

TITLE

**WORKPLACE VIOLENCE: PREVENTION AND RESPONSE
(FORMERLY WORKPLACE ABUSE AND HARASSMENT)**DOCUMENT #
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Human Resources, Workplace Health and SafetyREVISION EFFECTIVE DATE
MAY 05, 2014CATEGORY
Supportive Work EnvironmentNEXT REVIEW
MAY 05, 2017

NOTE: The first appearance of terms in bold in the body of this document (except titles) are defined terms – please refer to the Definitions section.

If you have any questions or comments regarding the information in this policy, please contact the Policy & Forms Department at policy@albertahealthservices.ca. The Policy website is the official source of current approved policies, procedures, and directives.

PURPOSE

- To foster a respectful and supportive **workplace** environment within Alberta Health Services (“AHS”) that contributes to the safety and security of individuals.
- To ensure that **workplace violence** is considered a serious offence and is addressed appropriately and in accordance with AHS’ legal obligations, values, and principles of a just culture.
- To set out the strategies for the prevention of and response to violence against **AHS staff members and representatives** in the workplace.
- To enhance awareness of the rights, responsibilities, and supports of individuals who are subjected to, or who become aware of, situations involving physical or non-physical violence (including sexual abuse and harassment and cyber-bullying) against AHS staff members or representatives in the workplace.

POLICY STATEMENT

AHS is committed to providing respectful, secure, and supportive work environments to ensure the safety and well-being of all individuals. AHS does not tolerate nor condone any violent actions or behaviours directed toward any AHS staff member or representative. AHS will take action in an objective manner to address reports of workplace violence without retribution to AHS personnel who report incidents in good faith. This commitment is consistent with AHS’ mission, vision, and values as well as the standards of duty to disclose and protection from retaliation as set out in the Safe Disclosure/Whistleblower policy (#1101).

AHS supports these commitments through the establishment, implementation, communication, and maintenance of appropriate processes and procedures that address the key elements set out below.

No element of this policy limits a person's right to report an incident of violence to the police or other law enforcement agency.

This policy applies to the following four classifications of workplace violence which have been adopted by Accreditation Canada:

- Type I (Criminal Intent): **Respondent** has no relationship to the workplace.
- Type II (Client or Customer): Respondent is a client, visitor, or family member of the client at the workplace (who) becomes violent toward a worker.
- Type III (Worker-to-Worker): Respondent is an employee or past employee of the workplace (including managers and physicians).
- Type IV (Personal Relationship): Respondent has a relationship with an employee (e.g. domestic violence in the workplace).

Compliance with the Workplace Violence: Prevention and Response policy is a shared responsibility between AHS management, AHS workers, and those working on behalf of AHS.

APPLICABILITY

Compliance with this policy is required by all AHS employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of AHS (including contracted service providers as necessary). This policy is subject to all applicable laws.

POLICY ELEMENTS

1. Responsibilities

- 1.1 AHS Human Resources is responsible for establishing a program with procedures and appropriate resources for the prevention and management of workplace violence incidents. Human Resources is also responsible for the collaborative development and maintenance of program guidelines for preventing, responding to, and following up on allegations of workplace violence against AHS staff members and representatives.
- 1.2 **Managers/Supervisors (or designates)** are responsible for ensuring compliance with the policy and program within their areas of accountability, and for investigating, with support from Human Resources, and documenting all incidents.
- 1.3 AHS is responsible for developing and providing resources to inform and train staff on the prevention of and response to workplace violence based on the level of assessed risk.
- 1.4 All employees will use appropriate means to inform patients, clients, and members of the public that AHS is committed to a respectful workplace free of workplace violence.

Managers who develop additional resources must conform to [AHS' Visual Identity Standard](#).

- 1.5 AHS employees, members of the medical and midwifery staffs, students, volunteers, and other persons acting on behalf of AHS (including contracted services providers as necessary) are responsible for reporting incidents and complying with all aspects of this policy and established procedures.

2. Risk Assessment

- 2.1 Risks for workplace violence must be considered and documented in the Hazard Identification, Assessment, and Control ("HIAC") Process.
- 2.2 Risks related to workplace violence must be communicated to potentially affected staff as per the HIAC process.

