as MFIPPA, PHIPA, etc.;
6. The procedure for managing official requests is available in the Board Policy and Procedures, available internally on StaffNet, and externally on the Board and/or school websites, and is in accordance with MFIPPA and PHIPA.

Records Centres and Locations

The Halton Catholic District School Board does not have its own Records Centre, however the Board does have a contract with an external party records centre, where all inactive records, such as OSR are sent for long-term storage to the facility.

1. School principals and manager/supervisors will be responsible for the effective management of records created and/or used in the school or department.
2. Records will be labeled and organized for efficient retrieval and destruction. All boxes being transmitted to an off-site storage facility must be accompanied by a Records Storage Form (see appendix "A") and approved by the Manager, Privacy, Records and Information Management.
3. All records which are not frequently needed but must be retained for a number of years according to the Board's Records Retention Schedule will be stored in an off-site storage facility.
4. Received inactive Ontario Student Records (OSRs) that are purged from schools will be stored in an off-site storage facility, and prepared for long term retention in accordance with the Ministry of Education OSR Guideline.

Records Retention Schedule

1. The Records Retention Schedule is located in the Board's Records Management Procedure, on the Board's website and is the official schedule for the HCDSB. The Records Retention Schedule outlines the retention periods of the Board's records according to their administrative, fiscal, legal, and research/archival value. It includes records that must be retained according to legislation and/or Board policy/procedures and a notation of the archival/historical importance of each record

series where appropriate. The schedule excludes all reference, resource and library material such as books, articles, and external publications which are not official records of the Board, as well as transitory records for which their purpose has been served.

2. All recorded information must be identified in a Retention Schedule and must not be destroyed or removed from the custody or control of the Board, except as authorized in the schedule.
 - a. Additional records may be stored at the discretion of the principal or department supervisory officer/designate.
 - b. For access and privacy purposes, there should be only one complete official retention copy of each record. Back-up copies should be prepared only when there is sufficient need for authenticity of the original record, when they are considered vital records and to provide an ease of access.
3. Electronic records will be backed up in accordance with the schedule developed by Information Technology Services.
4. At the time of storage, a label indicating the disposal date should be affixed to the record or box of records before it is stored to facilitate destruction per the retention schedule.
5. The process for maintaining the Board's retention schedule is to:
 - a. Establish a regular schedule for disposal of records, normally once a year;
 - b. Review the retention schedule on a regular basis and update as required;
 - c. Train staff in record retention procedures.
6. The Records Retention Schedule has nine columns as follows:
 - a. Record Series – the type of records that are normally used in schools and departments;
 - b. Functional Description – detailed description of the Record Series;
 - c. Responsible Department – the department responsible for keeping the “official” copy of the record. “Originating” department is where the record comes from or is brought into existence, for example, created or received;
 - d. Retention Period On-Site – indicated the total length of time the record is to be kept (active and inactive);
 - e. Retention Period Off-Site – indicate the total length of time the record is kept in off-site storage;
 - f. Retention Period Total – total number of years a record must be kept before it may be disposed of.
 - g. Vital Record – identifies records that are necessary to resume or continue operations and to recreate the Board's legal and financial position in the event of a disaster;
 - h. Disposition – identifies what happened to the record at the end of the retention period, for example, destroy, archival review, personal information bank (PIB);

- i. Value of Record – indicates if the record retention is based on administrative practice or legislative requirements. Legal citations are cross-referenced to the school board table of legal retention citations.
7. Retention Codes – listed at the bottom of each page of the retention schedule as follows:
 - a. P – Permanent – a file with permanent retention period is never destroyed and is stored in a location determined by the Manager, Privacy, Records and Information Management;
 - b. E – Event – Retention begins once an event or action occurs, for example, the creation of a record, retirement of a student;
 - c. C – School Year – the record retention begins at the beginning of the school year and is completed at the end of the year. For example, the Records Management listing is created in a school year, it is updated annually however, it is an active record for the school year and the following year, as a reference, then is moved to inactive storage;
 - d. S – Superseded – a document is to be retained until a new version replaces the current one.
 8. Records Retention Schedule is a “living document”. Updates and revisions to both the nature of the records retained and the retention periods applied to them continuously evolve. It is the responsibility of the Privacy, Records and Information Management Department to ensure the retention schedule is routinely reviewed and revised to accommodate these updates. Updates typically occur on an annual basis.
 9. Identifying Information Requiring Capture – Classification Codes/Categories

Records that are essential to ongoing legal requirements and effective functions of the Board and will fall into the following functional classification codes (categories):

Functional Records Classification Categories	
Function	Description of Records in the Category
ADM	Administration
COM	Communications and Public Relations
FAC	Facilities Management
FIN	Finance
GOV	Governance and Policy
HR	Human Resources
IT	Information Technology
LEG	Legal
PDD	Program Development and Design
RD	Research & Development

