ONTARIO VOLLEYBALL ASSOCIATION (OVA)
SCREENING POLICY

This is a Pan-Canadian Policy applicable to Volleyball Canada and the Provincial/Territorial Associations.

Definitions
1. The following terms have these meanings in this policy:
   a) “Board” – The Board of Directors of Volleyball Canada or a Provincial/Territorial Association, as applicable
   b) "Contractors” – Persons contracted with Volleyball Canada and/or a Provincial/Territorial Association, such as an integrated support team member.
   c) “Criminal Record Check (CRC)” – A search of the RCMP Canadian Police Information Centre (CPIC) system for adult convictions
   d) “Enhanced Police Information Check (E-PIC)” – a criminal record check plus a search of local police information, available from Sterling Backcheck or BackCheck (myBackCheck.com)
   e) "Individuals” - refers to all categories of members and/or registrants defined in the Bylaws of Volleyball Canada and in the Bylaws of a Provincial/Territorial Association as well as all people employed by, contracted by, or engaged in activities with, Volleyball Canada or a Provincial/Territorial Association including, but not limited to, employees, contractors, athletes, volleyball clubs, coaches, mission staff, referees, volunteers, managers, administrators, committee members, parents or guardians, spectators, and directors and officers
   f) “Local Police Information (LPI)” – additional conviction and selected non-conviction information in national and local police data sources which may be relevant to the position sought
   g) “Minors” – Persons under the age of majority.
   h) “Organization” – Volleyball Canada and/or Provincial and Territorial Associations
   i) “Provincial/Territorial Associations” – the provincial/territorial member governing bodies for volleyball in each province/territory
   j) “Vulnerable Individuals” – A person under the age of 18 years old and/or a person who, because of age, disability or other circumstance, is in a position of dependence on others or is otherwise at a greater risk than the general population of being harmed by people in positions of trust or authority
   k) “Vulnerable Sector Check (VSC)” – a detailed check that includes a search of the RCMP Information Centre (CPIC) system, local police information, and the Pardoned Sex Offender database.

Purpose
2. The purpose of this policy is to provide screening procedures for Volleyball Canada and the Provincial/Territorial Associations.
Application
3. This policy applies to all Individuals whose position with Volleyball Canada or a Provincial/Territorial Association is one of trust or authority which may relate to, at a minimum, finances, supervision, or Vulnerable Individuals.

4. Volleyball Canada and Provincial/Territorial Associations believe that screening Individuals cannot be a stand-alone practice but is a vital part of supporting a safe sporting environment for participants.

Provisions
5. Not all individuals associated with Volleyball Canada or a Provincial/Territorial Association will be required to obtain a criminal record check or submit screening documents. Volleyball Canada, and/or a Provincial/Territorial Association will determine which individuals will be subject to screening using the following guidelines. Each organization may vary the guidelines at its discretion:

*Low Risk* - Individuals involved in low risk assignments who are not in a supervisory role, not directing others, not involved with finances, and/or do not have unsupervised access to Vulnerable Individuals. Examples:
   a) Parents, youth, or volunteers who are helping on a non-regular or informal basis
   b) Non-coach employees or managers who do not travel with athletes

*High Risk* – Individuals involved in high-risk assignments who occupy positions of trust and/or authority, have a supervisory role, direct others, are involved with finances, and who have frequent or unsupervised access to Vulnerable Individuals. Examples:
   a) Athlete support personnel
   b) Full-time coaches and/or assistant coaches
   c) Coaches and/or contractors who travel with athletes
   d) Coaches and/or representatives who could be alone with athletes
   e) Referees
   f) Staff and/or directors and supervisors

6. Volleyball Canada and/or the Provincial/Territorial Associations may decide that an Individual’s prior E-PIC is acceptable. In such cases, an Individual must share a copy of the E-PIC with the Screening Committee. If an Individual is not able to produce the E-PIC, the Screening Committee may request the Individual undergo a new E-PIC.

Screening Committee
7. A Screening Committee (composed of one to three persons appointed by the administrative head of the Organization) is responsible for the implementation of this policy. Volleyball Canada and Provincial/Territorial Associations will ensure that the person(s) appointed to their respective Screening Committees possess the requisite skills, knowledge and abilities to implement this policy.
8. Screening Committee members may be staff members of Volleyball Canada or a Provincial/Territorial Association.

9. The Screening Committee will carry out its duties, in accordance with the terms of this policy. Should the Screening Committee be composed of staff members, the staff members may discuss screening issues with the Chief Executive Officer / Executive Director and/or a designated individual.

