	<b>Workplace Abuse and Harassment</b>	<b>Corporate Policy &amp; Procedures Manual</b>
		<b>Policy No.</b> II-145
		<b>Date Approved</b> August 21, 2017
<b>Approved by:</b>  President and Chief Executive Officer	<b>Date Effective</b> September 15, 2017 <i>Updated March 8, 2019</i>	
	<b>Next Review</b> September 2020	

**Purpose**

- To enhance awareness of the rights and responsibilities of Covenant Health staff, members of the medical staff, volunteers, students, and to any other person acting on behalf of Covenant Health (hereafter referred to as “personnel”) who are subjected to, or who become aware of, workplace abuse or harassment. (hereafter referred to as “WAH”).
- To set out processes for response when personnel are victims of abuse – including reporting, investigating, documentation and follow-up action.
- To raise awareness of proper codes of conduct for personnel when dealing with WAH.

For incidents involving abuse of Patients/Residents, refer to Covenant Health Corporate Policy/Procedure #III-75, *Abuse of Patients, Residents or Clients*.

**Policy Statement**

Covenant Health is committed to supporting an abuse and harassment free work environment that promotes a culture of trust, dignity, and respect. Any act of abuse or harassment committed by or against any staff, physicians, students, volunteers, and all who enter our facility is unacceptable conduct and will not be tolerated.

Covenant Health will investigate all reported incidents of WAH in an objective, timely and sensitive manner. No action shall be taken against an individual for making a complaint unless the complaint is made maliciously or without reasonable and probable grounds. This policy is not intended to discourage a worker from exercising their rights.

**Applicability**

This policy applies to incidents of abuse or harassment involving Covenant Health staff, members of the medical staff, volunteers, students, and to any other personnel acting on behalf of Covenant Health.

**Responsibility**

Covenant Health leaders shall demonstrate commitment to an abuse-free work environment by ensuring appropriate support, response processes, and other resources, including education/training and hazard assessments, are in place to ensure the safety, wellbeing and respect in the workplace.

The Occupational Health and Safety (OHS) department is responsible for the implementation and monitoring of this policy, risk assessment processes, and education components. OHS shall review these elements annually or sooner if required.

Covenant Health managers shall demonstrate compliance by ensuring that personnel receive education/training as appropriate for their position (relative to the potential of

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risk) and all reported incidents of abuse are investigated and appropriate action is taken.

All Covenant Health personnel shall demonstrate compliance with this policy/procedure by reporting instances of workplace abuse or harassment they are subjected to or they become aware of. Covenant Health will not accept inaction when possible WAH has occurred.

## Principles

In keeping with Covenant Health's Code of Conduct – "*Our Commitment to Ethical Integrity*", our organization encourages personnel to work through conflict directly with one another in a respectful manner; seeking to resolve and diffuse conflict at the appropriate level.

Workplace abuse or harassment in any form erodes the mutual trust and confidence that are essential to Covenant Health's mission, vision and values. Disrespectful workplace behaviours and attitudes are unacceptable.

Covenant Health is committed to:

- Investigating reported incidents of workplace abuse and harassment in a prompt, objective and sensitive manner;
- Taking necessary corrective action;
- Providing appropriate support for victims;
- Reducing incidents of workplace abuse and harassment by providing personnel with education/ training to address abuse as well as encourage the reporting of incidents; and
- Achieving a zero-harm work environment.

Covenant Health encourages the reporting of all incidents of workplace abuse or harassment as soon as possible, as delays in reporting and investigating may diminish the action that can be taken.

Complaints will be reviewed in the context of social norms and what most people would perceive as conduct detrimental to work relationships. Prevention management, intervention and follow-up will be determined. Outcomes may range from letters of expectation and mandatory education and training to disciplinary action, dismissal, or withdrawal of privileges, removal from the premises, and reporting to local law enforcement.

## Hazard Assessment

Since workplace abuse and harassment has been identified as a hazard in positions within Covenant Health, the hazard assessment process plays a key role in determining how best to control for this risk. This document will identify training and education requirements pertaining to the position and ensure the appropriate hazard controls are implemented.

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## Education & Training

Based on the risks associated with the position, Covenant Health education and training module(s) will focus on:

- Instructing workers on how to recognize WAH
- Teaching appropriate responses to WAH
- Ensuring that individuals know how to report incidents of WAH
- Communicating the organization's policy and procedures related to WAH.

