

Corporate Policy Title Page

POLICY N (00362)	IUMBER: Formerly Code of Conduct	Date of latest revision: 2016/09/08	
ORIGINA	TING DEPARTMENT: Human Resources	Responsible VP: Renée Légaré	
New Po	licy		
Policy Ba he Code c ncompass	of Conduct will be amended to become a r ses and reflects TOH's standards of profes	r, incident or legislation driving this policy?) nore all-encompassing document to ensure it properly ssional conduct in the workplace (it will be an umbrella licable policies). As such, we have removed the	
•	viously covered under the Code of Condu) and created the "Respectful Behaviour ir	ct policy (dealing with Harassment, Bullying and Abus	
sets out rec workplace vorkplace I Safety Com s "appropri narassmen	quirements in regards to violence and hara sexual harassment" in the definition of "we harassment program be developed and m mittee or a health and safety representati ate in the circumstances"; confidentiality a	lation (Bill 132) effective September 8, 2016, which assment in the workplace: the addition of a definition of orkplace harassment"; a new requirement that the aintained in consultation with the Joint Health and ve; a new requirement to conduct an investigation that and reporting obligations relating to workplace linistry of Labour (MOL) to order an independent is expense.	
Applies to affiliated o Key Mess	rganizations who conduct business for or ages for Staff: (top points managers ne	eed to tell staff now)	
	e Code of Conduct policy (as employees to espectful Behaviour in the Workplace" poli	raditionally think of it) has had its name changed to the cy;	
	This policy will better reflect workplace expectations and the processes in place to handle workplace conflicts;		
132	It includes a new definition of workplace sexual harassment (required under new legislation - Bill 132, the <i>Sexual Violence and Harassment Action Plan Act,</i> an amendment to Ontario's <i>Occupational Health and Safety Act,</i> which came into effect on Sept. 8.);		
	 Process Improvements – more clarity and more encouragement to resolve conflict early: Early Resolution Process; Formal Resolution Process; Reviews/Appeals 		
	It will support employees by helping TOH to provide a safe and comfortable work environment built on the hospital's core values of respect, compassion, teamwork, and commitment to quality.		
Contact f	or Questions or Inquiries		



CORPORATE POLICIES AND PROCEDURES

RESPECTFUL BEHAVIOUR IN THE WORKPLACE No.: 01607 (Formerly ADM X350)

ISSUED BY: V.P. Human Resources	DATE OF APPROVAL: 2016/09/08
APPROVED BY: Senior Management	LAST REVIEW/REVISION DATE:
CATEGORY: Human Resources	IMPLEMENTATION DATE: 2016/09/08

POLICY STATEMENT:

The Ottawa Hospital (TOH or the Hospital) is committed to fostering a respectful, cooperative and professional workplace, free from discrimination, harassment and violence, to ensure a safe, secure and healthy work environment.

All TOH Employees (as defined below) and Members of Personnel (as defined below) are expected to embrace the Core Values (as defined below), and the acceptance and adherence to the Respectful Behaviour in the Workplace policy is a condition of employment. Each member of the team has a role to play in identifying, reporting and addressing instances of non-compliance with any aspects of this policy. It is incumbent on each and every member of the team to familiarize themselves with their respective responsibilities and to ensure that their behaviours are in accordance with TOH's established Standards of Behaviour and Core Values (as defined below). TOH believes that each person has the ability to improve their work environment and that it is each person's responsibility to assume ownership and accountability for their own actions and behaviours.

TOH will not tolerate any instances of Workplace Violence (as defined below), regardless of whether there is an injury or Traumatic Event (as defined below). This includes acts, threats or harassment of a sexual nature.

TOH is committed to providing a workplace that is free from bullying and harassment. If Employees or Members of Personnel feel they are being subjected to Bullying, Workplace Harassment or Abuse of Authority, they are encouraged to bring the matters forward. In situations where there may be conflict, it is in everyone's best interest, and a shared goal, to resolve conflict as quickly as possible.

