

Temiskaming Hospital - Policy			
Authorized by	President and CEO	Number	ADM-G-66
Responsible	Health and Safety Coordinator	Effective Date	20-October-2017
Distribution	Staff, Board Members, Professional Staff	Reviewed	20-October-2017
WORKPLACE VIOLENCE/HARASSMENT FREE ENVIRONMENT			

STATEMENT OF POLICY:

Temiskaming Hospital is committed to creating and maintaining a workplace environment which promotes a safety culture, mutual respect, integrity and professional conduct. Any act of violence or harassment committed by or against any member of our workplace or member of the public, is unacceptable conduct that will not be tolerated.

Temiskaming Hospital recognizes that violence in the workplace is a shared responsibility of all Temiskaming employees and non-employee personnel to anticipate, respond to, and report all incidents of workplace violence.

APPLICATION

This Policy governs the conduct of all individuals in the workplace, including employees, Professional staff, volunteers, students, visitors and others.

For the purposes of this Policy, the workplace includes all of the Hospital's physical premises and any other area where the Hospital's work is being performed.

Each and every member of the organization is expected to support the implementation of this Policy by:

- Conducting themselves in a manner which demonstrates professional conduct, mutual respect for others and which honors diversity in the workplace.
- participating fully and in good faith in any resolution process or formal complaint and investigation process where they have been identified as having potentially relevant information
- reporting any incidents which may be in violation of this Policy
- respecting the rights to personal dignity, privacy and confidentiality pertaining to this Policy

DEFINITIONS

Workplace Violence

"Workplace violence" is defined in the *Occupational Health and Safety Act* ("OHS") and this Policy as follows:

- (a) The exercise of physical force by a person against a worker, in the workplace, that causes or could cause physical injury to the worker;
- (b) An attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker;
- (c) A statement or behavior that is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical harm to the worker.

Harassment (sexual or otherwise)

“Harassment” means a course of vexatious comment or conduct that is known or ought reasonably to be known to be unwelcome, whether or not it is based on a prohibited ground in the Ontario *Human Rights Code* (the “Code”).

Harassment typically involves a pattern of comment or conduct that occurs over time. However, a single incident of a serious nature may be sufficient to constitute harassment.

Harassment can involve behavior that demeans, humiliates or embarrasses a person and that the individual should have known would be unwelcome. Workplace harassment can be directed at a co-worker, subordinate or manager.

Sexual harassment is any conduct, comment, gesture or contact of a sexual nature, including, but not limited to, the following:

- (a) Any sexual advance or other conduct of a sexual nature which is known or ought reasonably to be known to be unwelcome,
- (b) any reprisal or threat of reprisal (such as a loss of job, or denial of advancement) for rejecting sexual advance or other conduct of a sexual nature from a person in a position of authority who knows or ought reasonably to know that it is unwelcome.

The reasonable exercise of management functions is not considered harassment for the purpose of this Policy. The reasonable exercise of management functions includes, but is not limited to, giving reasonable instruction or supervisory direction to an employee, providing constructive criticism or counseling, enforcing workplace standards, taking corrective or disciplinary action, or conducting performance appraisals.

DOMESTIC VIOLENCE IN THE WORKPLACE

The Hospital recognizes that domestic/intimate partner violence may impact an employee or employees in the workplace, The Occupational Health and Safety Act requires employers to take every precaution reasonable in the circumstances for worker protection if they become aware, or ought reasonably to be aware, of an employee in a domestic/intimate partner violence situation that may expose a worker to physical injury in the workplace.

Domestic/intimate partner violence is the intentional and systematic use of tactics to induce fear and establish and maintain power and control over the thoughts, beliefs and conduct of another in an intimate/familial relationship. The pattern of behaviour may include physical violence, sexual, emotional /psychological abuse exhibited by verbal abuse, stalking and using electronic means. The abuser may be a current or former spouse or partner, relative or friend. Other common terms for domestic/intimate partner violence include personal relationship violence or family violence.

The Hospital recognizes that **employees experiencing domestic/intimate partner violence** may be reluctant to disclose the problem to a supervisor or manager. The Hospital encourages disclosure in order to protect the safety of the employee and others in the workplace. Disclosure also enables the Hospital to support the employee and provide links to appropriate services. Although the Hospital respects the employee's need for confidentiality, an employee is responsible for:

- Disclosing to their supervisor/manager any situation that threatens the safety of the workplace
- Informing the supervisor/manager if they have applied for, or obtained, a restraining order that includes the workplace as a protected area.

