



Peer Mentor Policy and Procedure Handbook

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Peer Support Toolkit for People living with HIV and/or Hepatitis C

Toolkit Purpose and Objectives: This toolkit provides practical guidance and tools to assist community-based organizations or groups to deliver social and emotional peer support services to people living with HIV and/or hepatitis C (Hep C). It includes four parts.

1. Getting started: a guide to develop and deliver peer support services.
2. Training peer mentors: facilitation guide.
3. Becoming a peer mentor: participant training guide.
4. Peer mentor policy and procedure handbook.

Target Population: This toolkit is intended to support the development or enhancement of social and emotional peer support services for people living with HIV and/or Hep C in the Interior Health Region of BC. The Interior Region includes East Kootenay, Kootenay Boundary, Okanagan and Thompson Cariboo Shuswap.



Image by Aaryn Secker. Originally created for *Breastfeeding Art Expo Art Catalogue, 2017*, Interior Health & KCR – Community Resources.

How the Toolkit Was Developed: CMHA Kelowna engaged two advisory groups (content experts and context experts) to provide guidance and expertise to the development of the toolkit. CMHA Kelowna reviewed peer support materials from a wide variety of sources and identified key guiding documents. The advisory groups met a combined total of nine times over the course of six months shaping the content and layout of the toolkit to ensure it is relevant to people living with HIV and/or Hep C in the interior region of British Columbia.

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- a. Advisory Groups: One advisory group involved the participation of 8 individuals with lived experience of HIV and/or hepatitis C and one health outreach nurse, most of who were members of the Peer Advisory Committee for STOP HIV at the time.

The other advisory group involved the participation of 16 individuals from the following 10 organizations:

- i. ANKORS: AIDS Network Kootneys Outreach and Support Society.
 - ii. ASK Wellness: AIDS Society of Kamloops & Merritt Branch.
 - iii. Canadian Mental Health Association Kelowna & District Branch.
 - iv. Interior Health Authority, HIV and Health Outreach Program, Population Health.
 - v. Living Positive Resource Centre Kelowna.
 - vi. North Okanagan Youth & Family Services Society.
 - vii. Pacific Hepatitis C Network.
 - viii. Penticton & District Community Resource Society.
 - ix. Positive Living BC.
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 - c. Authors: Alison Kyte, Jayme Pereira and the Canadian Mental Health Association Kelowna & District Branch.
 - d. Formatting: Aaryn Secker and the Canadian Mental Health Association Kelowna & District Branch.

References: The content in this handbook was adapted from numerous unpublished documents created by the Canadian Mental Health Association (CMHA) Kelowna. They include the *CMHA Kelowna personnel manual*, *CMHA Kelowna volunteer policy and procedure handbook* and *CMHA Kelowna policies for peer support program*.

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Editable Templates: Form and certificate templates in editable word documents are available by request. Please email lhhealthoutreach@interiorhealth.ca at the Interior Health Authority, HIV and Health Outreach Program, Population Health.

Editable Handbook: Part 4, the peer mentor policy and procedure handbook is available by request as an editable word document. Please email lhhealthoutreach@interiorhealth.ca at the Interior Health Authority, HIV and Health Outreach Program, Population Health.

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The complete toolkit can be found at www.interiorhealth.ca/PeerToolkit.

Welcome!

Congratulations and welcome to [AGENCY]! We would like to thank you in advance for taking the initiative to get involved. We hope your peer mentor experience will be rewarding and enjoyable.

Please read this peer mentor manual carefully – it contains information about:

- [AGENCY]
- Peer mentor role and expectations
- Privacy and confidentiality agreement
- Code of ethics
- Respectful workplace policy
- Code of conduct/ conflict of interest declaration
- Photo consent form
- Peer mentor time sheet

Please sign and submit the relevant forms and read all the documentation provided. The peer support program staff will provide further orientation to your role. One or more program staff will provide you with direct supervision in the role of peer mentor.

Tips on how to make the most of your peer mentor role

Be honest: Make sure the program staff is aware of your previous training, your ability in certain areas, and if you need more training on how to do a task you have been asked to complete. We want you to be completely comfortable in your abilities to perform a task and be able to ask for assistance if needed.

Be prompt: Return calls and e-mails in a timely manner. Be sure to show up on time for your scheduled shifts and meetings. Showing up on time (or early) demonstrates that you care about your work and are engaged in the process.

Enjoy your work: If you feel that you need more of a challenge or that you aren't learning any new skills in your role, speak to the program staff. Find out if there are any other tasks or projects you could help out with that would be a better fit. If it is time for you to move on to other opportunities, notify the program staff.

About [AGENCY]

[Example: The Canadian Mental Health Association is one of the oldest national charitable organizations in Canada and the oldest national mental health charity. Each year, CMHA divisions and branches across Canada provide service to more than 100,000 Canadians through the combined efforts of more than 10,000 volunteers and staff in locally run organizations in more than 135 communities.

