

## **Employee Demographics**

*Please provide the full name that is currently on file with your regulatory College if applicable. If this is not applicable, please provide your full name as it appears on your Driver's License or other primary form of government issued identification.*

**First Name:** \_\_\_\_\_ **Middle Name:** \_\_\_\_\_  
(Optional)

**Last Name:** \_\_\_\_\_

**Preferred Name** (if different from above): \_\_\_\_\_

**Registration Number with your Regulatory College** (if applicable): \_\_\_\_\_

**Title:**        Mrs.     Ms.     Mr.     Mx.     Other: \_\_\_\_\_

**Legal Sex:**        F        M        X        **Gender Identity** (optional): \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Date of Birth (DD/MMM/YYYY):** \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

**Social Insurance Number:** \_\_\_\_\_

**Phone Number:** \_(\_\_\_\_)\_\_\_\_\_ **Email Address:** \_\_\_\_\_

### **Emergency Contact (Optional)**

**Name:** \_\_\_\_\_

**Relationship:** \_\_\_\_\_

**Phone Number:** \_(\_\_\_\_)\_\_\_\_\_

## **Code of Conduct**

At CGMH, our values are more than words – they’re the heartbeat of our team, guiding how we treat each other and how we show up for our patients.

Our values foster a sense of identity, belonging and shared purpose, reminding us that we’re part of something greater. Together, we set the bar for excellence, taking pride in our work and delivering compassionate, respectful, and high-quality care.

### ***Be Kind***

*Kindness is at the heart of everything we do.* It fosters a culture of empathy, compassion, and care in every interaction. It’s about treating patients, families, and colleagues with dignity, understanding, and respect, even in challenging moments. By prioritizing kindness, we create a supportive environment where trust and well-being thrive, ensuring every individual feels valued and included as we work together to deliver outstanding care for life.

### ***Support Each Other***

*We are stronger together.* Supporting each other means stepping up and collaborating across every area of the hospital through teamwork. It’s about recognizing and valuing each other’s contributions, offering help when needed, and celebrating successes together. By uplifting one another, we create a strong, inspired, and unified team, dedicated to delivering high-quality care and ensuring everyone feels empowered and supported in their roles.

### ***Lead by Example***

Leadership is about everyday actions. Every action, big or small, sets a standard for others to follow. By holding ourselves and each other accountable for delivering on our mission, we inspire those around us with our commitment, integrity, and pursuit of excellence. Leadership means creating an environment where individuals feel empowered to speak up, learn through experience, and engage in constructive dialogue. We foster a culture of fairness and transparency, where accountability is balanced with support.

### ***Keep Growing***

*Our growth is an ongoing journey.* We stay curious, invest in personal and professional development, embrace new challenges, and approach every opportunity with purpose. Through continuous learning, improvement, and innovation, we empower our teams and adapt to the evolving needs of our community to ensure our hospital remains a leader in care.

## **My Commitment**

These standards reflect the commitment we have to our values of *Be Kind, Support Each Other, Lead by Example* and *Keep Growing*. These values guide how we treat all members of the CGMH team, our patients, and families/caregivers, creating an environment where excellence, trust, and respect thrive. Every member of our workplace community (patient, visitor, family member/caregiver, employee, credentialed staff, or volunteer) will be recognized for their worth, dignity and individuality.

I pledge to support and uphold these standards as a member of the CGMH team.

**This is my commitment.**

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Employee Name (Print)

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Signature

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Date

## **Online Security Protection**

Here at Collingwood General and Marine Hospital, passwords are an integral aspect of our computer security program. Passwords are the front line of protection for user accounts. A poorly chosen password may result in the compromise of critical Hospital resources. As such, all CGMH staff with access to our systems are responsible for taking the appropriate steps to minimize the risk of internet abuse.

To reduce risk, CGMH has implemented a password protection plan. Staff are issued a temporary password when hired and are asked to change it as soon as they log in to ensure security. If a password is forgotten, staff are asked to answer the following question to IT when requesting a password reset.

**What city were you born in?** \_\_\_\_\_

**Employee Name:** \_\_\_\_\_

**Employee Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

## **Privacy/Confidentiality Pledge**

### **GUIDING PRINCIPLES:**

Collingwood General and Marine Hospital (CGMH) is committed to protecting Personal Health Information and other Confidential Information (collectively referred to as "Confidential Information"), as those terms are defined in the CGMH Privacy/Confidentiality Policy and Pledge. Including information about:

Patients and their families; employees and students; physicians and allied professional staff; volunteers; vendors and other service providers; CGMH operations and administration.