The Hospital is committed to meeting this legal responsibility in a manner that:

- is sensitive to, and supportive of, the needs of employees who are in domestic/intimate partner violence situations
- provides employees who are in domestic/intimate partner violence situations access to information regarding resources and available supports
- is protective of the health and safety of all employees that may be placed at risk as a result of domestic/intimate partner situations impacting the workplace while respecting the privacy rights of the employee in a domestic/intimate partner violence situation

PROCEDURE

1. Risk Assessment

1.1. Management

- Ensure the completion of hazard identification and risk assessments in their work areas, in collaboration with Health and Safety Coordinator
- Develop and maintain a plan to reduce identified work area risks
- Steward education and training of employees for workplace violence prevention
- Review reports of violence and/or threats of violence in the work area and, where necessary, develop plans to mitigate risk in future

1.2. Joint Health and Safety Committee:

- Investigates incidents as identified in Committee Terms of Reference
- Participates in the identification, assessment and control of actual or potential health and safety hazards in the workplace.

1.3. Risk Management:

- Identifies and notifies potential risks and trends to the organization
- Works with management to ensure the completion of hazard identification and risk assessments in their work areas, in collaboration with Health and Safety Coordinator

2. Education and Training

Level 1

Completed by all new employees during general orientation. This is a mandatory e-learning Violence Prevention Module

Level 2

For employees who work in areas that have a greater risk of violence, learning formats include

- a) e-learning programs to augment Level 1 training
- b) Classroom session on violence prevention

Level 3

Code White Responders

- a) Mandatory e-learning program
- b) Classroom education and training session on violence prevention

3. Incident Reporting and Management

1. If a member of the organization is a victim of violence or witness's violence in the workplace, including instances of violence from patients, visitors, contractors, staff, professional staff, domestic violence etc., a code white procedure is to be followed and, (see Code White) contact their supervisor or designate immediately. 2. If a member of

the organization feels they are being harassed, they are encouraged to discuss the situation with the person whose actions are perceived to be inappropriate, if able to do so safely and comfortably. Where the situation cannot be resolved or the situation continues, follow the steps below.

2. The member is to contact their supervisor or designate and report the unwanted behavior. In the event that the direct supervisor is the source of the violence or harassment, contact the person to whom they report to.
3. In the event of a physician complaint the Chief of Staff would be approached. In the event of a complaint against the Chief Executive Officer or the Chief of Staff, the Board Chair would be approached and assume responsibility in fulfilling the obligations of the Policy.
4. Complete a "Workplace Violence, Harassment Report" form as soon as able to do so. The forms can be obtained from the Supervisor, Human Resources, or hospital intranet.
5. Keep a written record of the nature of the violence or harassment, date(s), time(s), behavior(s) and witness(es).
6. Assist in completing a written report of the complaint, detailing the nature of the incident, the date(s), place(s), witness(es) and the name(s) of those involved.

INVESTIGATING COMPLAINTS UNDER THIS POLICY

The Chief of Staff, Departmental Managers, Senior Leaders and, President and Chief Executive Officer and Board Chair are obliged by this Policy to promote a violence and harassment free workplace and to respond to complaints under this Policy.

The investigation of the complaint will be conducted by Human Resources assisted by the responsible Department Manager (or Senior Leader, or Chief of Staff or Chief Executive Officer, or Board Chair). Human Resources will interview all relevant parties, including witnesses, document all findings and render a decision as soon as possible. All information concerning the incident will be treated in the strictest confidence.

The complainant and the alleged person committing the violence or harassment have the right to have representation, Union or otherwise, at any meeting in respect to a complaint.

Time Limits

1. It is the mutual desire of all parties to resolve any complaints as soon as possible. Therefore, wherever possible, a complaint shall be brought to the attention of the responsible Chief of Staff, Senior Leader, Chief Executive Officer, or Board Chair within five (5) working days of the incident.
2. The individual receiving the complaint shall immediately acknowledge receipt of the complaint to the complainant on behalf of the Hospital.

