Purpose

• To enhance awareness of the rights and responsibilities of personnel who are subjected to, or who become aware of, workplace abuse or harassment.
• To set out processes for response when personnel are victims of abuse or harassment – including reporting, investigating, documentation and follow-up action.

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 abuse/ harassment 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.

Applicability

This policy applies to incidents of abuse involving Covenant Health staff, physicians, volunteers, students, and to any other persons acting on behalf of Covenant Health (hereafter referred to as “personnel”).

Responsibility

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

Covenant Health managers shall demonstrate compliance by ensuring that personnel receive education/training as appropriate for their position (relative to the potential of risk) and all reported incidents of abuse are investigated and that appropriate action is taken.

All Covenant Health personnel shall demonstrate compliance with this policy/procedure by reporting instances of abuse that they are subjected to or that they become aware of. Covenant Health will not accept inaction when possible abuse 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.
Abuse 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 abuse and harassment in a prompt, objective and sensitive manner
- taking necessary corrective action
- providing appropriate support for victims
- reducing incidents of abuse and harassment by providing personnel with education/training to identify abuse and encouraging reporting of incidents

Covenant Health encourages the reporting of all incidents of workplace abuse/ 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 include disciplinary action, dismissal, or withdrawal of privileges, removal from the premises, and reporting to local law enforcement.

**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 abuse must tell the offender(s) that what the offender(s) are 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, Protective Services, Occupational Health and Safety, or the Employee and Family Assistance Program.

   1.2 Managers shall intervene immediately when informed of an incident of workplace abuse or harassment.

   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.
1.4 If a manager fails to follow-up a workplace abuse or harassment allegation, the complainant can report the incident to a higher level of management.

1.5 Workplace abuse or harassment complaints related to physicians shall be reported to the Senior Vice President and Chief Medical Officer for investigation and response.

1.6 In addition to reporting an incident of workplace abuse and harassment, 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;
- file a complaint with the Alberta Human Rights and Citizenship Commission; and/or
- report the incident to the police.

1.7 If applicable, the “Employee Incident/Injury reporting and investigation Form” must be completed.

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, shall appoint an investigator(s). The investigator(s) is responsible for formally investigating the incident and making recommendations for resolution. The Investigator and Human Resources will involve union representatives as appropriate.

2.3 Outside authorities (eg. professional bodies, law enforcement) may 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;
- Critical Incident Stress Management team (call the switchboard @ 780-735-9000 and have the operator page the on-call Critical Incident Stress Management member);

4. **Outcome**

4.1 Covenant Health shall initiate follow-up action (as appropriate) up to and including termination of employment or contract. Any disciplinary action shall be:

- determined based on the evidence supporting each allegation;
- in accordance with applicable legislation, regulatory bodies, collective agreements or contracts; and
- documented in the respondent’s employee file.

4.2 If the evidence found during the investigation fails to uphold the allegation, no documentation concerning the allegation shall be placed on the respondent’s employment file.

4.3 The Investigator, in consultation with a Human Resources representative, shall ensure that the complainant and respondent are informed in writing about the conclusion of the workplace abuse or harassment investigation and confirmation that appropriate action has been taken.

4.4 A complainant or a respondent who is not satisfied with the outcome of the investigation may go to a member of Senior Management or use their grievance procedure.

5. **False Reports**

5.1 Documentation of an allegation of workplace abuse or harassment shall not be placed on the complainant’s employment file, regardless of the outcome of the preliminary review or investigation, unless it is determined by the manager or investigator that the complainant acted in bad faith by filing a
false report.

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 The complainant, the respondent, and any witnesses or other Personnel with knowledge of the workplace abuse or harassment incident, allegation, review or investigation shall maintain the confidentiality of such information except where required to provide information for a review or investigation.

6.3 Human Resources, 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.

Definitions

For the purpose of this policy/procedure;

**Abuse** means a single or series of incidents occurring in the workplace against a Personnel member that is known, or reasonably ought to be known, to be unwelcome – including but not limited to an act of physical contact without consent; physical contact with intent to harm; subjection to non-consensual sexual contact; activity or behaviour including attention based on sex or gender, or sexual advances; aggressive or violent physical or verbal behaviour; or verbal or written threats causing fear, bullying, cyber bullying, intimidation, or emotional harm.

**Harassment** means a form of discrimination against a Personnel member prohibited under the Human Rights, Citizenship and Multiculturalism Act based on the followings grounds: race, religious belief, color, gender, physical or mental disability, body size and weight, age, ancestry, place of origin, marital status, source of income, family status, or sexual orientation. Harassment is inappropriate, unwelcome or coercive behaviour in the workplace based on one or more of the above 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.
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.