STU	Student
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- a. **ADM or Administration** is the function of overseeing the administration of the team and units within the Board and Schools. Records supporting this function relate to the administrative committees' decisions and meetings, as well as the internal administrative support or services. The functions of acquiring and managing equipment, supplies, services and materials for schools.
- b. **COM or Communications and Public Relations** is the function of promoting and marketing Boards/schools, programs and services. Records in this function include Board/school communications, press releases, speeches, websites, public relations activities, events, and news releases. The category also includes materials relating to marketing research, publications and reports.
- c. **FAC or Facilities Management** is the function of managing and maintaining Board buildings and facilities, while supporting capital initiatives, and building improvements. Records include maintenance and operations reports, requests and logs, environmental testing of facilities, equipment maintenance and testing, facilities planning and improvements, capital and non-capital projects, inspection reports, and records relating to property acquisitions and disposition, building and office renovations, security and property management relationships.
- d. **FIN or Finance** and accounting is the function of managing Board/school financial and accounting resources. This category includes establishing, operating and maintaining accounting (payables, receivables, revenue) systems, controls, and procedures, financial planning, reporting, preparing budgets and budget submissions, and the monitoring and analysis of capital assets. Records include but are not limited to accounts payable & receivable, budgets, audits, benefits accounting, expense payments, payroll records, financial reporting, fixed asset management, and all matters regarding the allocation and control of funds.
- e. **GOV or Governance and Policy** is the function of governing Boards/schools and exercising legal authority and control. The corporate governance structure specifies the distribution of rights and responsibilities among different participants in Boards/schools, such as the Board and staff, and spells out the rules and procedures for making decisions on its affairs. The category includes resolutions/bylaws, policies and procedures, charters, Board meeting administration and strategic planning.
- f. **HR or Human Resources** is the function of managing/supporting all employee services within the organization in accordance with policies and procedures. Records include but are not limited to personnel records, employee collective agreements, employee information (including medical information), and conditions of work, overtime, salary rates, pensions, benefits, grievances, performance evaluations and recruitment.
- g. **IT or Information Technology** is the function of applying and managing information and communications technology to support the instructions, administration and operational needs

of the organization to capture, store, retrieve, transfer, communicate and disseminate information through automated systems such as Wide Area Networks (WAN) and Local Area Networks (LAN). This category includes planning, determining requirements, developing, acquiring, modifying and evaluating applications and databases, and acquiring, tendering, leasing, licensing, registering and disposition of systems.

- h. **LEG or Legal** is the function of addressing legal issues relating to the operations of the Board and schools. Records in this category include but are not limited to claims and litigation files, appeals and hearings, contracts and agreements entered into on behalf of the Board and schools, deeds and titles relating to properties, harassments incidents, etc.
- i. **PDD or Program Development and Design** is the function of applying curriculum guidelines and designing education programs for students. Records in this category include but are not limited to proposals, correspondence, lesson plans, and course outlines.
- j. **RD or Research and Development** is the function of undertaking research and planning to support the ongoing operations of the school and Board. Records in this category include but are not limited to research surveys, studies and reports which address issues such as school boundaries, student demographics, municipal planning and statistics used to support Ministry funding requests.
- k. **STU or Student Services** is the function of providing students with programs and services in accordance with the *Education Act*. Records in this category include but are not limited to admissions, transfers and withdrawals, Ontario Student Records (OSRs), guidance and counseling assessments, consent/permission forms for special activities and programs, and extra-curriculum programs and participation. These records also include Special Education records, such as CYC, SW or Speech Language, etc. records. A copy of the summary is placed in the OSR, while more fulsome records are held by the service that provided the summary report.

Records Retention Schedule and Process

1. For access and privacy purposes, there will be only one complete official copy of each record retained:
 - a. Back-up copies will be prepared only when there is sufficient need for authenticity of the original record, where they are considered Vital Records and to provide ease of access;
 - b. Electronic material will be backed up in accordance with the schedule developed by Information Technology Services;
 - c. At the time of storage, a label indicating the primary, secondary levels, disposal date, and/or retention date/period will be affixed to the box before it is stored to facilitate destruction per the retention schedule;
 - i. All labels will be obtained from the Privacy, Records and Information Management Department.

Storage

1. The development of a records storage plan will include the short and long-term housing of inactive physical records and electronic information.
2. The Manager, Privacy, Records and Information Management will maintain the Disposition and Transmittal Records. The Manager, Privacy and RIM will determine and assist in the coordination of which records will be maintained on-site and what records can be moved to an off-site storage facility. Active records are to be maintained at the site they originated from and shall be governed by the Retention Schedule.
3. Records will be labeled and organized for efficient retrieval and destruction.
4. Transfer of records from departments and schools will be done by completing a "Records Storage Form" and with the approval of the Principal/Department Manager/Supervisor and the Manager, Privacy, Records and Information Management.
5. Special consideration will be given to archival information and records on the history of the Board.
6. Archival records will be handled with care, and appropriate protective measures will be taken to reduce the wear and tear on the records.