Access to Confidential Information is permitted on a need-to-know basis for the operations of CGMH and provision of its services, including to deliver and assist in the delivery of health care. It is prohibited to collect, use, modify, disclose, transfer or destroy Confidential Information except as authorized by CGMH.

### **CONDITIONS OF PRIVACY PLEDGE**

I will not collect, create, use, modify, copy, disclose, transfer or destroy Confidential Information except to the extent required for the purpose of and in the course of my duties/services to CGMH and in accordance with any directions I receive from CGMH.

I will not collect, create, use, modify, copy, disclose, transfer or destroy Confidential Information for my personal use or the use of someone else or an organization other than CGMH, whether out of curiosity or concern and regardless of whether for financial gain.

I will not attempt to access any information about myself, my family members, friends, colleagues, or any other person whose information is not required to perform my duties to CGMH. When authorized, I will access this information through appropriate channels including completion of a Release of Information Form.

I will comply with all CGMH privacy and security-related policies and procedures made available to me.

I will inform my immediate supervisor/contact at CGMH of any situation that may affect my ability to do my work for CGMH objectively, that could be perceived to put me in a conflict of interest (between my duties for CGMH and personal or non-CGMH business interests) or may affect my ability to fulfill this Pledge.

I will not download or otherwise copy or remove from CGMH Confidential Information except in a manner and to the extent that I am authorized to do so and without limiting the generality of this obligation, I will not use any portable devices to transport or store Confidential Information unless encrypted.

I understand that keys, badges, electronic devices, and records provided or to which I am given access by CGMH are the property of CGMH and I will return them immediately on the termination of my relationship with CGMH or earlier at CGMH's request.

My user IDs and passwords (herein referred to as “Credentials”) used to access CGMH electronic record systems are the equivalent of my written signature and as such I will:

- be held responsible for all activity done under my Credentials
- not share my Credentials with anyone under any circumstances
- will log out of systems as required to prevent anyone else from using the systems under my Credentials
- immediately advise the Informatics and Technology department if I think that my Credentials have been compromised, so that they can deactivate them and issue me new Credentials.

I am responsible for data, including its accuracy, which I enter in any CGMH record and/or report.

I understand that CGMH will conduct random audits on access to, use, modification, disclosure and destruction of Confidential Information to monitor compliance with this Pledge, CGMH policies and procedures, and applicable law.

I will report to my immediate supervisor/CGMH contact, at the first reasonable opportunity, if I believe there may have been a breach of a Pledge, a CGMH privacy or security-related policy or procedure, or privacy law.

I understand that breach of this Pledge may be grounds for disciplinary action, up to and including termination of employment, privileges, affiliation and/or contract with CGMH, a report to my professional College, licensing body, educational institution (as applicable), the Information and Privacy Commissioner of Ontario (IPC) and/or the police, prosecution and/or civil action, as well as the disclosure of my identity to affected individual(s), including patient(s) and their representatives.

I understand that any changes to the Privacy/Confidentiality Policy and Pledge will be communicated and that I may request clarification and/or direction, at any time, if I do not fully understand the terms and conditions of this Pledge, any privacy or security-related policies or procedures, or whether I am authorized to collect, create, use, disclose, transfer or destroy Confidential Information.

I understand that I will be asked to renew my Pledge to CGMH annually and I understand and agree that my obligations under this Pledge continue after my relationship with CGMH has terminated.

I, (print name and position), \_\_\_\_\_, have read, been given the opportunity to as for clarification of, and understand the terms and conditions of this Privacy/Confidentiality Pledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

## Individual Assessment Form of French Language Oral Capability

### Levels

To be completed by each individual providing service within the hospital. *Please still complete the form if you have "no proficiency."*

Name: \_\_\_\_\_

Position: \_\_\_\_\_

Department: \_\_\_\_\_ Status: (circle one) Full-time Part-time Casual

*Please review the level description and check the level you feel best describes your ability to orally communicate in French.*