3. Reporting an Incident

- 3.1 All incidents of workplace violence must be reported. This includes incidents where the violence is originating from a patient, client, or visitor. Applicable incident reporting procedures must be followed (See Appendix "A" Workplace Violence: Human Resources Protocol).
- 3.2 In the event that the **complainant's** manager/supervisor (or designate) is the respondent, the next higher position in the respective department shall be alerted.
- 3.3 Workplace violence allegations related to a member of the medical or midwifery staffs will be reported, investigated, managed, and communicated in accordance with the processes set out in the respective bylaws (See References Section).
- 3.4 All reasonable efforts shall be made to maintain confidentiality of allegations of workplace violence made pursuant to this policy, except where disclosure is required:
 - a) by law;
 - b) to conduct a full and proper investigation;
 - c) to protect the safety of an individual; and/or
 - d) to comply with professional reporting obligations.
- 3.5 Reports of workplace violence shall be made in good faith and be based on reasonable grounds. Allegations may be made in confidence, subject to section 3.4, any applicable legislation, and AHS policies.
- 3.6 Intentionally making false, bad faith, or malicious allegations may result in disciplinary action up to and including termination of employment, privileges, contractual or other relationship with AHS.
- 3.7 Retaliation against a staff member who reports an incident of workplace violence will be investigated by AHS management, with support from Human Resources, and may lead to disciplinary action up to and including termination of employment, privileges, contractual or other relationship with AHS.

3.8 Statistics of workplace violence will be reported to and reviewed by AHS Executive Management on a quarterly basis.

4. Investigating an Incident

4.1 When an incident of workplace violence is reported, the manager shall follow any established incident investigation procedures, as appropriate.

4.2 AHS will cooperate with investigations conducted by external agencies to the extent required by law.

4.3 AHS may review or investigate suspected incidents of workplace violence in the absence of a formally reported incident.

5. Post-Investigation Actions

5.1 The manager will identify and implement actions to remedy and follow-up to the complaint.

5.2 The manager, in consultation with a Human Resources representative, shall ensure that at the conclusion of an investigation, the:

- a) respondent will be notified, where appropriate, of the investigation's conclusions and of further actions, if any;
- b) complainant will be notified, where appropriate, of the investigation's conclusions and general outcome, subject to applicable legislation, bylaws, or AHS policies; and
- c) reported incident may be forwarded, as required or permitted by applicable law, to external agencies including, but not limited to, the appropriate law enforcement agency or professional body.

5.3 AHS staff members and representatives found to have committed an incident of workplace violence may be subject to disciplinary action up to and including termination of employment, privileges, contractual or other relationship with AHS.

5.4 AHS will provide support to all parties involved in an investigation, as required, to assist with the resolution of the incident.

DEFINITIONS

AHS staff members and representatives means an employee, member of the medical or midwifery staff, student or volunteer, contracted service provider, or other individual authorized to represent AHS.

Complainant means the person who makes the complaint regarding an alleged incident of workplace violence.

Manager/Supervisor (or designate) means the individual who has the delegated human resource authority for directly planning, monitoring, and supervising direct (employee) reports and who has accountability for one or more sections or units within a department. Where the

manager is the respondent in an allegation of workplace violence, the complainant can report the incident to the next higher position in the respective department or through any of the other incident reporting streams.

Respondent means the individual against whom an allegation of workplace violence has been made.

Workplace means a location where a worker is, or is likely to be, while engaged in their activities with AHS or while on a work break. This can include, but is in no way limited to, work in the community such as home care visits. Any vehicle or mobile equipment used by the worker as part of their job is also considered a workplace.

Workplace Violence means any act in which a person is abused, threatened, intimidated or assaulted in his or her workplace. Workplace violence can be non-physical and/or physical and can include abuse or harassment by means of an electronic conveyance (cyber-bullying), verbal (swearing, insults, or condescending language) or written threats with an expression of intent to inflict harm. It can also include harassment (any behaviour that demeans, embarrasses, humiliates, annoys, alarms or verbally abuses a person that is known or would be expected to be unwelcome) or includes words, gestures, intimidation, bullying or other inappropriate activities such as sexual harassment including comments or actions which are perceived to be sexual in nature.