CMHA has been in Kelowna since 1956. Our organization has been at the leading edge of providing innovative services and supports to assist people with mental illness to develop the personal tools to lead meaningful and productive lives. We believe in a recovery vision of service with the idea that people can recover from mental illness when they play an active and empowered role in their journey.

Our organization looks at the whole person rather than simply their illness. We take the approach that all citizens in our community have the right to a roof over their head; an opportunity to earn a decent income, access meaningful social, work, educational and recreational activities and treatment that supports their recovery. We are one of the only organizations that also focus on mental health promotion, that is providing education, skills, advocacy and community-based research that empowers individuals and families to improve and enhance their mental health and wellbeing.]

[AGENCY] MISSION

[Example: As the nation-wide leader and champion for mental health, CMHA facilitates access to the resources people require to maintain and improve mental health and community integration, build resilience, and support recovery from mental illness.]

[AGENCY] VISION

[Example: Mentally healthy people in a healthy society:

We seek to educate people about mental health issues and change the ways the community views and treats people with mental illness. We believe that all people with mental illness should have access to appropriate and adequate support. We believe in developing and maintaining partnerships in the community.]

YOUR LOGO HERE



Peer Mentor Expectations

Professionalism

- You are representing the [AGENCY] and it is expected that all volunteers be appropriate in attitude, manners and appearance. You are in a professional environment and are expected to treat others with dignity and respect, perform assigned tasks and request assistance if required. Consult the “Respectful Workplace” document for more information.
- Dress neatly and for comfort. Casual-professional is the look to model while peer mentoring at [AGENCY].
- Understand your role and its limitations. Consult staff if unsure. For example, if you have any concerns about a peer, check with [AGENCY] staff members. Do not contact the peer’s case manager or any community partner or agency involved with the peer.
- Volunteers are not able to make statements on behalf of [AGENCY] to the media unless the executive director (or designate) has granted permission.



Creating Safety in a Professional Manner

- **“Friendship”**- Friendship implies a mutual relationship and because the peer mentor is in a helping role on behalf of the agency, developing personal relationships with peers is not advised. The focus of mentoring is on the peer’s needs. If you have a personal connection with a peer as a result of other settings, ensure the program staff is aware and discuss how this may impact your ability to peer mentor.
- **Sharing Personal Information** - Ensure that your personal contact information, including home address, social media information and if possible personal phone numbers and email addresses be kept confidential. Not respecting this boundary can create vulnerability and expectations beyond the peer mentor/ peer relationship.
- **Respect** - All lifestyles, identities, preferences, cultures, religions and spiritual beliefs are to be respected. A peer mentor may choose to not discuss certain topics.
- **Giving Advice** - A peer mentor may act as a resource to peers such as providing information about community programs. At no time is giving advice appropriate (e.g. “If I was you...”, “I think you should...”).
- **Financial** - Do not borrow, lend or hold any money or personal items from peers, including cigarettes.
- **Physical Contact** - Physical contact is discouraged because it can be easily misinterpreted, considered favouritism or violates a peer’s boundaries.
- **Gifts**- Gifts are generally not accepted. Accepting gifts can give the impression that the receiver is being influenced to show favour or disfavour to someone and may owe the peer something in return. Respectfully decline the offer and seek staff assistance in the event there is concern that there may be offence taken or if the gift is not expensive and can be shared (e.g. a box of chocolates). All gifts received are considered the property of AGENCY.
- **Conflict of Interest** - This is a situation in which a person is in a position to derive personal benefit from actions or decisions made in their official capacity. It is imperative that a peer mentor’s position at AGENCY is not used to promote personal gain.

Additional Safety Expectations

- Peer mentors are not permitted to transport peers during or after peer mentoring hours.
- Smoking by peer mentors is permitted only in the designated area.
- Defer to staff if there are any safety concerns, such as drug use or possession, or damage to the property. Secure the situation, keep yourself safe and assist the peers under staff direction. Do not physically intervene in the event of a dangerous incident.
- Peer mentors are prohibited from using alcohol or drugs while performing peer support duties. If prescription medication is affecting the ability of either a mentor or peer to perform their duties, any visit or group planned needs to be rescheduled to a time when the effects will no longer be present. Visits may not take place when a peer is under the influence of alcohol or drugs.
- Report any criminal charges to the program staff contact.

Developing Relationships

A peer mentor is encouraged to develop relationships with many peers as it relates to the work that is done.

- Listen.
- Empathize.
- Give information when it is requested.
- Establish and maintain healthy boundaries with peers.
- Empower and support peers to make their own decisions.
- Be mindful of when and how self-disclosure is used and keep the focus on the peer's needs.
- Redirect peers to appropriate resources if they require support that is outside the peer mentor's scope of practice.

Supervision and Support

- New peer mentors will have an initial performance review after three months. Regular reviews will then take place once per year.
- Peer mentors will attend a mandatory monthly team meeting. Support by way of coaching, guidance, problem-solving and training is offered by program staff as well as peer mentors in a group structure.
- Peer support program staff are available to provide individual supervision and support on an as-needed basis.