10. The Screening Committee will review all documents submitted and, based on the review, make decisions regarding the appropriateness of Individuals filling positions within Volleyball Canada or a Provincial/Territorial Association, as applicable. In carrying out its duties, the Screening Committee may consult with independent experts including lawyers, police, risk management consultants, volunteer screening specialists, or any other person.

11. Nothing in this policy restricts or limits the Screening Committee from requesting that the individual attend an interview with the Screening Committee if the Screening Committee considers that an interview is appropriate and necessary to screen the individual’s application.

12. Nothing in this policy restricts or limits the Screening Committee from requesting the individual’s authorization to contact any professional, sporting or other organization in order to assess the suitability for the position that they are seeking.

13. Nothing in this policy restricts or limits the Screening Committee from requesting further information from the Individual on more than one occasion, subject to the individual’s right to insist that the Screening Committee make a decision on the basis of the information before it.

14. An individual having been previously penalized for a prior offence shall not prevent the Screening Committee from considering that offence as part of the individual’s screening application.

15. An Individual whose screening application has been denied or revoked may not re-apply to participate in the organization’s programs or activities for two (2) years from the date the rejected application was made.
Screening Requirements

16. When an Individual is first engaged by Volleyball Canada or by a Provincial/Territorial Association, as applicable, they must submit the following requirements (which may be varied at the sole discretion of the Screening Committee):

   a) Low Risk Individuals:
      i. Complete an Application Form (Appendix A)
      ii. Complete a Screening Disclosure Form (Appendix B)
      iii. Participate in training, orientation, and monitoring as determined by the Organization

   b) High Risk Individuals:
      i. Complete an Application Form (Appendix A)
      ii. Complete a Screening Disclosure Form (Appendix B)
      iii. Complete and provide an E-PIC
      iv. Complete and provide a VSC, if requested by Volleyball Canada and/or a Provincial/Territorial Association
      v. Participate in training, orientation, and monitoring as determined by the Organization
      vi. Provide a driver’s abstract, if requested

   c) If an individual subsequently receives a charge, conviction for, or is found guilty of, an offense they will report this circumstance immediately to Volleyball Canada or to the Provincial/Territorial Association, as applicable. Individuals must also inform the Organization of any changes in their circumstance that would alter their original responses in their screening disclosure form.

   d) If Volleyball Canada or a Provincial/Territorial Association learns that an individual has provided false, inaccurate, or misleading information, the individual will immediately be removed from their position and may be subject to further discipline in accordance with the Discipline and Complaints Policy.

Minors

17. Volleyball Canada and Provincial/Territorial Associations will not require Minors to obtain a VSC or E-PIC.

18. Notwithstanding the above, Volleyball Canada or a Provincial/Territorial Association may ask a Minor to obtain a VSC or E-PIC if the Organization suspects the minor has an adult conviction and therefore has a criminal record. In these circumstances, the Organization will be clear in its request that it is not asking for the minor’s youth record. Volleyball Canada and the Provincial/Territorial Associations understand that they may not request to see a minor’s record.
Renewal

19. Unless the Screening Committee determines, on a case-by-case basis, to modify the submission requirements, Individuals who are required to submit an E-PIC, Screening Disclosure Form, VSC, or Screening Renewal Form, are required to submit the documents as follows:
   a) An E-PIC every three years
   b) A Screening Disclosure Form every three years
   c) A Screening Renewal Form (Appendix C) every year
   d) A Vulnerable Sector Check once

20. Volleyball Canada and/or a Provincial/Territorial Association may request that an Individual provide any of the above documents at any time. Such request will be in writing and reasons will be provided for the request.

Orientation, Training, and Monitoring

21. Volleyball Canada or a Provincial/Territorial Association, as applicable. In their sole discretion, will determine the type and amount of orientation, training, and monitoring based on the Individual’s level of risk.

22. Orientation may include, but is not limited to introductory presentations, facility tours, equipment demonstrations, parent/athlete meetings, meetings with colleagues and supervisors, orientation manuals, orientation sessions, and increased supervision during initial tasks or initial period of engagement.

23. Training may include, but is not limited to certification courses, online learning, mentoring, workshop sessions, webinars, on-site demonstrations, and peer feedback.

24. Volleyball Canada, and the Provincial/Territorial Associations as applicable, may, at the conclusion of orientation and training, require the Individual to acknowledge in writing, that they have received and completed the orientation and training.

25. Monitoring may include but is not limited to: written or oral reports, observations, tracking, electronic surveillance (e.g., facility security cameras), and site visits.