Archival/Historical Records

1. Although Records and Information Management procedures have been designed to specifically address the establishment of a records management system, special consideration is also given to those records identified in the Board's retention schedule as having archival value.
2. These records, although no longer required for daily administrative purposes contain information which is of value for the long-term use as well as for historical reference. The archival program will effectively store records which are to be kept permanently once the original operational need for the record has ceased to ensure that valuable documents are not destroyed.
3. Care must be taken in the handling and boxing of archival records. Adequate descriptions must be made to permit ready access and appropriate protective measures must be taken to reduce the wear and tear on records that do not have to be consulted often. Because of the special attention archival records require, they will be maintained by trained staff. Archival retention schedules must be approved by the Manager, Privacy, Records and Information Management Department.
4. The following list provides general information on the types of records which should be maintained as archival for historical reference:
 - a. Minutes of Official Meetings of the Board of Trustees;
 - b. Board Reports;
 - c. Yearbooks;
 - d. Architectural Plans/Engineering Drawings;
 - e. In-House publications (for example, Director's Annual Report);

- f. Legal Documents;
 - g. Student enrolment registers prior to and including 1969-1970 school year.
5. Enrolment registers pre-1970, particularly those in the late 1800's and early 1900's are the only record of a student's elementary and secondary school education. These were replaced by the OSR folder and Attendance Registers in the mid-1900's which are governed by the Ministry of Education's OSR procedures. The Manager, Privacy, Records and Information Management is responsible for the long-term storage and retention of these records.
 6. Arrangements for the donation of historical documents and memorabilia to local museums or historical/heritage societies, are the responsibility of the Manager, Privacy, Records and Information Management. Each donation must be accompanied by a Deed of Gift contract developed and signed by the Manager, PRIM and the recipient.

Records Confidentiality

1. Practices will be in place to protect confidential, sensitive and personal records and information from unauthorized collection, use, disclosure and/or destruction in accordance with the *Education Act*, *Municipal Freedom of Information and Protection of Privacy Act*, *Personal Health Information Act*, and the Ministry guidelines for the Ontario Student Record, the Board Privacy policy, and other relevant statutes and regulations in the Province of Ontario and the Government of Canada.
2. Shredding locked bins will be provided for the disposal of personal and confidential information.
3. Confidential records and those containing personal information will be treated as such when storing, maintaining, transferring, or destroying them. They will be destroyed in such a manner that they may not be read, interpreted, or reconstructed according to the terms of MFIPPA.
4. All records will be managed to meet the rules of evidence and legal discovery.
5. Contractual arrangements will include provisions for the protection and appropriate use of Records and Information Management to mitigate risks.
6. Records and Information Management will be managed to support business continuity and recovery in the event of a disaster.
7. Information to support evidence of Freedom of Information (FOI) actions and decisions will be routinely recorded and stored.
8. Information will be accessible to staff who require it in the performance of their duties and are authorized to access it.
9. Information will be shared across the organization and with social agencies in accordance with statutory provisions and organizational needs.
10. Plans and practices to actively make records available to the public will be in place, and records will be available to the public by request and subject to statutory requirements.

Electronic Records

1. Electronic files cover a broad range of data and include any named grouping of data such as word processing files, email, directories, spread sheets, databases or lists of file names. The same issues when dealing with paper documents, such as scheduling, disposal and storage apply to machine readable records. They are governed by the statutes that apply to access, retention and disposal of all public records.
2. Microfilming or other forms of electronic imaging will be done for records that are too fragile to be used on a regular basis. Records with a remaining retention of ten years or greater may be imaged, such as OSRs, employee files, permanent financial records, Board/Committee agendas and minutes.
3. To ensure that the information in electronic formats is accessible, work sites/schools will record the following on the outside of the media:
 - a. Description of the data;
 - b. Name of the system on which the medium is to be used;
 - c. Name and version number of the application software;
 - d. Capacity and density of the media;
 - e. Recording date(s);
 - f. Security precautions and access restrictions;
 - g. Type of copy (storage, working, back-up, etc.);
 - h. Any special attributes;
 - i. Any other pertinent information regarding the data stored.
4. The need to maintain electronic records should also be taken into consideration when upgrading software or hardware throughout the system. Electronic files, particularly those designated as permanent records, must be migrated onto new technology and stored in a stable environment.