General Duties and Responsibilities

- Peer mentors need to inform the peer support program staff in advance if unable to attend any peer mentor activities (meetings, groups, workshops, training, etc.).
- Peer mentors must submit a completed Peer Mentor Services Volunteer Record Sheet at the end of every month.
- Peer mentors must file an Incident Report following any concerning issues or occurrences or unusual circumstances such as suicidal behaviour, violence, sexual inappropriateness, health crisis and/or if emergency services have been contacted. Peer mentors must notify the peer support program staff or in their absence, another agency staff member as soon as possible after an incident.
- Notify peer support staff immediately of any safety concerns that might arise.

One-to-One Peer Support Duties and Responsibilities

- This program provides one-to-one support. No one else is to be included in any part of the meetings with a peer.
 - Peer mentors must not recruit peers to be specifically supported by them. Peers may be self-referred or referred by a health professional. A peer support program staff will match peers with mentors. If after a trial period, the match is not working well, the peer or mentor may ask to be reassigned.
 - Once a match is made, there is a maximum of 10 visits for 1-2 hours per visit. It is understood that there may be occasions when a visit is shorter. If a peer does not show up for a visit, it is the mentor's responsibility to report this to the peer support program staff on the following business day.
 - The peer mentor initiates phone contact to set up weekly or bi-weekly meetings with the peer at a mutually convenient time and place.
 - Hold scheduled one-to-one visits with peers in a safe public environment. Maintain confidentiality in public places.
- This is a formal relationship. Peer mentors are friendly with peers, but not friends. There are no casual meetings as friends or with friends outside the program and no planned activities as friends.
 - At the end of the formal relationship, a friendship can commence if agreed upon by both parties.
 - In the first meeting, after getting to know each other, mentors ask peers if they have any goals they would like to set. Mentors do not set the goals. Mentors respect where the peer is at and empower them to make their own decisions even if it is not what they would do.
 - Peer mentors are expected to note by date:
 - all contacts with persons served, including telephone contacts;
 - all messages left and "no shows";
 - other collateral communication, including unusual occurrences;
 - other important incidents.
 - Notes should be recorded on the day of the visit.

Group Peer Support Duties and Responsibilities

- Groups are co-facilitated with another peer mentor.
- Peer mentors are expected to arrive early to set up the space and welcome each peer as they arrive.
- At the start of the group, remind everyone that everything said in the room is confidential and review the group guidelines and principles of support handouts.
- Make any announcements that are needed (program staff will provide you with these ahead of time).
- Take attendance.
- Facilitate a large group discussion drawing inspiration from quotes, poetry, books, video, etc. provided by a peer mentor or a program participant.
- Depending on the number of peers present at any given meeting, the large group may be divided into 2 or 3 smaller groups for check-in.
- Maintain a positive and supportive environment.
- Facilitate a small group check-in, allowing each person time to talk.
 - Everyone needs an equal opportunity to share and to receive empathy from other group members.
 - Mention how much time there is in total and for each person. For example, “We have 45 minutes and 6 people, so we have about 7 minutes each”.
 - Model respect for each other’s time.
 - Try to start with a person (maybe yourself) who you know will respect the time guidelines to set the pace for others. There will be occasions when someone will need a little more time, so it can be helpful to have them share towards the end, as not everyone will need all their allotted time.
 - Let people talk. For some, this is the only opportunity to share in a safe, confidential environment. Although it’s helpful for others to share similar experiences, refocus the conversation if people are going on too long about their experiences during another person’s time or are getting into advice-giving.
- Peer mentors are expected to keep a record by date of attendance, general group content/topics and unusual occurrences or incidents. Notes should be recorded on the day of the activity.



Tips to help you facilitate groups

- If you need to refocus the group or a person, it's best to be straightforward and honest. Some examples of what to say:
 - "I'm concerned about our time. We have 10 minutes left and 3 more people need to share".
 - "I think we've gotten a bit off track. What would you say is the one main thing you are worried about?"
 - "Just a reminder that this is Joe's time. I'd like to hear more about that subject during your time, Kyle."
 - "This seems like an important thing for you to talk about, I'm just worried we won't have enough time for you to get the support you need in group, would you like to talk with a staff member?"
- It is very important to intervene if another group member is being judgmental or negative. If you don't, peers may think you are in agreement. Some examples of what to say:
 - "That's fine if you don't agree with that behavior, but we are not here to judge each other".
 - "I think we all know we can make some poor decisions when under the influence of alcohol."
 - "That's one way of looking at that. I see it as an opportunity for growth."
- At our agency, we respect the medical model and encourage people to consult with their doctors and other medical professionals, especially in regards to medication.
 - "It's very important you speak to your doctor or pharmacist before making any medication changes."
 - "Supplements can be helpful, but also harmful if taken with certain medications. Please talk to your doctor before taking anything besides your prescription."
- Use your judgment in unusual circumstances.