26. An Individual who refuses or fails to provide the necessary screening documents will be ineligible to volunteer or apply for the position sought. The Individual will be informed that their application and/or position will not proceed until such time as the screening documents are submitted.

27. Volleyball Canada and Provincial/Territorial Associations understand that there may be delays in receiving the results of an E-PIC or a VSC. At its discretion, the Screening Committee may permit the Individual to participate in the role during the delay. This permission may be withdrawn at any time and for any reason.
28. Following the review of the screening documents, the Screening Committee will decide:
   a) The Individual has passed screening and may participate in the desired position;
   b) The Individual has passed screening and may participate in the desired position with conditions;
   c) The Individual has not passed screening and may not participate in the desired position;
   or
   d) More information is required from the Individual.

29. In making its decision, the Screening Committee will, if any convictions are disclosed, consider the type of offense, date of offense, and relevance of the offense to the position sought.

30. If the screening documentation reveals any of the following convictions, the Screening Committee will determine the Individual has not passed screening (unless an exception is made by the Screening Committee, in its sole discretion, and its detailed reasons are provided to the Chief Executive Officer / Executive Director:
   a) If imposed in the last three years:
      i. Any individual’s conviction for an offence involving the use of a motor vehicle, including but not limited to impaired driving
      ii. Any individual’s conviction for an offence of possession of cannabis
   b) If imposed in the last ten years:
      i. Any individual’s conviction involving theft or fraud
      ii. Any Individual’s conviction for an offence of possession of illegal drugs
   c) If imposed at any time:
      i. An individual’s conviction for any of the following Criminal Code offenses:
         a. physical or psychological violence
         b. crime of violence including but not limited to, all forms of assault
         c. trafficking of illegal drugs and/or performance enhancing drugs
         d. possession, distribution, or sale of any child-related pornography
         e. sexual misconduct

Conditions and Monitoring
31. The Screening Committee may determine that incidents revealed on an Individual’s screening documents may allow the Individual to pass the screening process and participate in a desired position with conditions imposed. The Screening Committee may apply and remove conditions at its discretion and will determine the means by which adherence to conditions may be monitored.

Records
32. All records will be maintained in a confidential manner as applicable and will not be disclosed to others who are not members of the Screening Committee except as required by law, for use in legal, quasi-legal, or disciplinary proceedings.
33. The records kept as part of the screening process include but are not limited to:
   a) An Individual’s Vulnerable Sector Check
   b) An Individual’s E-PIC (for a period of three years)
   c) An Individual’s Screening Disclosure Form (for a period of three years)
   d) An Individual’s Screening Renewal Form (for a period of one year)
   e) Records of any conditions attached to an Individual’s registration by the Screening Committee
   f) Records of any discipline applied to any Individual by Volleyball Canada, a Provincial/Territorial Association, or another sport organization

Communication
34. Volleyball Canada and the Provincial/Territorial Associations will identify those persons within their respective organizations who will be responsible for implementing this policy.

Review and Amendment
35. All significant amendments to this policy will be submitted to Volleyball Canada for review by its ad hoc committee on policies.

36. This policy will be reviewed every two years. Any significant policy amendments will be approved by the Volleyball Canada and the Provincial/Territorial Associations.

Approval
37. This policy was approved by Volleyball Canada and its Board of Directors on October 13, 2020.
38. This policy was approved by the OVA and its Board of Directors on April 15, 2021.
Appendix A – Application Form

Note: Individuals who are applying to volunteer or work within certain positions with Volleyball Canada or a Provincial/Territorial Association must complete this Application Form. Individuals need to complete an Application Form once for the position sought. If the individual is applying for a new position within Volleyball Canada or within a Provincial/Territorial Association, a new Application Form must be submitted.

NAME:
______________________________________________________________________________
First                      Middle                      Last

CURRENT PERMANENT ADDRESS:
______________________________________________________________________________
Street                     City                        Province                      Postal

DATE OF BIRTH: _______________ GENDER IDENTITY: _______________
Month/Day/Year

EMAIL: _________________________ PHONE: _________________________

POSITION SOUGHT: _________________________________________________________

By signing this document below, I agree to adhere to the policies and procedures of Volleyball Canada or a Provincial/Territorial Association (as applicable), including but not limited to the Code of Conduct and Ethics, Conflict of Interest Policy, Privacy Policy, and Screening Policy. Policies are located at the following links: Policies (ontariovolleyball.org) https://volleyball.ca/en/about/governance/policies

I recognize that I must pass certain screening requirements depending on the position sought, as outlined in the Screening Policy, and that the Screening Committee will determine my eligibility to volunteer or work in the position.