## Procedure

**In instances of violence/aggression follow the site Code White or Code Purple emergency response procedure. Also follow your site's process for alerting staff members of potentially violent or abusive individuals.**

### 1. Reporting an Incident of Abuse or Harassment:

- 1.1 A person who is the subject of workplace abuse or harassment must tell the offender(s) what the offender(s) is doing is offensive, and ask them to stop. If this is not practical, or he/she needs support or advice before talking to the offender(s), he/she may choose to talk to his/her manager, union representative, Human Resources Client Partnerships (HRCP) (includes HR Operations and OHS), Protective Services, or the Employee and Family Assistance Program.
- 1.2 Managers shall intervene immediately when informed of an incident of workplace abuse or harassment. Personnel are encouraged to work with their manager however they are free to voice concerns regarding workplace abuse or harassment to any level of management.
- 1.3 The manager/delegate may conduct a preliminary review of the allegation to determine if:
  - The parties have attempted to resolve the issue directly with each other;
  - A mutually agreeable resolution between the complainant and respondent is possible; or
  - Reasonable grounds exist to continue with a formal investigation and, if so, consults with HRCP to develop an investigation plan.
- 1.4 Workplace abuse or harassment complaints related to physicians shall be reported to the Vice President and Chief Medical Officer for investigation and response.
- 1.5 In addition to reporting an incident of WAH the complainant may also:
  - Report to their manager to seek access to organizational support and assistance;
  - Report the incident to Protective Services;
  - Report the incident and receive assistance from a respective union or professional body;

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- File a complaint with the Alberta Human Rights; and/or
- Report the incident to the police.

1.6 If applicable, the complainant shall call the Incident Reporting and Information Line at 780.342.8070 or 1.855.342.8070 to report the workplace abuse or harassment.

## **2.0 Investigating an Incident of Abuse or Harassment**

- 2.1** Investigations shall begin within 72 hours (exclusive of Saturday, Sunday, and statutory holidays) from the time a written complaint is received from the complainant. The alleged offender should be notified of the complaint as soon as practicably possible.
- 2.2** The manager(s) or site leader, in consultation with Human Resources Client Partnerships (HRCP), shall investigate the incident. They are responsible for formally investigating the incident and making recommendations for resolution. The manager and HRCP will involve union representatives in accordance with the collective agreements.
- 2.3** Covenant Health reserves the right to employ external authorities (eg. professional bodies, law enforcement) to conduct a concurrent investigation. The outcome of the investigations may differ.
- 2.4** The documented findings and recommendations of the Investigator shall be acted upon in a timely manner.
- 2.5** Covenant Health shall cooperate with investigations and mediations conducted by external agencies to the extent required by law.

## **3. Debriefing and Support**

- 3.1 The following support/debriefing resources are available to personnel (either directly or through their manager/lead):
- Employee and Family Assistance Program Homewood Health-. 1.800.663.1142 / [www.homewoodhealth.com](http://www.homewoodhealth.com)
  - Critical Incident Stress Management team (call the switchboard @ 780-735-9000 and have the operator page the on-call Critical Incident Stress Management member)
  - Physician support available from the Alberta Medical Association Physician & Family Support Program (1-877-767-4637)
  - Site based Spiritual Care (call site switchboard to access).

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#### **4. Outcome**

- 4.1 Covenant Health shall initiate appropriate measures to ensure the termination of abusive action. This may include but is not limited to:
- letters of expectation
  - mandatory training and education
  - mediation
  - termination of employment contract.
- 4.2 Human Resources Client Partnership representative will ensure that all personnel involved in the incident are informed in writing about the conclusion of the workplace abuse or harassment investigation and confirmation that appropriate action has been taken.
- 4.3 A complainant or a respondent who is not satisfied with the outcome of the investigation may go to a member of Senior Management or consult with their union representative.

#### **5. False Reports**

- 5.1 Documentation of an allegation of workplace abuse or harassment, determined to be filed in bad faith will be treated in the same manner as an abusive situation and have the same investigation, follow-up and appropriate discipline actions deemed necessary.

#### **6. Confidentiality**

- 6.1 All reasonable efforts shall be made to ensure that any allegation made pursuant to this policy is kept confidential except:
- Where disclosing such information helps to ensure the personal safety of any individual;
  - To the extent necessary to investigate or respond to any legal or administrative proceedings; or
  - Where disclosing such information is required under law.
- 6.2 All personnel involved in the investigation process shall maintain the confidentiality of such information except where required to provide information for a review or investigation.
- 6.3 Human Resources Client Partnerships, manager(s), and investigator(s) shall ensure that all records related to an incident of workplace abuse or harassment (including notes of meetings, interviews, and other relevant materials) are protected in accordance with applicable Covenant Health policy/procedure and/or applicable legislation.