Violation of Program Policy

- Peer mentors will be given three warnings concerning violations of program policy. If violation of policy continues, the peer mentor will be subject to disciplinary action. This may include an enforced leave of absence, re-training or dismissal.
- Serious violations of program policy including breach of confidentiality, harassment, bullying, engagement in unlawful activities, use of alcohol and drugs and sexual misconduct (sexual comments, behaviours, innuendo, etc.) are grounds for immediate dismissal.
- Peer mentors have the right to appeal any disciplinary action.
- Appeal Process: **[Example:**
 - The peer mentor must state in writing the intention to appeal and reasons for the appeal and submit to the peer support program staff. A response will be provided within two weeks.
 - If resolution of the appeal is not achieved at this level, the peer support program staff will arrange for an agency manager to address the appeal. This will take place within two weeks.
 - If resolution of the appeal is not achieved at this level, the agency manager will arrange for the executive director to address the appeal. This will take place within two weeks.
 - The peer mentor will be able to attend each meeting with a support person of their choice.
 - The decision of the executive director will be final.



Honorariums

- Overview: An honorarium is a payment designed to recognize and acknowledge the contribution of mentors to the peer support program and to offset any personal costs to the peer mentor during a service such as transportation or activities. This payment should not be recognized as an equivalent value to a professional wage, but as a token of appreciation and value assigned to it. **[Example:** Honorariums will be paid for the following peer support program activities: one-to-one visits, group facilitation, hospital activity facilitation, social group outing facilitation and public speaking events.]
- Payment: **[Example:** Honorarium payments will be given in the form of a cheque once per month at \$20.00 per service. It is to be noted that the honorarium is given for the service provided and not based on the hours of service provided.]
- Taxable Income: It is important to note that Canada Revenue Agency regulations state that honorariums are considered as salary and thus constitute taxable income. It is at the sole discretion of the peer mentor to declare honorariums received as income on their annual income tax return.
- Processing the payment: **[Example:** In order to process an honorarium payment, a volunteer timesheet must be completed by the end of the month and signed by the peer support program staff and submitted to the agency financial department. All information on the time sheet must be completed in order for the payment to be processed.]

Leave of Absence

- Peer mentors are entitled to take a leave of absence to prevent burnout, protect health and wellbeing or because of relapse.
- The peer mentor on leave does not need to resign from the program. The peer support program staff must be informed of the intention to go on leave either verbally or in writing and an approximate return date, preferably no longer than 3 months.
- A peer mentor may be required to have an interview with peer support program staff before returning to active mentoring. The mentor may also be asked to complete a refresher course.

Confidentiality Guidelines

The [AGENCY] expects that peer mentors who come in contact with confidential information as a result of their placement at [AGENCY] will:

- a) Access or discuss confidential information only as directed by [AGENCY] staff. Staff will determine what is “need to know information” for peer mentors to carry out their role.
- b) Preserve confidentiality of confidential information while placed at [AGENCY] and outside of work.
- c) Not engage in the release or sharing of any confidential information. If requested by another agency (this includes the RCMP), defer to [AGENCY] staff. There are procedures in place for these processes in accordance with the Freedom of Information and Protection of Privacy Act.
- d) Not share private information about program participants or co-workers with (other) program participants. Information about program participants should not be discussed in public places where conversations may be overheard. All information of a child protection nature or suicide ideation (thoughts expressing intent to die) must be reported to program staff immediately.
- e) Redirect any program participants requesting access to their file to program staff.

Purpose

To protect the legal rights of our program participants, staff and stakeholders to privacy of their personal and business information in our custody and control. Peer mentors will be privileged to confidential information and therefore must adhere to the confidentiality policy and agreement.

Policy

In all circumstances, peer mentors will remain aware of the rights of program participants to have information about them held in confidence. The following guidelines are to be applied in maintaining confidentiality and disclosing information.

Breach of Privacy and Confidentiality

Where it has been discovered or reported that the confidentiality and privacy of [AGENCY] program participants and/or business has been breached, this will result in an immediate conference with the peer mentor and the appropriate [AGENCY] program supervisor to discuss the nature of the breach, consequences and the appropriateness of continuing the placement.

Examples of Breaches of Privacy and Confidentiality

- Accessing information that you do not need to know to do your job, i.e., unauthorized reading of program participant files.
- Lending [AGENCY] keys to program participants so that they can access other areas of the building, including office space.
- Sharing of your personal contact information or the personal information of others (i.e. giving out program participant's phone number to other program participants upon request).
- Leaving file storage unlocked if it should be locked when not in use (if the peer mentor has access).
- Showing, telling, copying, selling, changing or disposing of confidential information that is not pertinent to your role.



OFFICE USE ONLY

RECEIVED:

PEER SUPPORT SERVICES: OATH OF CONFIDENTIALITY

PLEASE FAX COMPLETED FORM TO FAX # OR SUBMIT TO AGENCY ADDRESS

Oath of Confidentiality

I, _____, as a peer mentor with peer support services for the AGENCY promise that information I am privy to with relation to a person involved with peer support services will *only be shared by me for consult and supervision* with

- ❖ the peer support staff and their supervisors and
- ❖ other AGENCY peer mentors in the peer support team meeting (under supervision of the peer support staff or designate).