**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.

**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.

**Personnel:** includes Covenant Health staff, physicians, volunteers, students, and to any other persons acting on behalf of Covenant Health.

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

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

**Related Documents/Resources**

- Appendix 1 – Reporting Abuse – Flowchart
- Appendix 2 – Roles of the Participants
- Abuse Investigation Checklist (resource for managers and staff)

**Covenant Health’s Code of Conduct – Our Commitment to Ethical Integrity**

@ http://www.compassionnet.ca/607.asp

- Covenant Health Policies & Procedures:
  - *Building a Just Culture, #III-35*
  - *Health and Safety Policy, #II-130*

**References**

- Site-specific - Code White and Code Purple
- AHS “Workplace Abuse and Harassment Policy and Appendix” – June 24, 2009
<table>
<thead>
<tr>
<th>Workplace Abuse and Harassment</th>
<th>Date Effective</th>
<th>Policy No.</th>
<th>Page</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Feb. 11, 2013</td>
<td>II-145</td>
<td>7 of 15</td>
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</tbody>
</table>

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)


**Revisions**  
N/A
Appendix 1 – Reporting Abuse Flowchart

Allegation of abuse reported to supervisor, manager, Human Resources, union representative, etc.

Informal conflict resolution by involved parties (optional step).

End of process.

Formal investigation initiated.

PHYSICIAN OR MEDICAL RESIDENT

The Sr. Vice President and Chief Medical Officer ensures initiation of an investigation with involvement and input, as appropriate from:

- Site Medical Leader
- Site Vice President
- Human Resources
- Associate Dean of Postgraduate Medical Education
- Executive Director of PARA
- Representative of College of Physicians and Surgeons of Alberta
- Other support representatives

Investigation completed in accordance with Medical Bylaws.

Written findings provided to complainant and alleged offender.

Disciplinary or other actions taken as appropriate.

STAFF AND THIRD PARTIES (eg. students, volunteers, patients, etc.)

The Manager and/or Human Resources ensure initiation of an investigation with involvement and input, as appropriate from:

- union representative
- Senior Administration
- Human Resources
- Covenant Health Risk Management (Legal)
- other support or third party people as appropriate

Investigation completed.

Written findings provided to complainant and alleged offender.

Disciplinary or other actions taken as appropriate.
Roles of the Participants

Role of the Complainant

1. When responding to abuse/harassment 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, complete Employee Incident / Injury Reporting and Investigation (available on CompassionNet) and send to Occupational Health and Safety with 24 hours.

6. If you don’t feel that your complaint has been heard, or has not been investigated or acted upon, contact the next level of management.
Role of a Witness to an Abusive 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, Spiritual Care, the Employee and Family Assistance Program, or 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 and union representatives.

3. Help the people involved to deal with it themselves; otherwise, determine what outcome would be acceptable to the complainant.

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 and, in cases of serious abuse, appropriate Senior Leadership Team (SLT) member and/or the Executive On-call.

6. Workplace abuse/ harassment complaints related to physicians shall be reported to the Senior Vice President and Chief Medical Officer for investigation and response.

7. Access other resources, if required, to help resolve the situation – e.g. OH&S.

8. Prior to starting the investigation, have Human Resources 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 employee has advance notice of the meeting, is clearly advised of what the meeting is about, and is told that he/she can bring a union representative or other advocate with them. A copy of the “Abuse” policy and procedure should also be provided either at the time the meeting is set up or at the actual meeting, whichever is most appropriate.

10. Remind all those involved to keep the information confidential. Information should be shared only 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**

1. Human Resources provides support, direction and advice to managers, complainants and offenders.

2. Human Resources 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, Human Resources, in conjunction with the manager, will advise the next level of management that an investigator needs to be appointed.
# ABUSE INVESTIGATION CHECKLIST

<table>
<thead>
<tr>
<th>Name and Position of Person Completing Form:</th>
<th>Interviews Completed:</th>
<th>Y / N</th>
<th>Date</th>
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<tbody>
<tr>
<td>name</td>
<td>COMPLAINANT</td>
<td>Date of Incident:</td>
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<tr>
<td>name</td>
<td>ALLEGED OFFENDER</td>
<td>Time of Incident:</td>
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<tr>
<td>name</td>
<td>ADVOCATE</td>
<td>Location of Incident:</td>
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<tr>
<td>name</td>
<td>WITNESS(ES)</td>
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**Statements Obtained:** For maximum recall, encourage the complainant, alleged offender, and/or witness(es) to write down statements within 24 hours of the incident.