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## Definitions

For the purpose of this policy/procedure:

**Abuse** is a single or series of incidents occurring in the workplace that is known, or reasonably ought to be known, to be unwelcomed causing unnecessary psychological, emotional and/or physical harm.

Including but not limited to:

- Physical conduct (non consensual contact or advance, violence, physical contact, sexual contact, wanton property damage)
- Verbal or written threats (yelling, defamatory statements, spreading rumors)
- Bullying (physical or psychological)
- Behaviours that create a hostile work place (interference or sabotaging behaviours)
- Humiliation, intimidation or coercion
- Aggression and hostile behaviours (gesturing, blocking, fist shaking)

Classifications of Abuse:

Type I (Criminal Intent) - committed by a perpetrator who has no relationship to the workplace.

Type II (Client) - the perpetrator is a client at the workplace who becomes violent towards personnel or another client.

Type III (Worker to Worker) - the perpetrator is an employee or past employee of the workplace.

Type IV (Personal Relationship) - the perpetrator usually has a relationship with an employee (eg. domestic violence).

**Complainant/victim** means the person who has allegedly been abused/harassed.

**Harassment** is a repeated pattern of behaviour intended to or reasonably likely to intimidate, offend, degrade or humiliate a particular person or group. Harassment is inappropriate, unwelcome or coercive behaviour in the workplace based on one or more of the grounds which occurs by one individual towards another, where the behaviour is known, or reasonably ought to be known, to be unwanted or unwelcome. Harassment may be a single or series of incidents and may take verbal, written, graphic or physical forms (inclusive of cyber contact).

**Discrimination** is a form of harassment and is prohibited under the *Human Rights Act* based on the followings grounds: race, religious belief, colour, gender, physical or mental disability, body size and weight, age, ancestry, place of origin, marital status, source of income, family status, gender identity, gender expression, or sexual orientation.

NOTE: Abuse/Harassment does not refer to supervisory personnel exercising legitimate authority as part of a responsibility for performance management such as, but not limited to: performance evaluations based on work performance; imposition of appropriate discipline; a request or directive to do something that a reasonable person would consider as relevant to a job function; or denial of request for time off.

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**Investigator** means the individual appointed to lead the investigation, determine the findings and recommend outcomes. Normally an investigator will be a Covenant Health leader, however, may also be an external appointment.

**Manager** means a personnel member's immediate supervisor, manager, director, executive director or designate. Where the manager is the respondent in an allegation of workplace abuse or harassment, 'manager' shall mean the next higher position in the respective department.

**Personnel/person/group** includes Covenant Health staff, physicians, volunteers, students, and any other persons acting on behalf of Covenant Health.

**Respondent** means the person who is the alleged abuser.

**Worksite/workplace** includes any location where personnel are engaged in business and/or acting on behalf of Covenant Health.

## Related Documents / Resources

Appendix 1 – Reporting Abuse – Flowchart  
Appendix 2 – Roles of the Participants  
Abuse Investigation Checklist (resource for personnel)

Covenant Health's Code of Conduct – *Our Commitment to Ethical Integrity* @ [https://www.compassionnet.ca/AboutUs/2015\\_June5\\_About-MES-CommitmentToEthicalIntegrity.pdf](https://www.compassionnet.ca/AboutUs/2015_June5_About-MES-CommitmentToEthicalIntegrity.pdf)

Covenant Health Policies & Procedures @ <http://www.compassionnet.ca/Page2099.aspx>

- *Building a Just Culture*, #III-35
- *Health and Safety Policy*, #II-130

Site-specific - Code White and Code Purple

Employee Family Assistance Program – Homewood Health  
[www.homewoodhealth.com](http://www.homewoodhealth.com)

## References

Occupational Health and Safety Code 2016

AHS "Workplace Abuse and Harassment Policy and Appendix" – June 24, 2009

College and Association of Registered Nurses of Alberta. Nursing Practice Standards. Effective November 30, 2005. With "The Canadian Nurses Association Code of Ethics for Registered Nurses (2008). Printed from internet April 23, 2012 - [http://www.nurses.ab.ca/Carna-Admin/Uploads/new\\_nps\\_with\\_ethics.pdf](http://www.nurses.ab.ca/Carna-Admin/Uploads/new_nps_with_ethics.pdf)