In case of emergency as described below and when I cannot get a hold of the peer support staff or their supervisors, I will contact another AGENCY staff member.

I understand that it is my responsibility to contact the peer support staff or other AGENCY staff members as mentioned above, immediately when:

- ❖ there are concerns about child abuse or neglect;
- ❖ there is a clear risk to the safety of a third party;
- ❖ there is a risk of suicide;
- ❖ there is a risk of harm to the peer.

I understand that:

- ❖ Any misuse on my part of an individual's information, intentional or unintentional, shall be considered a breach of this oath as a peer mentor of peer support services.
- ❖ This breach will be reported to the peer support staff, their supervisors and the executive director of AGENCY.
- ❖ Disciplinary action will be taken up to and including termination of my enrolment as a peer mentor of peer support services.

Peer Mentor	Date
x	
Peer Support Staff	Date
x	

Code of Ethics

Board, staff, volunteers and students that provide services on behalf of the [AGENCY] are accountable to the people they serve and to this agency. This accountability is achieved by adherence to the mission statement, philosophy, declaration and the practices determined by this agency. Failure to fulfill the obligations of this Code of Ethics may result in disciplinary procedures and appropriate consequences.

Staff members, volunteers, students, and board members of the [AGENCY] shall be committed to the adherence of the following obligations:

- To regard the welfare of the [AGENCY's] program participants as their primary professional duty.
- To not knowingly enter into an intimate personal, including sexual, relationship with any agency program participant while they are receiving services from the agency and for an appropriate period of time after terminating the professional relationship.
- To maintain an objective, non-possessive, non-judgmental, professional relationship with program participants and colleagues.
- To act in a conscientious, diligent and efficient manner and exhibit responsibility and concern for the wellbeing of colleagues by not ignoring manifestations of illness or unethical conduct.
- To strive for competence in the performance of the services and functions undertaken to promote excellence in this agency and to fulfill their obligations and responsibilities with integrity.
- To protect the confidentiality of all professionally acquired information and to disclose such information only when properly authorized or when legally or professionally obligated to do so.
- To ensure [AGENCY] marketing and promotional materials never intentionally misinform or mislead the public or misrepresent [AGENCY].
- To ensure marketing activities reflect the integrity of the [AGENCY] to maintain the support and trust of the community.

- In the matter of personal use of alcohol and/or other chemicals, to serve as a positive role model for program participants and/or colleagues.
- To ensure off-duty conduct does not negatively bring the agency's reputation into dispute. Additionally, off-duty conduct shall not negatively affect the ability of the employee/volunteer to do their job.
- To remain aware of personal beliefs and prejudices and shall refrain from imposing them on program participants and colleagues.
- As part of their commitment to providing quality service, to accept responsibility for continuing their education and professional development and, whenever possible, take advantage of such opportunities.
- To not use any authority given by the agency in a coercive manner to meet personal needs and not promote dependence of any program participant or colleague but, rather, assist others to grow and develop their skills and abilities.
- To remain aware of the possibility of exploitation and shall not knowingly engage in activities which may exploit program participants, their families, or colleagues for personal, financial or social gain.
- To maintain a respectful attitude toward other agencies. If strongly opposed to the methods or philosophies of any agency, to utilize the appropriate lines of communication to address the issue.
- To not discriminate against any person on the basis of race, religion, socio-economics, gender, gender identity, sexual orientation, political belief, ancestry, age, ability or marital status.
- To refrain from making unauthorized representations to outside bodies in the name of this agency.
- Employees/volunteers must not solicit the agency's program participants or discharged program participants for their private practices.
- Employees/volunteers in private practice must not treat program participants in their private practice who are eligible for services from the agency. Employees/volunteers must inform program participants of their eligibility to

receive services at the agency.

- When providing program participants with information on private practitioners, all options are discussed with no preferences or recommendations given.
- Employees/volunteers do not participate in organizational decisions from which they could benefit personally.
- Employees/volunteers may not accept gifts/benefits from program participants or other agencies that may be perceived to influence their role or relationship with a program participant.
- Employees must report potential or actual conflict of interest situations to their supervisor who will report it to the executive director.

The executive director has final authority to resolve a conflict of interest situation. Final appeals may be made to the board of directors.



Respectful Workplace Policy

[AGENCY] recognizes the right of all employees, board members (including all members of governance committees), volunteers, contractors, donors and guests to be treated with respect and dignity, in an environment free from harassment. [AGENCY] shall take such actions as are necessary, which may include discipline, respecting an employee, trustee or volunteer engaging in harassment (sexual or personal as defined below) in the workplace. To constitute harassment, behavior may be repeated or persistent or may be a single incident.