NAME (print): _________________________ DATE: _________________________

SIGNATURE: _________________________
Appendix B – Screening Disclosure Form

NAME:

____________________________________________________________________________
First                     Middle                     Last

OTHER NAMES YOU HAVE USED: ____________________________________________________

CURRENT PERMANENT ADDRESS:

____________________________________________________________________________
Street                    City                        Province                       Postal

DATE OF BIRTH: _______________ GENDER IDENTITY: ________________________________
Month/Day/Year

CLUB (if applicable): _______________ EMAIL: _________________________________

Note: Failure to disclose truthful information below may be considered an intentional omission
and the loss of volunteer responsibilities or other privileges

1. Have you been convicted of a crime? If so, please complete the following information for
each conviction. Attach additional pages as necessary.

Name or type of offense: ______________________________________________________

Name and Jurisdiction of Court/Tribunal: __________________________________________

Year convicted: _______________ Penalty or punishment imposed: __________________

Further explanation: ____________________________________________________________

2. Have you ever been charged with a crime? If so, please complete the following
information for each conviction. Attach additional pages as necessary.

Name or type of offense: ______________________________________________________

Name and Jurisdiction of Court/Tribunal: __________________________________________

Year charged: _______________ Penalty or punishment imposed: __________________

Further explanation: ____________________________________________________________
3. Are your currently or have you ever been the subject of a criminal investigation or criminal proceedings that has not been resolved? If so, please complete the following information for each incidence. Attach additional pages as necessary.

Name/type of offense or investigation: ____________________________________________

Name and Jurisdiction of Court/Tribunal: __________________________________________

Year investigation or proceeding commenced: _________________________________

Status of investigation or proceeding: _________________________________________

Further explanation: _________________________________________________________

4. Do you have any non-criminal convictions under any statute (including offences involving the use of a motor vehicle)? If so, please complete the following information for each conviction. Attach additional pages as necessary.

Name or type of offense: _________________________________________________________

Name and Jurisdiction of Court/Tribunal: _________________________________________

Year convicted: __________________________________________________________________

Penalty or punishment imposed: ________________________________________________

Further explanation: _________________________________________________________

5. Have you ever been a respondent in a harassment or human rights complaint in any forum? If so, please complete the following information for each incidence. Attach additional pages as necessary.

Name and Jurisdiction of Court/Tribunal: _________________________________________

Year proceeding commenced: __________________________________________________________________

Status of proceeding: _________________________________________________________

Penalty or punishment imposed: ________________________________________________

Further explanation: _________________________________________________________
6. Have you ever been subject to a penalty imposed by a court, administrative tribunal or regulatory body? If so, please complete the following information for each incidence. Attach additional page(s) as necessary.

Name and Jurisdiction of Court/Tribunal: _____________________________

Year proceeding commenced: _____________________________

Status of proceeding: _____________________________

Penalty or punishment imposed: _____________________________

Further explanation: _____________________________

7. Have you ever been the subject of an investigation, disciplined, sanctioned or dismissed from a coaching, teaching or volunteer position, by a sport governing body or its member club, or by an independent body (e.g., private tribunal, government agency, school board etc.)? If so, please complete the following information for each pending charge, sanction or dismissal. Attach additional page(s) as necessary.

Name of disciplining or sanctioning body: _____________________________

Date of investigation, discipline, sanction or dismissal: _____________________________

Reasons for investigation, discipline, sanction or dismissal: _____________________________

Penalty or punishment imposed: _____________________________

Further explanation: _____________________________

8. Have you ever been refused admission/membership or renewal of membership to any professional organization or sporting organization?

Name of organization: _____________________________

Date refused admission or membership renewal: _____________________________

Reasons given for refusal: _____________________________

Further explanation: _____________________________
9. Have you ever faced allegations of misconduct by any professional organization or sporting organization?

Name of organization: _____________________________________________________________

Date of Allegations: ______________________________________________________________

Nature of Allegations: ____________________________________________________________

Status or Outcome of Investigation/Proceeding: ______________________________________

Penalty or Punishment Imposed (if any): _____________________________________________

Further explanation: ______________________________________________________________

10. Have you ever been suspended, disqualified, censured or otherwise disciplined as a member of any professional organization or sporting organization?