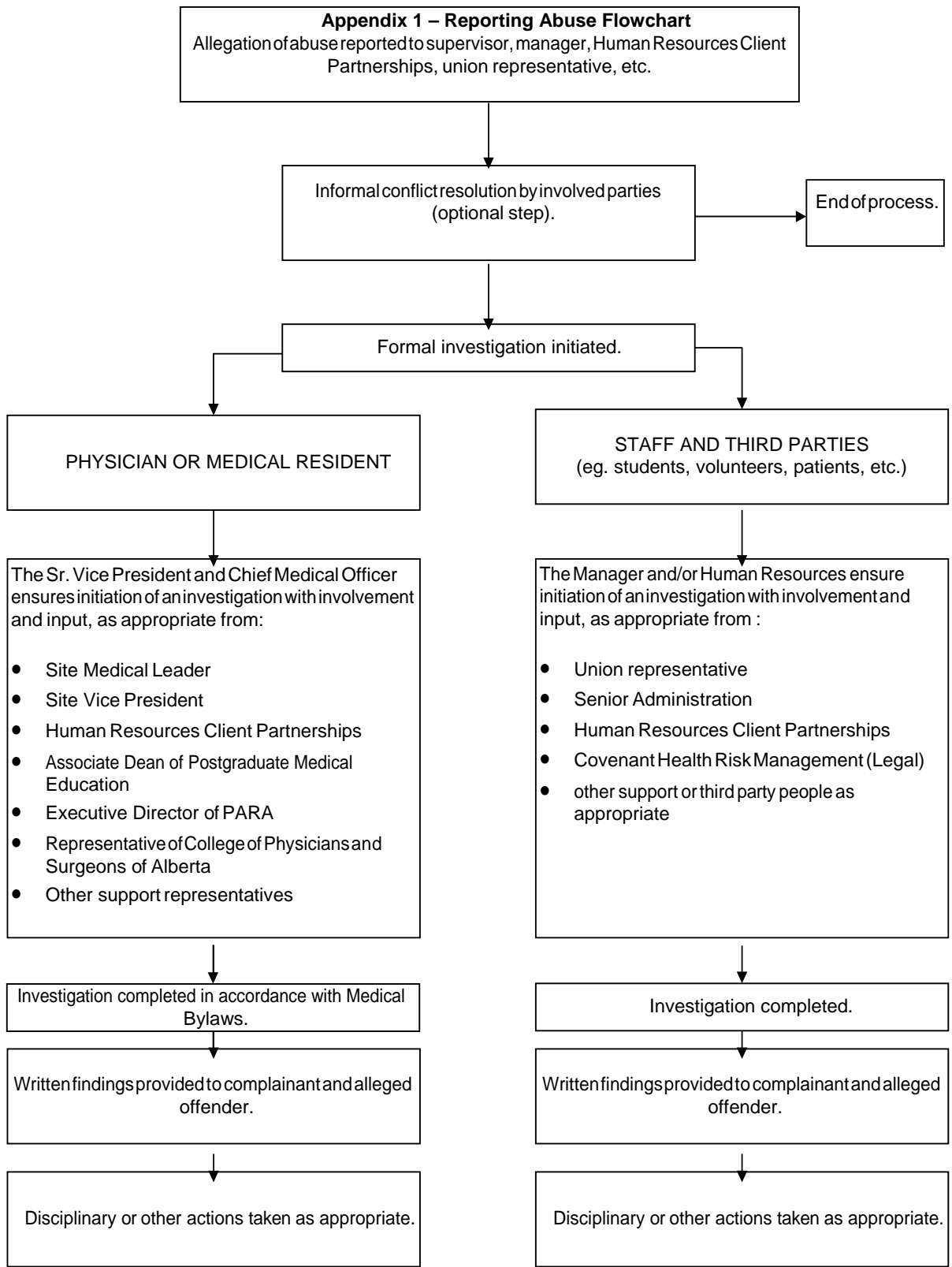
The College of Physician and Surgeons of Alberta, PHMC Policies, Disruptive Behavior, revised April 15, 2010, printed from internet April 23, 2012, [http://www.cpsa.ab.ca/Resources/PHMC\\_Overview/PHMC\\_Disruptive\\_Behavior.aspx](http://www.cpsa.ab.ca/Resources/PHMC_Overview/PHMC_Disruptive_Behavior.aspx)

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Health Quality Council of Alberta. Managing disruptive behavior in the healthcare workplace. Provincial framework October 2012.