Email

The electronic mail system, commonly referred to as email, is owned by the Halton Catholic District School Board and is to be used for Board business. Occasional use of the system for messages of a personal nature will be treated like any other message. The HCDSB desires to respect the right to privacy of its employees and does not monitor email messages as a routine matter. However, it reserves the right to access them, view their contents, and track traffic patterns. Furthermore, the HCDSB will inspect the contents of email messages in the course of an investigation triggered by indications of impropriety or as necessary to located substantive information that is not more readily available by other means.

Within the Board, each person is responsible for controlling records according to the records management policies. Email messages are considered records and fall into this category.

Before selecting email as a means for communication or document transmission, users should consider the need for immediacy, formality, accountability, access, security and permanence. Email differs from other forms of communication. It is immediate and informal, similar to a telephone conversation, yet it is more permanent. It is as irrevocable as a hard-copy document, yet easy to duplicate, alter and distribute.

The HCDSB reserves the right to monitor employee use of email by system administrators. Employees are reminded that email use is provided primarily for business purposes and not for personal purposes and that employees cannot expect protection of their personal or business related email correspondence under privacy laws and regulations.

Vital Records Plan

A Vital Records Plan will be developed to identify and protect those records that are vital to getting the system up and running immediately after a disaster, for example, water damage, fire damage. It will include a pre-arranged set of scenarios for dealing with system records and back-up copies of vital records. Once identified and duplicated, the record copies are kept in a separate and safe location as determined by the Department/School Administrator. The location of all back-up material will be reported to and maintained by the Finance Department.

Disposal for Paper, Electronic and File Records

1. Records should be reviewed yearly for disposal including electronic and other viable media records, and in accordance with the Board's Retention Schedule. This includes all relevant back-up tapes and hard drives. Shredding records will be done through the Board's contracted shredding service. A certificate of destruction will be provided to the Board and become a permanent record. The following will be the process when requesting disposal of paper, electronic and file records:
 - a. Staff will refer to the approved retention schedule for time lines;
 - b. A request for disposal form noting the appropriate destruction will be made and a copy sent to the Privacy and Records Management Department. This will include a complete list of the records including the retention period and destruction date;
 - c. Disposal of official records of the Board must be approved by the Supervisory Officer, Treasurer and Director of Education.
2. Transitory records may be destroyed after their use has been served, for example, in the case of student work, once a mark or indication of mastery has been made. Most electronic/voice mail and telephone transitory messages are considered short-term records and should be disposed of as soon as their purpose have been served. However, if the content of the message or any attachments are considered business records, they fall under the Retention Schedule.
3. If not already disposed of, duplicate records and temporary working papers such as rough notes or informal drafts are to be destroyed at the time the official records is created as they should not outlive the document's that resulted from them.

4. Records containing confidential and/or personal information must be handled securely when storing, maintaining, transferring or destroying them. They are to be destroyed in such a manner that they cannot be read, interpreted or reconstructed according to the terms of the *Municipal Freedom of Information and Protection of Privacy Act*.
5. In general, the school/department that created or authorized creation of a record is responsible for its retention and disposal, including records stored on a computer. To avoid overloading the storage capacity on a server, the Information Technology Services department may eliminate records after advising the users and allowing a reasonable time for them to destroy the record or make other arrangements for storage.
6. In the event of a school closure/consolidation, the Principal and the School Secretary will work with the Privacy, Records and Information Management Department to ensure proper management and storage of student, administrative and archival records.
7. If there is a potential, pending, or ongoing lawsuit, investigation or audit, related documents will be retained beyond the approved retention requirement set out in the Records Retention Schedule until further notice.

Approved: Regular Meeting of the Administrative Council

Authorized By: _____

Director of Education

PURPOSE

The Halton Catholic District School Board (HCDSB) is committed to the protection of privacy and complies with all pertinent provisions in the *Education Act*, the *Municipal Freedom of Information and Protection of Privacy Act*, (MFIPPA), the *Personal Health Information Protection Act* (PHIPA), the *Safe Schools Act* and any other applicable privacy legislation. HCDSB also complies with the Ministry Guidelines for the Ontario Student Records (OSRS), Privacy by Design (PbD) and the Guideline for Video Surveillance and Cameras in Schools by the Ontario Information and Privacy Commissioner, as well as, the Privacy and Information Management (PIM) toolkit, by the PIM taskforce, 2008.

SCOPE AND OBJECTIVE

1. This procedure applies to all Halton Catholic District School Board staff who collect, use, retain, and disclose personal information related to students and Board employees, and to operations and procedures in all facilities within the Halton Catholic District School Board.
2. This procedure applies to the operation of any video system installed on any Board site for the purpose of surveillance.
3. The Board reserves the right to consider and employ lawful “covert surveillance” on a case by case basis in consultation with the appropriate police service.
4. The video taping of school events such as graduation, theatrical productions or other similar events by the parents and families of students is considered acceptable and is not addressed by this policy.
5. Authorized videotaping for educational, instructional and/or research purposes is permitted and is not addressed by this policy.