Name of Organization: _____________________________________________________________

Nature of Offence: _________________________________________________________________

Penalty or Punishment Imposed: ____________________________________________________

Further explanation: ______________________________________________________________

11. Are criminal charges or any other sanctions, including those from a sport organization (body), private tribunal, professional organization or government agency, currently pending or threatened against you? If so, please complete the following information for each pending charge or sanction. Attach additional page(s) as necessary.

Name of Organization/Sanctioning Body: _____________________________________________

Name or type of offense: ___________________________________________________________

Penalty/Sanction or Punishment: ___________________________________________________

Year: ___________________________________________________________________________

Further explanation: __________________________________________________________________
12. Are there any other matters in your past or present circumstances that may place your character or suitability for OVA/Volleyball Canada positions at issue?

Yes/No: ___________________________________________________

Further explanation: ___________________________________________________

PRIVACY STATEMENT

By completing and submitting this Screening Disclosure Form, I consent and authorize Volleyball Canada and/or a Provincial/Territorial Association to collect, use and disclose my personal information, including all information provided on the Screening Disclosure Form as well as my Enhanced Police Information Check and/or Vulnerable Sector Check (when permitted by law) for the purposes of screening, implementation of the Screening Policy, administering membership services, and communicating with National Sport Organizations, Provincial/Territorial Sport Organizations, and other organizations involved in the governance of sport. Volleyball Canada and the Provincial/Territorial Associations do not distribute personal information for commercial purposes.

CERTIFICATION

I hereby certify that the information contained in this Screening Disclosure Form is accurate, correct, truthful and complete.

I further certify that I will immediately inform Volleyball Canada or a Provincial/Territorial Association (as applicable) of any changes in circumstances that would alter my original responses to this Screening Disclosure Form. Failure to do so may result in the withdrawal of volunteer responsibilities or other privileges and/or disciplinary action.

NAME (print): ___________________________ DATE: ___________________________

SIGNATURE: ___________________________
Appendix C – Screening Renewal Form

NAME: ____________________________

First: ____________________________ Middle: ____________________________ Last: ____________________________

CURRENT PERMANENT ADDRESS: ____________________________

Street: ____________________________ City: ____________________________ Province: ____________________________ Postal: ____________________________

DATE OF BIRTH: ____________________________

Month/Day/Year

GENDER Identity: ____________________________

EMAIL: ____________________________

PHONE: ____________________________

By signing this document below, I certify that there have been no changes to my criminal record since I last submitted an Enhanced Police Information Check and/or Vulnerable Sector Check and/or Screening Disclosure Form to Volleyball Canada or to a Provincial/Territorial Association. I further certify that there are no outstanding charges and warrants, judicial orders, peace bonds, probation or prohibition orders, or applicable non-conviction information, and there have been no absolute and conditional discharges.

I agree that any Enhanced Police Information Check and/or Vulnerable Sector Check and/or Screening Disclosure Form that I would obtain or submit on the date indicated below would be no different than the last Enhanced Police Information Check and/or Vulnerable Sector Check and/or Screening Disclosure Form that I submitted to Volleyball Canada or my Provincial/Territorial Association. I understand that if there have been any changes, or if I suspect that there have been any changes, it is my responsibility to obtain and submit a new Enhanced Police Information Check and/or Vulnerable Sector Check and/or Screening Disclosure Form to the Screening Committee instead of this form.

I recognize that if there have been changes to the results available from the Enhanced Police Information Check and/or Vulnerable Sector Check and/or Screening Disclosure Form, and that if I submit this form improperly, then I am subject to disciplinary action and/or the removal of volunteer responsibilities or other privileges at the discretion of the Screening Committee.

NAME (print): ____________________________ DATE: ____________________________

SIGNATURE: ____________________________
Appendix D – Request For Vulnerable Sector Check

Note: Volleyball Canada and Provincial/Territorial Associations will be required to modify this letter to adhere to any requirements from the VSC provider

INTRODUCTION

Volleyball Canada is requesting a Vulnerable Sector Check for _____________ [insert individual’s full name] who identifies as a _____________ [insert gender identity] and who was born on ______________ [insert birthdate].

DESCRIPTION OF ORGANIZATION

Volleyball Canada is a not-for-profit and the national governing body for the sport of volleyball located in Canada.

DESCRIPTION OF ROLE

_____________ [insert individual’s name] will be acting as a _____________ [insert individual’s role]. In this role, the individual will have access to vulnerable individuals.

CONTACT INFORMATION

If more information is required from Volleyball Canada please contact the Screening Committee Chair:

Caroline Sharp
Director-Sport Safety
Phone: 613-748-5681
Email: csharp@volleyball.ca

Signed: ____________________________  Date: ____________________________