**Revisions**      February 5, 2016  
February 11, 2013





**APPENDIX 2****Roles of the Participants****Role of the Complainant**

1. When responding to abuse/harassment/discrimination incident, remember to:
  - talk with the offender right away
  - talk directly to the offender
  - be respectful
2. If the abuse continues, go to your manager or to the resources listed in the policy/procedure.
3. Know how to terminate a potentially abusive interaction:
  - interrupt the conversation firmly but politely
  - tell the person that you
    - do not like the tone of the conversation
    - will not accept abusive treatment
    - will end the conversation if necessary
  - tell the person that you will ask them to leave the immediate area, or that you will leave
  - if the behavior persists, end the conversation
  - ask the person to leave
  - if the person does not agree to leave, remove yourself from the scene and inform your manager or supervisor immediately
  - DO NOT return to the person if you believe they pose a physical threat
  - file an incident report
4. Tell your supervisor about the incident, even if it is dealt with. Your manager / supervisor has a responsibility to ensure all complaints are investigated in a prompt and sensitive manner.
5. Keep a written record of the date, time, place, what happened, and the name of any witnesses. If needed, call the *Employee Incident / Injury Reporting Line* within 24 hours, or as soon as possible.
6. If you feel that your complaint has not been heard, or has not been investigated or acted upon, contact the next level of management.

### **Role of a Witness to Incident**

1. Covenant Health encourages people to be accountable for themselves and to be advocates for others. If you see someone being abused you should do your best to support that person. As appropriate for the situation, attempt to stop the interaction and separate the parties. If you are concerned that the interaction could become physical, follow Code White/Purple protocols. Tell your manager about the incident.
2. You may be asked to recall what you have witnessed. Present the facts in a straightforward and objective manner.

### **Role of the Respondent**

1. If there is a complaint against you:
  - a) Work respectfully with the complainant and/or your manager to understand and resolve the issue.
  - b) Ensure you have received enough information to fully understand the nature of the complaint and any other details you need.
  - c) Get help and support from your manager, union representative, Human Resources Client Partnerships, Spiritual Care, the Employee and Family Assistance Program, or you may also consider legal advice.
  - c) Write down what you feel happened. Include as much detail as possible; eg. names of witnesses, what happened before, etc.
2. If the complaint is not upheld, no record will be kept on your personnel file.

### **Role of the Responsible Manager / Investigator**

1. Investigations shall begin within 72 hours (exclusive of Saturday, Sunday and statutory holidays) from the time a written complaint is received from the complainant. The alleged offender shall be informed of the complaint as soon as practicably possible.
2. Conduct investigative meetings with the complainant and the alleged offender in a timely manner. These meetings should include the complainant's and offender's managers, Human Resources Client Partnerships and union representatives.
3. Help the people involved to deal with it themselves; otherwise, determine what outcome would be acceptable to the complainant.

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4. Find out what steps have been taken by the complainant. Assure complainant that Covenant Health takes their complaints very seriously and will deal with them.
5. Notify Human Resources Client Partnerships and, in cases of serious abuse, appropriate Senior Leadership Team (SLT) member and/or the Executive On-call.
6. Workplace abuse/harassment/discrimination complaints related to physicians shall be reported to the Vice President and Chief Medical Officer for investigation and response.
7. Access other resources, if required, to help resolve the situation.
8. Prior to starting the investigation, have Human Resources Client Partnerships ask the complainant and the alleged abuser if they have any significant reservations about the manager investigating the incident. Managers may also elect to remove themselves from the investigation should they have significant reservations about their objectivity.
9. Ensure the employees have advance notice of the meeting, are clearly advised of what the meeting is about, and are told that he/she can bring a union representative or other advocate with them. A copy of this policy should also be provided either at the time the meeting is set or at the actual meeting, whichever is most appropriate.
10. Remind all those involved to keep the information confidential. Information should only be shared with those directly involved in the investigation and resolution of the complaint.
11. As soon as possible, obtain written documentation from the complainant, including specifics of the complaint itself and all witness(es) or people who may know something about what happened.
12. Escalate recommendations to the next level of management if a situation remains unresolved after going through the preceding steps

### **Role of Human Resources Client Partnerships**

1. Human Resources Client Partnerships (HRCP) provides support, direction and advice to managers, complainants and offenders.
2. HRCP will assess if the complainant or the alleged offender has any significant reasons why they would not want the manager to investigate the incident. In this situation, HRCP, in conjunction with the manager, will advise the next level of management that an investigator needs to be appointed.