PRINCIPLES

1. The Board recognizes that the promotion of a safe and secure learning environment is in the best interest of students, staff and the general public.
2. The Board recognizes that the *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA) governs the collection of personal information, including the images captured on a video surveillance system.
3. The Board, in the development of this policy, referenced the Information and Privacy Commissioner/Ontario Guidelines for Using for Video Surveillance, released October 6, 2015.
4. The Board recognizes that the utilization of video surveillance systems as a complement, not to replace, other means to create a safe and secure learning environment.
5. The following personnel are authorized to implement video surveillance system in the discharge of their duties:

- a. Principals (or a person designated by the Principal)
 - b. Board Supervisor Officers
 - c. Director of Education
 - d. The Superintendent of Facilities Services has the overall responsibility for the Board video surveillance program
6. Notice signs shall be installed at all properties with video surveillance systems, in accordance with the notification requirements of MFIPPA. Signs will be prominently displayed so the public has reasonable and adequate warning that surveillance is or may be in operation before entering the area.
 7. The closed circuit television (CCTV) system within Board facilities may operate continuously. All recorded images are the property of the Board.
 8. Cameras will not monitor areas where students and staff have an expectation of privacy, such as change rooms and washrooms.
 9. Where applicable and appropriate, this procedure shall be incorporated into training and orientation programs of the Board.

REQUIREMENTS

Planning Criteria For Video Surveillance Systems

1. To ensure the safety of individuals and the protection of their well-being and as a deterrent and detection mechanism against vandalism to building and property, video surveillance cameras may be used according to the following criteria:
 - a. To protect public security or reduce criminal and other illegal activity
 - b. To deter and/ or assist in the identification of individuals that may put students, staff and public at risk at Board schools and properties;
 - c. To respect the principles of the *Municipal Freedom of Information and Protection of Privacy Act*, the *Safe Schools Act*, and the *Education Act*;
 - d. To provide surveillance without limiting general public activities;
 - e. Video surveillance may be installed without notice as part of a specific investigation where criminal activity is suspected.
2. The Halton Catholic District School Board will endeavor to ensure the proposed design and operation of video surveillance system minimizes privacy intrusion to that which is absolutely necessary to achieve its required, lawful goals.
3. Any agreements between the Halton Catholic District School Board and service providers must indicate all video surveillance programs are under the Board's custody and control and are subject to this policy.

- a. A service provider who is considered to be in breach of this Policy and the applicable acts may lead to penalties and up to the termination of the contract. In addition, full legal action and an investigation may be required, depending on the nature of the breach of this policy.
- b. An employee of a service provider must sign a written agreement regarding their duties and confidentiality under this Policy and the applicable acts.

The Design, Installation and Operation Of Video Surveillance Equipment

1. The Board shall maintain control of, and responsibility for, the video surveillance system at all times.
2. Reception equipment such as video cameras, audio or other devices should only be installed in identified public areas where video surveillance is a necessary and a viable detection or deterrence activity. Appropriate areas for video surveillance include entrances, exits, general purpose areas, corridors, classrooms, labs, and shops, offices, receiving areas, parking lots and exterior building perimeter. The equipment will operate up to 24 hours/seven days a week and within the limitation of the system, for example digital or tape, power disruptions and serviceability/maintenance.
3. The equipment will be installed in such a way that it only monitors those spaces that have been identified as requiring video surveillance. Cameras should not be directed to look through the windows of adjacent properties.
4. If cameras are adjustable by operators, this should be restricted, if possible, so operators cannot adjust or manipulate them to overlook spaces that are not intended to be covered by the video surveillance program.
5. Equipment will not monitor the inside of areas where students, staff and the public have a higher expectation of privacy, such as in change rooms or washrooms.
6. Reception equipment should be kept in a strictly controlled access area. Only controlling personnel, or those authorized in writing, should have access to the controlled access area and reception equipment.
7. Video monitors should not be in the position that enables public viewing of the images displayed.
8. Video recorded material shall be stored in a controlled access location outside of public view. Only designated personnel will have access to this location and to video recorded material.
9. Periodic maintenance of video surveillance equipment shall be the responsibility of Facility Services, according to a schedule that will ensure efficient operation of the system.

