

	<b>DONOR PRIVACY</b>	<b>FUNDRAISING</b>
	<b>Policy Number</b>	FD-010
	<b>Effective Date</b>	July 12, 2017
	<b>Most Recent Revision</b>	October 10, 2025
<b>Standard</b>	<b>OO.GG.3 a,b(vii), f(vi), g,(iv), h(i,ii,vi), j(i-v), k</b>	Approved by: DOCP

## 1.0 Scope

This policy governs how the Sudbury Hospice (SH) and the Sudbury Hospice Foundation (SHF) collect, use, maintain, and disclose donor information. It applies to all individual, corporate, organizational, and institutional donors.

All contributions to SH are coordinated through the SHF as of April 1, 2017. The SHF, incorporated in 2015, raises and manages charitable donations on behalf of the SH to support its programs, services, and capital projects.

## 2.0 Policy Statement

SH and SHF are committed to respecting donor privacy and protecting personal information. We value the trust placed in us and strive to maintain the highest standards of accountability and transparency in all fundraising practices.

This policy is aligned with:

- The Personal Information Protection and Electronic Documents Act (PIPEDA)
- The Canadian Standards Association's Model Code for the Protection of Personal Information

## 3.0 Procedures

### 3.1 Defining Personal Information

Personal information refers to any data that can identify an individual, including names, contact information, donation history, or opinions. Business contact information and publicly available details (e.g., published phone book listings) are excluded.

### 3.2 Accountability

- The Director of Clinical Practice (DCP) is the Chief Privacy Officer for SH.
- The Director of SHF serves as the Chief Privacy Officer for SHF.  
Both are responsible for privacy enforcement, training, and managing inquiries or complaints.

### 3.3 Identifying Purpose

The purposes for which personal information is collected are clearly communicated at or before the time of collection.

- If personal information is to be used for a new purpose, additional consent will be obtained.

### **3.4 Consent & CASL Compliance**

- Donors must provide informed consent before their information is collected, used, or shared.
- All electronic communications comply with the Canada Anti-Spam Legislation (CASL).
- Opt-in consent is required for email or text communications, and donors can opt out at any time.

### **3.5 Solicitation of Families of Clients/ Residents**

- SH and SHF do not actively solicit donations from family members of current clients/ residents.
- All requests to opt out of mailings or communications are honoured promptly.

### **3.6 Publication of Donor Names**

- Donors may be recognized in reports or displays by gift category unless anonymity is requested.
- Anonymous donors are listed as “Anonymous” within the relevant giving level.

### **3.7 Limiting Collection, Use, and Retention**

- Only data required for specific purposes is collected. Information is collected lawfully and fairly. Personal information retained only as long as necessary and securely destroyed afterward.

**Note:** SH and SHF do not sell, exchange, or trade donor lists. See also Policy FD-008 – Protection of Donor Lists.

### **3.8 Accuracy**

- SH and SHF strive to maintain complete, accurate, complete, and current donor records.
- Donors may request to review or correct their information at any time.

### **3.9 Openness**

- Privacy policies are available to the public via SH and SHF websites.
- The roles of Chief Privacy Officer are clearly identified.

### **3.10 Safeguards**

- Physical records are stored securely in locked cabinets.
- Electronic records are protected with password-restricted access, firewalls and secure software (e.g., SUMAC database).
- Only authorized personnel may access donor information.

- Staff and volunteers sign confidentiality agreements prior to handling personal data.

### 3.11 Individual Access

- Upon request donors may access their personal information and request corrections.
- Responses will be provided within 30 days at little or no cost unless required by law.

## 4.0 Complaints & Compliance

Donors may challenge compliance with this policy by contacting the applicable Chief Privacy Officer. Complaints will be addressed following SH and SHF's Complaints Policy (Appendix 2). If a complaint is found valid, procedures and policies will be amended accordingly.

## 5.0 Review & Updates

This policy is jointly reviewed by SH and SHF annually. Updates are made as needed to reflect best practices and legal requirements.

AUTHORIZED SIGNATURE:



NAME & TITLE:

Ashley Bertrand

Director, Sudbury Hospice Foundation

\*Please note that this policy is available in French on the French language version of the site which can be accessed by selecting "French" in the language bar.