This policy applies to all persons related to or dealing with [AGENCY]. This includes employees, board members (including all members of governance committees), volunteers, contractors, donors and guests or anyone else dealing with [AGENCY]. It is a condition of employment, paid or unpaid; it is imperative that there be respect for the personal dignity of all persons. This policy applies in and on all [AGENCY] premises, and wherever a [AGENCY] sanctioned event takes place.

Preventing harassment is everyone's responsibility. Senior management and board members are expected to act against harassment even without a formal complaint and employee and board members are expected to express

their disapproval if they encounter harassing behavior.

"Harassment" is defined as conduct or comments that the person knew or ought reasonably to have known would be unwelcome and inappropriate or otherwise offensive to a person or a group of people and that have the effect of creating an intimidating, hostile, embarrassing or offensive work environment. The accused harasser's intent has little bearing; the impact of the act is what is considered. Harassment includes sexual harassment, personal harassment and abuse of authority.

Harassment can occur with a colleague, a supervisor, subordinate, volunteer, board or board member, persons contracted to work for the organization or donors/customers. It can occur through telecommunication equipment such as the telephone, facsimile machine, or computer terminals in the workplace or the employee's home. Harassment comprises unwelcome or objectionable conduct, reprisal, communication, comments or display made on either a one time or continual basis that could reasonably be expected to demean, belittle, or cause personal humiliation or embarrassment.



Without limiting the definition, harassment as defined in the British Columbia Human Rights Act, is discrimination on the basis of the following prohibited grounds:

- Race
- National or ethnic origin
- Color
- Religion
- Age
- Gender/Gender identity
- Sexual orientation
- Marital or family status
- Source of income
- Disability
- Conviction for an offense for which a pardon has been granted

Sexual harassment is defined as “any conduct, comment, gesture, or contact of a sexual nature that the person knew or ought reasonably to have known would likely cause offense or humiliation to any employee, or that might on reasonable ground be perceived by that employee as placing an implicit or explicit sexual condition on employment opportunities for training, job security, performance assessments, promotion, or salary increases”. Sexual harassment may occur in the form of behavior by any gender or gender identity toward any other gender or gender identity.

Harassment and sexual harassment includes, but is not limited to:

- Abuse of authority, which undermines or threatens an employee/volunteer’s career.
- Written or verbal insult, abuse, or threats.
- Racial or ethnic slurs, including racially derogatory nicknames.
- Unwelcome remarks, jokes, innuendoes, or taunts.
- Patronizing, or condescending behavior, language or terminology, which reinforces stereotypes and undermines self-respect or adversely affects work performance or working conditions.
- Displaying offensive or demeaning pictures or material, (this includes pictures or material in private offices).
- Practical jokes which cause awkwardness, embarrassment, or negatively affect work performance.
- Unwelcome sexually oriented remarks, invitations, jokes or requests whether indirect or explicit.
- Leering or obscene or offensive gestures.
- Unwanted and inappropriate physical contact such as touching, kissing, patting, pinching and brushing up against a person.
- Inquiries or comments about a person’s sex life or sexual preferences.
- Differential treatment based upon race, gender, gender identity, ethnicity, etc.
- Both physical and psychological intimidation, such as demeaning behavior, and treating others with a lack of respect or generally creating an atmosphere of fear.

It should be noted that, whereas some behavior may be offensive, inappropriate, unwanted, or a misuse of authority, it may not be considered harassment under the law. This does not make it acceptable at [AGENCY] and this type of behavior will not be tolerated.

Actions and comments have different effects on each individual. Just because one person may accept or tolerate offensive language, jokes or taunting, this should not make another person, who is offended or embarrassed by the same actions or comments, reluctant to express or report their objections.

Disciplinary action may include: warnings, reprimands, disciplinary counseling, negative performance appraisals, withheld or delayed promotions, suspension without pay, and termination.

Reporting a Complaint

If you are:	Report complaint to:
Employee/Volunteer	Program Supervisor/Manager
Managers/Senior Managers	Executive Director
(Note: If Program Supervisor/Manager is the harasser, report to Executive Director. If Executive Director is the harasser, report to Board Chair)	

Procedures for Complaints

[AGENCY] encourages prompt reporting of complaints so that a rapid response and appropriate action may be taken. However, because of the sensitivity of these problems and the emotional toll such conduct may have on a person, the late reporting of complaints may not in itself preclude [AGENCY] from taking action.

Complaints may be lodged by a peer mentor (or by the program supervisor on behalf of a peer mentor) who is not being harassed directly, but who has witnessed or is affected by the harassment of others.

Investigations cannot be undertaken on the basis of an anonymous complaint. However, when a potential problem is brought forward, it will not be ignored. The potential problem will be actively monitored and when necessary steps will be taken to correct the situation. The investigator has an obligation to not knowingly permit or fail to take reasonable action to terminate the harassment.

Any peer mentor found guilty of harassment may be immediately removed from the [AGENCY] at the discretion of the investigator.