Elementary Schools

1. Initially equipped with up to one camera as determined by Facility Services and the school, an optional 20" monitor, digital recorders and a system that can be expanded up to nine cameras.
2. The school shall have the flexibility to locate up to four cameras within the placement guidelines of this policy
3. Facility Services shall have the flexibility to locate up three cameras within placement guidelines of this policy

4. A static IP address is provided for remote network recording and monitoring capabilities.

Secondary Schools

1. Initially equipped with up to sixty cameras as determined by Facility Services and the school, an optional 20" monitor, digital recorders and a system that can be expanded up to one hundred cameras.
2. The school shall have the flexibility to located up to eight cameras within the placement guidelines of this policy
3. Facility Services shall have the flexibility to locate up eight cameras within placement guidelines of this policy
4. A static IP address is provided for remote network recording and monitoring capabilities
5. Equipment shall be digital with LAN network readiness
6. Facility Services reserves the right to make and approve all changes deemed necessary to the design recommendations for the betterment of the safe school program measures and equipment design practice or enhancement

Confidentiality

1. Access to the personal information collected under a video surveillance system on a given site is only afforded to Board authorized employees and contracted service providers with specific duties pertaining to the supervision, operation and maintenance of the system and for the proper, secure storage and destruction of video recordings regardless of the software medium used to store images.
2. All video footage that is uploaded from the video surveillance software will be place on an encrypted source, be it a USB key, DVD, CD and any other manner of storing the personal information captured by video surveillance.
3. Any agreements between the Board and service providers shall state that the records dealt with or created while delivering a video surveillance program are under the Board's control and are subject to the *Municipal Freedom of Information and Protection of Privacy Act*.
4. Board employees and contracted service providers will comply with the requirements of this policy and the *Municipal Freedom of Information and Protection of Privacy Act* in performing any duties related to a Board-approved video surveillance system.
5. Board employees and contracted service providers will be subject to discipline, up to and including termination of employment or service to the site, for knowingly or deliberately breaching this policy or the provisions of the *Municipal Freedom of Information and Protection of Privacy Act* or other relevant statutes.
6. Where a service provider fails to comply with this policy or the provisions of the *Municipal Freedom of Information and Protection of Privacy Act*, such a failure will be considered to be a breach of contract leading to penalties that include but are not limited to contract termination.

7. Board employees and the employees of service providers performing any duties related to the operation of a Board approved video surveillance program are required to sign an undertaking of confidentiality.

Notice:

In order to provide notice to individuals that video surveillance is in use:

1. The Board shall post signs, visible to student, staff and members of the public, at all entrances and/or prominently displayed on the perimeter of the grounds under surveillance.
2. Notification requirements of this sign must inform individuals of the legal authority for the collection of personal information, the principle purpose(s) for which the personal information is intended to be used, the title, business address, and telephone number of someone who can answer questions about the collection, see Appendix "A"
3. The Board will provide notice to the public on the Board's website as well as a link on each of the School websites. The notice shall be clear, language-neutral along with a graphic depiction of the use of video surveillance.

Formal Access Request Process

1. All requests for video records should be directed to the Manager, Privacy, Records and Information Management for processing.
2. A person requesting access to a records should make a request in writing either in the form of a letter or the prescribed form, (insert a video surveillance request form) and submit it to the Manager, Privacy, Records, and Information Management. The individual requesting the information must:
 - a. Provide sufficient detail, such as the approximate time and date, the location – if known – of the incident, to enable an experienced employee of the Halton Catholic District School Board, upon reasonable effort, to identify the record; and,
 - b. At the time of making the request, pay the prescribed fees as provided for under the *Municipal Freedom of Information and Protection of Privacy Act*.
 - c. The Board may levy additional fees to prepare and redact, as per MFIPPA, any information that is outside of the scope of the request.
3. The Board has the ability to redact or remove personal information of individuals that may have been captured on the video surveillance and would be considered exempted information by using tools and techniques such as
 - a. Digitizing analogue footage to enable the use of more powerful editing tools.
 - b. Blacking out or blurring images of individuals that are not subject to the request, and
 - c. Removing the sound of voices

Access: Law Enforcement

1. If access to a video surveillance record is required for the purpose of a law enforcement investigation, the requesting Officer must complete a Law Enforcement Request Form, Appendix "C", and forward the form to the Manager, Privacy, Records and Information Management or their designate. The Manager, Privacy, Records and Information Management or designate, will provide the recording for the specified date and time of the incident. A copy of the request will be kept by the Halton Catholic District School Board according to the Records Retention Schedule.
2. The Manager of Privacy, Records and Information Management, or designate, will record the following information in the facility's video logbook:
 - a. The date and time of the original, recorded incident including the designated name/number of the applicable camera and DVR. For example Assumption Secondary School, main hallway, camera 1;
 - b. The time and date the record was copied and provided to the requesting Officer;
 - c. The name and title of the individual who made the copy for the requesting Officer;
 - d. If the record will be returned or destroyed after use by the Law Enforcement Agency.

Viewing Images

When recorded images from the cameras must be viewed by law enforcement or for investigative reasons, this must only be completed by an individual(s) authorized by the Halton Catholic District School Board in a private, controlled area that is not accessible to other staff and/or visitors.