<table>
<thead>
<tr>
<th>YES</th>
<th>N/A</th>
<th>DATE</th>
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<tbody>
<tr>
<td>Complainant</td>
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<tr>
<td>Alleged Offender</td>
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<td>Advocate</td>
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<tr>
<td>Witness(es)</td>
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## WHAT HAPPENED – INCIDENT DETAILS

### Examples of types of incidents:
- using one’s position to threaten or intimidate another
- putting another person down
- verbal threats
- unwelcome remarks, jokes, innuendos, taunting
- showing pornographic, sexually explicit, racist or other offensive material
- practical jokes which causes a person to feel bad
- unwelcome comments (eg. obscene phone calls)
- leering or other gestures
- unwelcome physical contact
- unwelcome sexual advances, requests for sexual favors
- words or gestures which are meant to annoy or alarm the hearer (eg. swearing)

What does the complainant expect with regard to resolution of the incident? For example, is the complainant seeking help to respond to the alleged offender, or is the complainant seeking a formal investigation?
<table>
<thead>
<tr>
<th>ACTIONS YOU TOOK:</th>
<th>YES</th>
<th>N/A</th>
<th>NOTES / DETAILS / DATES</th>
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<tbody>
<tr>
<td>Did you give a copy of the Abuse policy and procedure to the complainant, alleged offender, and any witnesses?</td>
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<td>If offender is from another area or discipline, who did you notify/contact? (Eg. site vice president, manager.)</td>
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<tr>
<td>Reviewed with the complainant and alleged offender the steps that will occur in the investigation and the timeline.</td>
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<tr>
<td>As required, prepared an Employee Incident/Injury Reporting and Investigation form (#CH-0102) and forwarded it to OH&amp;S within 24 hours of the incident.</td>
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<td>Risk Management: Identify what steps you took to remove complainant from risk.</td>
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<tr>
<td>Critical Incident Stress: Complainant assessed for signs of critical incident stress. If appropriate, notify the Critical Incident Stress Team (contact through the Switchboard operators).</td>
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<td>Support Services Available: Complainant and alleged offender informed of option of obtaining advice and help from other sources:</td>
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<tr>
<td>- Occupational Health and Safety</td>
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<tr>
<td>- Spiritual Care</td>
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<tr>
<td>- Employee &amp; Family Assistance Program (Catholic Social Services)</td>
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<td>- Human Resources</td>
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<td>- their union or professional organizations</td>
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<td>- in-patient psychology</td>
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<tr>
<td>- Social Services</td>
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<tr>
<td>Confidentiality: Advised complainant, alleged offender, advocate and/or witness(es) to maintain confidentiality regarding incident.</td>
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<tr>
<td>Human Resources: Human Resources advised of incident/details.</td>
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<td>Site Vice Present or Executive On-call notified.</td>
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<tr>
<td>If required, written interim response provided to complainant and alleged offender within one week</td>
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</tbody>
</table>
After incident is reported. Interim response should include:

- actions taken to date
- actions planned to lead to resolution with expected time-line

<table>
<thead>
<tr>
<th>Describe the steps you took to investigate the incident.</th>
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<tbody>
<tr>
<td>Staff Contacted / Meeting Dates &amp; Attendance, etc.</td>
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</tbody>
</table>

If known, describe the behaviour of individuals involved before, during and after incident documented.

<table>
<thead>
<tr>
<th>Complainant:</th>
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<tbody>
<tr>
<td>Alleged Offender:</td>
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<tr>
<td>Other:</td>
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</table>
### CONCLUSION / RESOLUTION

<table>
<thead>
<tr>
<th>ACTIONS</th>
<th>YES</th>
<th>N/A</th>
<th>NOTES / DETAILS / DATES</th>
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</thead>
<tbody>
<tr>
<td>Copy of your investigation findings to Human Resources.</td>
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<tr>
<td>Conclusion response provided to complainant and alleged offender as appropriate.</td>
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<tr>
<td>Report provided to other parties as appropriate; eg. union, other managers, professional associations, etc.</td>
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<tr>
<td>Follow-up required?</td>
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<tr>
<td>If YES, by whom?</td>
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<tr>
<td>Was disciplinary action taken? If YES, what action was taken?</td>
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<tr>
<td>Other:</td>
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</table>

**FILE CLOSE DATE:**