Level	Description	Ministry of Health Level of Proficiency Definition
No Proficiency <input type="checkbox"/>	No French capabilities	At this level one possesses no ability to work or communicate in French.
Elementary <input type="checkbox"/>	Very basic capability	At this level one has no real autonomy of expression. The ability to speak is limited to some memorized material on familiar topics related to work. One is able to verbalize isolated words, expressions of two or three words, and express simple, unconnected sentences. The range of vocabulary is limited and the delivery is slow and awkward. One can handle greetings, leave taking, and other expressions of courtesy. The limited vocabulary, the frequent errors, and slow delivery severely inhibit communication.
Intermediate <input type="checkbox"/>	Able to participate in simple conversation	At this level one possesses some ability to work in French. One shows some spontaneity in language production but the fluency is very uneven resulting in halting speech. One is able to participate in simple conversations on a one-to-one basis. The vocabulary is limited to that used in simple, non-technical, daily conversational usage. One can make and answer requests for information or directions give simple instructions and discuss simple needs. When addressing this person the speaker may have to slow down and repeat if he/she wishes to be understood.
Advanced <input type="checkbox"/>	Able to participate fully in all conversation	At this level one has the ability to participate in conversations and satisfy many work requirements. One can discuss work related matters with some ease and facility, expressing opinions and offering views. One is able to take part in a variety of verbal exchanges and to participate in meetings and discussion groups. However, one still needs to help with handling complications and difficulties. One is generally good in either grammar or vocabulary but not in both.
Superior <input type="checkbox"/>	Can communicate articulately in all social and professional situations	At this level one has the ability to speak the language with sufficient structural accuracy and vocabulary to participate effectively in most formal and informal conversations on practical, social and professional topics. One is able to give verbal presentations in both formal and informal settings. One masters some idioms and specific vocabulary relevant to a variety of contexts.

**Note: The information on this form is confidential to hospital only. Information will not be released with any reference to individual's name.**

## **Photo Consent & Release Form**

The purpose of this document is to confirm if Collingwood General and Marine Hospital and Collinwood General and Marine Hospital Foundation have permission to take, use, and release photos or videos of employees, physicians, and volunteers.

☐ Yes, I \_\_\_\_\_, hereby grant permission to the Collingwood General and Marine Hospital, the Collingwood General and Marine Hospital Foundation and/or their agents to take and use still pictures, video recordings and/or sound recordings of myself for the purpose of promotion, advertising, educational programs or presentations in mass communications media, or for other similar purposes which may be designated by the Collingwood General and Marine Hospital and the Collingwood General and Marine Hospital Foundation.

☐ No, I \_\_\_\_\_, do not grant permission to the Collingwood General and Marine Hospital and Collingwood General and Marine Hospital Foundation to use still pictures, video recordings and/or sound recordings of myself for any purpose.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date



# Employment Standards in Ontario

The *Employment Standards Act, 2000* (ESA) protects employees and sets minimum standards for most workplaces in Ontario. **Employers are prohibited from penalizing employees in any way for exercising their rights under the ESA.**

## What you need to know

### Public holidays

Ontario has a number of public holidays each year. Most employees are entitled to take these days off work and be paid public holiday pay. Visit [Ontario.ca/publicholidays](https://ontario.ca/publicholidays).

### Hours of work and overtime

There are daily and weekly limits on hours of work. There are also rules around meal breaks, rest periods and overtime. Visit [Ontario.ca/hoursofwork](https://ontario.ca/hoursofwork) and [Ontario.ca/overtime](https://ontario.ca/overtime).

### Termination notice and pay

In most cases when terminating employment, employers must give employees advance written notice of termination or termination pay instead of notice. Visit [Ontario.ca/terminationofemployment](https://ontario.ca/terminationofemployment).

### Vacation time and pay

There are rules around the amount of vacation time and pay employees earn. Most employees can take vacation time after every 12 months of work. Visit [Ontario.ca/vacation](https://ontario.ca/vacation).

### Leaves of absence

There are a number of job-protected leaves of absence in Ontario. Examples include sick leave, pregnancy leave, parental leave and family caregiver leave. Visit [Ontario.ca/ESAguide](https://ontario.ca/ESAguide).

### Minimum wage

Most employees are entitled to be paid at least the minimum wage. For current rates visit [Ontario.ca/minimumwage](https://ontario.ca/minimumwage).

### Other employment rights, exemptions and special rules

There are other rights, exemptions and special rules not listed on this poster, including rights to severance pay and special rules for assignment employees of temporary help agencies.

Subscribe to our newsletter and stay up to date on the latest news that can affect you and your workplace. Visit [Ontario.ca/labournews](https://ontario.ca/labournews).

Learn more about your rights at:

**[Ontario.ca/employmentstandards](https://ontario.ca/employmentstandards)**  
**1-800-531-5551 or TTY 1-866-567-8893**

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