Retention, Secure Storage, Access To, And Disposal Of Video Records:

1. Video recorded material on a portable device, that is encrypted, which may contain elements of proof shall be stored in a locked, secure location to ensure integrity of information, and to be available should law enforcement request them. Access to recorded material shall be limited to the Principal (or person designated by the Principal), a Board Supervisory Officer and/or the Manager of Privacy, Records and Information Management.
2. Access to the digital video recorder (DVR) should be limited to the Principal (or person designated by the Principal) and/or a Board Supervisory Officer. Appendix "A", Part A – Video information of the instance of Access Form should be completed when access the DVR to copy a video image to a portable device.
3. Recorded data on the DVR shall be maintained for a maximum of thirty (30) days.
4. A portable device on which video recorded material is stored and encrypted (including a computer drive, CD ROM, USB drive, or any other device used to store video recorded material) must be labeled and securely stored and, in accordance with the Record Retention Schedule, be securely disposed of in such a way that the personal information cannot be reconstructed or retrieved. Appendix "A", Part B – Destruction of Video Recorded Data of the Instance of Access Form must be completed.

5. If video recorded material on a portable device is required as part of an ongoing school investigation, it shall be retained for a least one year and in accordance with the records retention schedule.
6. The Manager, Privacy, Records and Information Management, shall approve the release of records when law enforcement request to view, or to take a copy of, video images. In all cases when video images are released as part of a police investigation (see video release form to law enforcement) must be completed.
7. Whenever video recorded material is used as part of an investigation or disciplinary action involving a student, the student and his/her parent/guardian shall be permitted to view the recorded material in question with school personnel. However, the confidentiality of others must be protected.
8. Any student, staff member or member of the public who has been recorded by video surveillance equipment has a general right of access to his or her personal information under section 36 of MFIPPA. This right is recognized. However, Section 38(b) of MFIPPA, unjustified invasion of another individual's privacy, may apply.
 - a. Access to an individual's own personal information in these circumstances may depend upon whether affected third parties consent to the disclosure, or whether any exempt information may be severed from the record.
 - i. Redacted or blurring images may be required, however, the process can be costly. That cost of redacting video images will be forwarded directly to the requestor.
9. This procedure will be reviewed every three years.
10. Principals shall respond to any inadvertent disclosures of personal information based on direction provided by the Director of Education for the Halton Catholic District School Board. Any breach of this policy shall be reported to the appropriate Superintendent and the Manager, Privacy, Records and Information Management.

Training:

1. All staff who have access to video surveillance will receive training in accordance with the roles and responsibilities under this policy.
2. All staff in the schools and/or at Board sites will receive training on video surveillance, the Board's obligations, their responsibilities under MFIPPA, and how and if they may access video footage.

Audits:

1. Although developing policies, procedures and providing training to all staff is a requirement under this procedure, it is also a requirement to ensure staff are complying to and have an understanding of their role(s).
2. To accomplish the above the Board commits to verifying our compliance to the video surveillance policy and procedures through audits. The Manager, Privacy, Records and Information Management will perform regular audits of the access the Video Surveillance system.
 - a. These audits will be forwarded by Information Technology (IT) Services to the Manager, Privacy, Records and Information Management Services on a regular basis for review by the Manager.

- b. The Manager, Privacy, Records and Information Management Services will also complete spot audits, on an unscheduled basis, at all Board facilities, including schools. These spot audits will review:
- i. Position of the Video Surveillance viewing station and camera views,
 - ii. Records kept at the School or facility regarding viewing and downloading of information,
 - iii. Signage at the site,
 - iv. Access to the video system, etc.

Responsibilities:

1. The Director of Education is responsible for the Board's overall video surveillance program.
2. The Senior Administrator, Facility Management Services, through the Superintendent of Facility Management Services is responsible for the life-cycle management of the authorized facility video surveillance systems including the specifications, equipment standards, installation, maintenance, replacement, disposal and signage and principal training at the Board sites. The Senior Administrator, Facility Management Services, is also responsible for the technical aspects of the video surveillance systems.
3. The Manager, Privacy, Records and Information Management Services is responsible for the development and review of the operational policy and procedure, along with the coordination and performance of audits. The Manager, Privacy, Records and Information Management Services is also responsible for the Board's responsibilities under the applicable Acts.
4. The Principal of school/sites having a video surveillance system is responsible for the day-to-day operation of the system in accordance with the policy, guidelines, and direction/guidance that may be issued from time-to-time.
5. The Board solicitor is responsible for the provision of legal advice related to the Board's obligations under the applicable Acts.

Approved: Regular Meeting of the Administrative Council

Authorized By: _____

Director of Education

APPENDIX “A”

Notice to Students, Parents and Guardians

To: All Students, Parents and Guardians

From: School Administrator

Date:

Re: Video Surveillance

The Halton Catholic District School Board is equipped with a video surveillance system. The video surveillance system is in all Elementary and Secondary schools, as well as in all other Board properties.

