

TOWNSHIP OF LAKE OF BAYS POLICY MANUAL

Chapter:	Administration	Index No.	HR-3.15
Section:	Human Resources	Effective Date:	12/04/07 (M/D/Y)
Subject:	Employee Confidentiality Statement Policy	Revision Date:	Original
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1 PURPOSE:

1.01 To establish an Employee Confidentiality Statement to protect the security and confidentiality of records and personal information under the charge of the Township of Lake of Bays that may be exposed to Township Employees in fulfilling the requirements of their duties.

2 POLICY:

2.01 In recognizing the possibilities of employees being exposed to confidential and personal information while fulfilling the requirements of their duties, through this policy the Township promotes the access of information resources in an effective, secure, ethical and legal manner and sets forth the following procedures to ensure best practices with respect to confidential and personal information pursuant to Section 47(c) of the Municipal Freedom of Information and Protection of Privacy Act and Ontario Regulation 823)

2.03 Confidential and/or Personal Information

Such information shall consist of, but not be limited to, highly sensitive information pertaining to a Township employee, ratepayer, stakeholder, business associate (each a disclosing party) or any information that by its very nature ought to be treated as confidential.

2.04 Procedures

- a) Each employee shall be required to sign and adhere to an "Employee Confidentiality Statement".
- b) A written offer of employment is conditional upon the completion of an "Employee Confidentiality Statement" (Schedule A)
- c) The "Employee Confidentiality Statement" is signed, dated, witnessed and placed in the individuals personnel file.
- d) A new employee's refusal to sign an "Employee Confidentiality Statement" after signing a written offer of employment shall void and nullify the written offer of employment.
- e) An employee shall not reproduce any confidential information, in part or in whole.
- f) Confidential information shall be kept in a secure place.

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- g) An employee shall not, without express written consent of the Township, disclose, cause or permit to be disclosed any confidential or personal information to any third party, but rather adhere to the conditions under which the information was collected.

2.04 Disciplinary Action

- a) Disclosure of confidential or personal information may result in one or all of the follow actions:
 - i. Verbal warning
 - ii. Written warning
 - iii. Unpaid suspension
 - iv. Termination

3. ADMINISTRATION

- a) Confidential information is and will continue to be the exclusive property of the Township of Lake of Bays
- b) Upon passing, this policy shall be circulated to each Township employee for review and signature.
- c) All staff shall adhere to this policy

4. ATTACHMENTS

Employee Confidentiality Statement

Resolution No. 7(a)(vi)/12/04/07

Schedule "A"

TOWNSHIP OF LAKE OF BAYS
EMPLOYEE CONFIDENTIALITY STATEMENT

I, _____ have accepted a position with the Corporation of the Township of Lake of Bays, in the _____ Department.

I acknowledge that during the course of my employment, I will acquire and be exposed to confidential information related to the Corporation of the Township of Lake of Bays, its ratepayers, stakeholders, business associates and other employees. If, at any point during my employment with the Township of Lake of Bays, I am in doubt as to whether or not certain information (whether in written or other form) is confidential within the meaning of the Townships policies, I agree to seek clarification from my immediate supervisor or other appropriate person with authority at the Township of Lake of Bays, before making any disclosure of the information in question to a third party.

If at any time during my employment I am in doubt as to whether the proposed disclosure of certain information may not be consistent with the purposes for which it was collected by the Township of Lake of Bays I agree to seek clarification from my immediate supervisor or other appropriate person in authority at the Township of Lake of Bays before any such information is disclosed.

I agree not to disclose or release confidential information to any person at any time without proper consent, authorization, or except as may be legally required. I further agree to take appropriate security measures to prevent unauthorized access to confidential information.

I will immediately report to my supervisor or other appropriate person with authority at the Township of Lake of Bays any violation or breach of the commitments made in this undertaking, whether or not the violation or breach was intentional or inadvertent.

I understand and agree that if I violate or breach any of the commitments made in this undertaking, I may be subject to discipline or discharge (if applicable).

I agree that my confidentiality obligations pursuant to the Township of Lake of Bays "Employee Confidentiality Statement" Policy and this statement shall survive the tenure of my employment with the Township of Lake of Bays for any reason.

By signing below I confirm that I have read, understood and agree to abide by the terms and conditions of this undertaking.

Employee Signature

Date

Witness Signature

Date