REFERENCES

- Appendix “A” – Workplace Violence: Human Resources Protocol
- AHS Bylaws and Policies:
 - Code of Conduct
 - Medical Staff Bylaws
 - Medical Staff Rules
 - Midwifery Staff Bylaws
 - Midwifery Staff Rules
 - Keeping Patients Safe from Abuse (#1153)
 - Safe Disclosure/Whistleblower (#1101)
 - Working Alone (#1154)
 - Workplace Health and Safety (#1121)
- Workplace Violence Prevention Resources Page
- Accreditation Canada References
- Hazard Identification, Assessment & Control (“HIAC”) Process
- AHS Visual Identity Standards
- Preventing Violence and Harassment at the Workplace, Government of Alberta
- Alberta Human Rights Commission
- *Alberta Human Rights Act*
- *Health Professions Act (Alberta)*
- Occupational Health and Safety Act (Alberta)
 - Occupational Health and Safety Regulation (Alberta)
 - Occupational Health and Safety Code (Alberta)

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REVISIONS
May 05, 2014

APPENDIX "A"

WORKPLACE VIOLENCE: HUMAN RESOURCES PROTOCOL

1. An Incident of Workplace Violence is Reported

- 1.1 Managers shall intervene immediately when informed of an incident of workplace violence or where they believe an incident may occur in an attempt to ensure the safety of staff (including the manager/supervisor) and to conduct a review following the incident. An incident of workplace violence may be reviewed or investigated in the absence of a reported allegation.
- 1.2 If a manager fails to follow-up on a workplace violence allegation, the incident can be reported to a higher level of management.
- 1.3 In addition to reporting an incident of workplace violence, the complainant may also:
 - a) access organizational support and assistance through their manager;
 - b) report the incident to AHS Protective Services;
 - c) seek counselling through the Employee and Family Assistance Program ("EFAP") (if complainant is an employee);
 - d) report the incident and receive assistance from a respective union or professional body;
 - e) take legal action as they feel appropriate;
 - f) file a complaint with the Alberta Human Rights Commission (where appropriate); and/or
 - g) report the incident to the police.

2. Preliminary Review of Incident

The manager, in consultation with a Human Resources representative, shall conduct a preliminary review of the allegation to determine:

- a) if a mutually agreeable resolution between the complainant and respondent is possible, having regard to all applicable factors; or
- b) if reasonable grounds exist to continue with a formal investigation.

3. Investigation of Incident

- 3.1 Human Resources, in consultation with the responsible manager(s), shall appoint an investigator(s). The investigator(s) is/are responsible for formally investigating the incident.
- 3.2 The investigation shall follow the principles of due process and natural justice. Outside authorities (e.g. professional bodies, law enforcement) may conduct a concurrent investigation. The outcome of the investigations may differ.

4. Outcome

- 4.1 If the respondent is a staff member or contractor and the evidence found in the investigation upholds the allegation of workplace violence, AHS shall initiate follow-up action (as appropriate) up to and including termination of employment or contract. Any disciplinary action shall be:
- a) determined based on the evidence supporting each allegation;
 - b) in accordance with applicable legislation, regulatory bodies, collective agreements or contracts; and
 - c) documented on the respondent's employment file or the contractor's 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 or the contractor's file.
- 4.3 If the respondent is a patient/client or visitor, AHS shall provide support to the complainant as required to assist with the resolution of the incident.
- 4.4 The manager, in consultation with a Human Resources representative, shall ensure that the complainant and respondent are informed in writing about the outcome of a workplace violence investigation, to the extent permitted by legislation, bylaws, or AHS policies.

5. False Reports

Documentation of an allegation of workplace violence 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 falsely, in bad faith, or maliciously by filing the allegation.

6. Confidentiality

- 6.1 All reasonable efforts shall be made to maintain confidentiality of allegations of workplace violence made pursuant to this policy, except where disclosure is required:
- a) by law;
 - b) to conduct a full and proper investigation;
 - c) to protect the safety of an individual; and/or
 - d) to comply with professional reporting obligations.
- 6.2 The complainant, the respondent, and any witnesses or other staff with knowledge of the workplace violence 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 violence (including notes of meetings, interviews, and other relevant materials) are:

- a) classified and protected in accordance with applicable legislation and AHS Information Security and Privacy policies; and
- b) managed in accordance with the AHS Records Retention Schedule (#1133-01).