The purpose of the video surveillance system is to protect the well-being and security of students, staff and visitors. It is also a deterrent and identification tool for vandalism, criminal or other illegal activities. The use of video surveillance is part of an overall plan to create a safe and nurturing learning environment for all of our students.

All information obtained by video surveillance is confidential and will only be provided to law enforcement authorities when criminal or other illegal acts are suspected. All video recorded material will be destroyed within thirty (30) days of being recorded unless it is used as part of an investigation.

All information is managed in accordance with the Halton Catholic District School Board policy for Video Surveillance, the *Municipal Freedom of Information and Protection of Privacy Act*, the *Safe Schools Act* and the *Education Act*. All Board policies are available on the Board's website.

For more information, please contact the Principal of your child's school or the Director of Education at 905.632.6300.

Video Surveillance

Instance of Access Form

Part A – Video Information
School: _____
Copy Date: _____
Location of Camera: _____
Date of Incident: _____
Surveillance Period: _____

Part B: Destruction of Video Recorded Data Log
Date: _____
Date of Destruction: _____
Destruction by: _____

*NB: If video recorded material is on a portable device as required as part of an on-going investigation, is shall be retained for at least one year

*If video images are released as part of a law enforcement investigation, the Board shall maintain a copy of the released material in accordance with the Records Retention Schedule.

VIDEO REQUEST**Halton Regional Police Service**

*The following information must be forwarded at the time of each video request that is forwarded to the Halton Catholic District School Board. **Note: Camera footage is only kept for 20 days***

This information may be sent to the Board in an email, voicemail or on in the form below:

Mandatory Information for Video Requests

Name of officer and rank requesting information	
Date of request	
Badge number	
Incident/occurrence number	
Location of incident	
Date and Time of incident	
Time range for video capture	
Reason for request (i.e. investigation)	
Description of what you are looking for (i.e. assault at in school parking lot)	
Describe which camera(s) you would like (i.e. name of school and area(s), school gym, front entrance, etc.)	

Additional information that may assist the Board in fulfilling the request	
Number of copies made at time of request	
Name of Person contacted by HRPS (i.e. Principal, V.P.)	
Name of responsible Superintendent contacted at time of request (please print)	
Name of Technician who made the true copy (please print)	
Technician signature	
Contact information of Technician (please print)	
Date copy made	
Date copy picked up	
Name and badge number of HRPS officer (picking up record & please print)	
Signature of HRPS officer	
For additional information and assistance please contact privacy@hcdsb.org	

Confidentiality Undertaking

I (Insert Name) am a member or representative of the Halton Catholic School Board, (called “my organization”).

I will be meeting with the Halton Catholic School Board (called the “Board”) for the purpose of providing advice and recommendations to the Board in respect of (Insert Role of Individual).

I acknowledge that:

- (1) I will acquire certain knowledge or receive written or oral information (called “the Information”) which is either non-public, confidential or proprietary to the Board; and
- (2) The interests of the Board may be irreparably harmed if unauthorized parties obtain the Information.

Except as provided in the following two paragraphs of this Undertaking or as may be required by law, I undertake to keep all information confidential.

I will not, without the written consent of the Board reveal or disclose the Information to anyone or use the Information either directly or indirectly for any purpose other than to provide advice and recommendations to the Board in connection with my portfolio and/or area of expertise with the Board.

I undertake not to copy or circulate the Information except in accordance with the written direction of the Board. I will maintain all Information in a secure place and in accordance with the *Education Act*, and the *Municipal Freedom of Information and Protection of Privacy Act* (MFIPPA) and return it to the Board upon written request to do so. I will not initiate or respond to any external inquiry relating to my portfolio (insert name of Division(s)/Department(s) under supervision).

Unless otherwise required by law or following receipt of the Board’s written consent, I will not disclose to any person (other than to appropriate persons within my organization or other persons authorized by the Board) any information about the Board, and their partners. This includes any and all matters discussed during meetings with the Board.

I acknowledge:

- (1) any delay or failure by the Board in exercising its rights, powers or privileges under this Undertaking does not free me from the obligations in this Undertaking; and
- (2) should the Board only partially exercise its rights, powers and privileges, the partial exercise of such rights, powers or privileges does not preclude the Board from exercising any other rights, powers or privileges.

I undertake to abide by the terms of this Undertaking and I declare that there is no actual or potential conflict of interest arising out of my participation in the meetings with the Board.

Signature:

Witness:

Name:

Name:

Date:

Date:

Appendix “E”

Storage Device Disposal Record

Storage Device			Disposal		
ID #	Type of Device	Location In-use or Used	Method of Disposal and reason	Date and Time of Disposal	Print Name and Signature