Informal Process

An employee or volunteer who experiences harassment should first attempt to make it clearly known to the person(s) responsible that the behavior is offensive and contrary to [AGENCY] policy and request that it stop. The harasser may not realize that their behavior is unwelcome and offensive.

In some situations, this may be difficult or inappropriate or the offensive behavior may continue even after the harasser has been told the behavior is offensive. In this case, the person being harassed should take immediate action as outlined below:

- The person who experiences harassment and attempts to deal directly with the harasser, but fails (or believes that direct approach is inappropriate), may choose to have the matter dealt with on an informal basis with the assistance of the supervisor (or appropriate alternate) without proceeding with a formal complaint. The purpose of this step is to provide a means of obtaining information by voicing the problem and developing a way to deal with it. Complainants are encouraged to discuss these matters directly with the supervisor, if they feel this could resolve the issue.
- Any employee or volunteer who allows, condones or witnesses harassment but takes no action or ignores a complaint of harassment will be seen as party to the harassment.
- An attempt must be made to resolve the problem within five business days.
- Where the complainant is unsure that harassment has occurred and would like help in determining whether or not the incident constitutes harassment, the complainant should immediately discuss the incident with the appropriate level of the organization (outlined in the previous page chart).
- Where the complainant finds the informal resolution of the problem is unsuccessful, inappropriate or unacceptable, the complainant may proceed with the formal complaint process.

Formal Process:

The person to whom the complaint has been formally addressed will investigate all formal complaints. They must be written and signed and should be directed to the Chair (or appropriate alternate). The complaint must include a description of the incident, witnesses, if any, and steps already taken if any, to resolve the matter.

1. If an investigation is to be conducted, it will include interviews with the complainant, the alleged harasser, and any witnesses. The Chair (or appropriate alternate) will document the situation accurately and completely. The parties concerned will be advised their statements will form a part of a confidential report. The report will be available to the complainant and the alleged harasser at the end of the investigation.
2. If the complainant is also alleging that the Chair (or appropriate alternate) has allowed or condoned observed harassment, or has not responded to a complaint of harassment, this matter will also be included in the investigations and report.
3. The report will include all relevant factual information, a copy of the statements of the parties concerned, an appropriate analysis of the information including the conclusions reached, and any recommendations.
4. All decisions made will be based on the facts of the incident and not the personalities of the participants. The investigator may, at [AGENCY]'s expense, hire professional assistance to deal with the complaint. The decision of the investigator is considered final.
5. An attempt must be made to resolve the problem within ten business days from the written complaint being presented. The objective of a resolution will be to stop and prevent any recurrence of harassment and, where appropriate, mitigate the effects the harassment has had on the individual.



[AGENCY] will not, in any way, penalize or retaliate against a board member, employee, volunteer, or anyone else, who in good faith makes a complaint of harassment, nor will [AGENCY] permit anyone else to do so. Such action would be serious violation of this policy and should be reported immediately to the ED and/or the board chair.

[AGENCY] will not tolerate any retaliation against any board member, employee, volunteer, or anyone else for having complained of harassment, participated, or cooperated in an investigation of complaint. Board members, employees or operational volunteers who are found to have retaliated may be subject to disciplinary action. [AGENCY] encourages board members, employees and volunteers to cooperate in an investigation of harassment.

Should [AGENCY] determine that the complaint was known by the person making the complaint to be false, this may result in disciplinary action. While this situation would not be expected, making knowingly false complaints would be considered a serious disruption to the workplace. This is not to be confused with situations where the facts are unclear or there is a lack of supporting evidence to support the complaint.

If the matter is not resolved by the [AGENCY], any person may contact the British Columbia Human Rights Commission to discuss the situation with them directly.



Peer Mentor Code of Conduct/Conflict of Interest Declaration

[AGENCY] endeavors to support peer mentors by providing opportunities to share their skills, knowledge and time in support of our vital work. Peer mentors are a significant and integral part of our working team; consequently, the agency has high standards for peer mentors who wish to work with our program participants.

All peer mentors are responsible for adhering to the policies and procedures in the Peer Mentor Policy and Procedure handbook and all subsequent policy revisions.

Peer mentors are responsible for preventing real or perceived conflicts of interest to protect the integrity of [AGENCY].

Contravention (i.e. breach, transgression or violation) may result in a request for a peer mentor to resign and/ or other sanctions. Peer mentors shall:

1. Perform duties with integrity and in a way that will maintain shareholder, public and member/director confidence in [AGENCY].
2. Ensure no real or perceived advantage is taken by virtue of their position or from information obtained due to their position as a peer mentor.
3. Immediately disclose to the supervisory staff of any existing or potential conflict of interest on any issue. This disclosure will be recorded and shared with the program manager.
4. Keep confidential all information pertaining to program participants, staff, volunteers and [AGENCY] business. All information of a child protection nature or suicidal ideation must be reported to program staff immediately.

I declare that I will read the Peer Mentor Policy and Procedure Handbook. I understand and agree to adhere to everything stated in the handbook, including this Code of Conduct/Conflict of Interest Policy.