Penalty

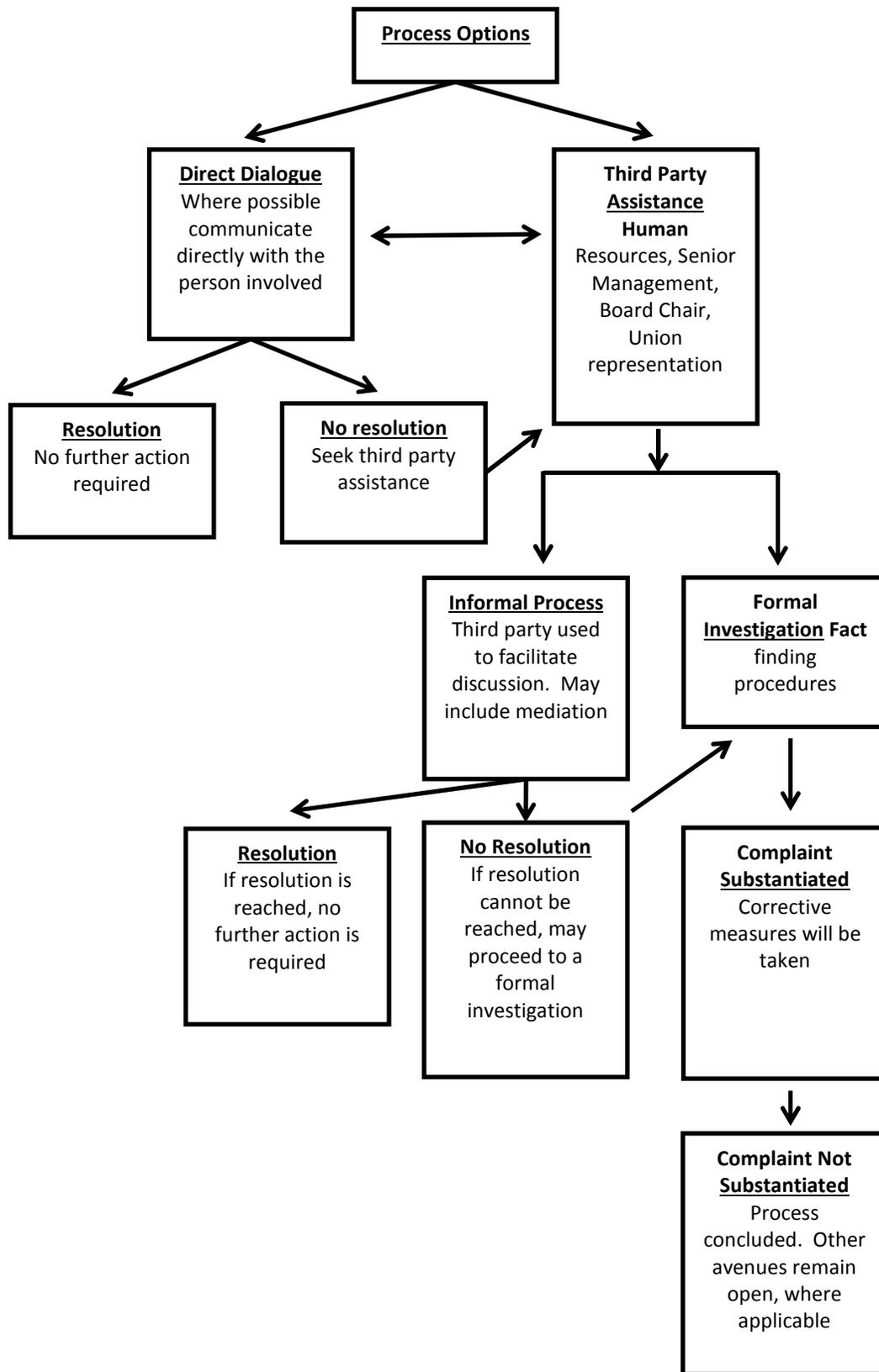
No employee or any other individual affiliated with the Temiskaming Hospital shall subject any other person to workplace violence or harassment or allow or create conditions that support workplace violence or harassment. An employee that subjects another employee, patient or

other person to workplace violence or harassment may be subject to disciplinary action up to and including termination. Further, other persons may be removed from the workplace.

Appeals Procedure

If the complainant or person or the person alleged to have committed the violence or harassment is not satisfied with the action taken, he/she may pursue any of the following actions:

- a) Submit a formal complaint to the Chief Executive Officer, or Board Chair; or
- b) Submit a formal grievance under the appropriate collective agreement or complaint procedure for non-union employees.



References

Occupational Health & Safety Act
Public Services Health & Safety Association
Ontario Ministry of Labour
Ministry of Health & Long Term Care

Cross References

Appendix A: [Workplace Violence, Harassment Report](#)

Revision History			
Revision	Date	Name	Summary of Changes
9	23-Aug-2018	Summer Student	ADM-G-66 renamed from ADM-G-17-12
8	17-Oct-2017	Health & Safety Coordinator	ADM-G-17-02 Legislative Requirements
7	2014		ADM-G-14-07
6	2012		ADM-G-12-10
5	2010		ADM-G-10-10
4	2003		ADM-G-03-19
3	2002		ADM-G-02-07
2	1999		ADM-G-99-01
1	1998		ADM-G-98-27