Name: _____

Signature: _____

Date: _____

Witness Name: _____

Witness Signature: _____

OFFICE USE ONLY

RECEIVED: _____

STORY/PHOTO CONSENT FORMPLEASE FAX COMPLETED FORM TO **FAX #** OR SUBMIT TO **AGENCY ADDRESS**

NAME		DATE:	
PROJECT/DEPARTMENT			

THANK YOU FOR SHARING YOUR STORY, PHOTO AND/OR WORK TO HELP US EXTEND OUR REACH AT [AGENCY]. IN AN EFFORT TO RESPECT YOUR CHOICES AND YOUR CONTRIBUTIONS, PLEASE LET US KNOW HOW YOU WOULD LIKE YOUR STORY, PHOTO AND/OR WORK SHARED.

I CONSENT [AGENCY] TO USE MY :

IMAGE/LIKENESS (*PHOTOGRAPHS*) PERSONAL INFORMATION VIDEO WRITING ARTWORK

OTHER _____

I CONSENT [AGENCY] TO CREDIT ME FOR MY CONTRIBUTIONS AND/OR STORY (*DEFINED ABOVE*) BY:

FULL NAME (*FIRST, LAST*) FIRST NAME ONLY PSEUDONYM NO NAME / ANONYMOUS

I CONSENT [AGENCY] TO DISPLAY MY CONTRIBUTIONS AND/OR STORY (*DEFINED ABOVE*) IN THESE MEDIUMS:

PROMOTIONAL PUBLICATIONS EDUCATIONAL PRESENTATIONS MEDIA (*BROADCASTS, CABLECASTS*)

WEBSITE [AGENCY WEBSITE] "IN HOUSE" DISPLAY [AGENCY ADDRESS(ES)]

SOCIAL MEDIA (*FACEBOOK, TWITTER*) OTHER _____

IF I CHOOSE TO WITHDRAW CONSENT, I WILL CONTACT [TITLE] AT [PHONE NUMBER]. I UNDERSTAND THAT [AGENCY] CAN PREVENT MY CONTRIBUTIONS FROM BEING PLACED ONTO FUTURE PUBLICATIONS, BUT **CANNOT REMOVE MY CONTRIBUTIONS FROM WORK ALREADY MADE PUBLIC.**

BY SIGNING BELOW, I AM AGREEING TO CONTRIBUTE TO [AGENCY] MY STORY AND/OR PICTURES OF MYSELF TO ACCOMPANY MY STORY (*DEFINED ABOVE*) FOR THE PURPOSE OF INSPIRING OTHERS TO SUPPORT THE WORK OF [AGENCY].

NAME (PRINT)		SIGNATURE	
DATE		EMAIL	
ADDRESS		PHONE (HOME)	
POSTAL CODE		PHONE (CELL)	

OFFICE USE ONLY

RECEIVED:

PEER SUPPORT SERVICES: INCIDENT REPORT

PLEASE FAX COMPLETED FORM TO FAX # OR SUBMIT TO AGENCY ADDRESS

NAME OF INDIVIDUAL		DATE OF REPORT	
DATE OF INCIDENT		TIME OF INCIDENT	
LOCATION			
NAME OF MENTOR (PLEASE PRINT)		SIGNATURE OF MENTOR	
PEER SUPPORT STAFF (PLEASE PRINT)		SIGNATURE OF PEER SUPPORT STAFF	

**CIRCUMSTANCES AT THE TIME OF THE INCIDENT
(THIS MAY BE BACKGROUND INFORMATION THAT CONTRIBUTED TO THE INCIDENT)**

**WHAT HAPPENED (THIS IS A FACTUAL REPORT OF WHAT YOU SAW AND/OR HEARD,
NOT YOUR UNDERSTANDING OR OPINION ABOUT WHAT HAPPENED)**

WHAT I SAID AND/OR DID:

**OUTCOME/ACTION TAKEN
(TO BE COMPLETED BY THE PEER SUPPORT STAFF, IN CONSULTATION WITH THE MENTOR)**

OFFICE USE ONLY

RECEIVED:

PEER MENTOR SERVICES VOLUNTEER RECORD SHEET

PLEASE FAX COMPLETED FORM TO FAX # OR SUBMIT TO AGENCY ADDRESS

NAME		DATE (MONTH & YEAR)	
ADDRESS			

HONORARIUM DESCRIPTION

[**Example:** Thank you for volunteering as a peer mentor. In recognition of your contribution, an honorarium will be given in the form of a cheque once per month at \$20.00 per service event for one-to-one mentoring, group facilitation and public speaking. Please note the honorarium is given per service event and not per hour of service provided.]

DATE	SERVICE/PROGRAM PARTICIPANT	VISIT # (one-to-one)	# OF HOURS

TOTAL NUMBER OF REIMBURSED	
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TOTAL HOURS	
TOTAL HONORARIUM AMOUNT	\$