DEFINITION(S):

1. Abuse of Authority: A Leader's improper use of power and authority related to the position held, where it is used to endanger an Employee's or Member of Personnel's job, undermine the performance of that job, threaten the economic livelihood of the Employee or Member of Personnel, or in any way interfere with or influence the career of an Employee or Member of Personnel. It includes such acts or misuse of power such as intimidation, threats, blackmail, or coercion.

Conduct involving the normal and proper exercise of responsibilities or authority related to attendance management, performance evaluation, the provision of advice, counselling, corrective discipline and other supervisory, managerial, or leadership functions does not constitute abuse of authority or harassment within the meaning of this policy.

- 2. Bullying: Bullying is a repeated pattern of intentional inappropriate behaviour, direct or indirect (aggressive or passive), whether verbal, physical or otherwise, performed by one or more Employees or Members of Personnel against another Employee, or group of Employees or Member(s) of Personnel which could reasonably be regarded as undermining the individual's right to dignity at work.
- **3. Complainant(s)**: A person or persons making a verbal or written complaint regarding a breach of the Standards of Behaviour and Core Values, incidents of Workplace Violence, discrimination or harassment under this policy.
- 4. Conflict of Interest: Any situation in which an Employee has a personal, professional, occupational or financial relationship or interest that may affect or compromise, or appear to affect or compromise, his or her objectivity, judgment or actions in carrying out his or her TOH duties.

A conflict of interest can be real, potential or perceived in nature.

- I. A real conflict of interest arises where an individual has a bias, or a personal, occupational, professional or financial relationship or interest that may affect or compromise, or appear to affect or compromise, his or her work with TOH.
- **II.** A potential conflict of interest incorporates the concept of foreseeability: when an individual can foresee that a private or personal interest might someday be sufficient to influence his or her work with TOH, but has not yet (for example, an identified future commitment).
- **III.** A perceived or apparent conflict of interest may exist when a reasonable, well informed person has a reasonable belief that an individual has a conflict of interest, even if, in fact, there is neither a real nor a potential conflict.
- 5. Domestic Violence: A range of behaviours or actions taken by a person to control and dominate another person. It is characterized by abusive, coercive, forceful, or threatening acts or words used by one member of a family, household, or intimate relationship against another.

- 6. Employees: All permanent and temporary full-time, part-time, and casual persons employed by TOH are considered Employees. For the purpose of this policy only, volunteers will be referred to as Employees.
- 7. Employee & Family Assistance Program (EFAP): Confidential services to help Employees and their families to work through difficult health, personal and workrelated situations.
- 8. External Consultant: A qualified person who is contracted by TOH to provide investigation and/or mediation services with respect to complaints made under this policy. The external consultant has the authority to determine whether there has been a breach of this policy; however, TOH maintains the right to make recommendations, propose resolutions to the appropriate persons, as well as make all final decisions pertaining to disciplinary action.
- **9. Frivolous**: A matter that is not serious, not reasonably purposeful.
- **10. Leaders:** Individuals directly supervising the work of Employees. For the purposes of this policy, the term "Leader" includes, but is not limited to, Supervisor, Manager, Director, Executive Vice-Presidents, Chief Operating Officers, Chief Executive Officers employed by TOH.
- **11. Members of Personnel:** For the purpose of this policy only, Members of Personnel include all students, physicians, contractors, and persons from affiliated organizations conducting business for, or at, TOH.
- **12. Respondent(s):** A person or persons alleged by a Complainant to have committed an act in breach of this policy.
- **13. Sexual Violence:** Any sexual act or act targeting a person's sexuality, whether the act is physical or psychological in nature, that is committed, threatened or attempted against a person without the person's consent, and includes sexual assault, sexual harassment, stalking, indecent exposure, voyeurism and sexual exploitation.
- **14. Standards of Behaviour and Core Values:** The Hospital has established several behavioural expectations to ensure that all Employees and Members of Personnel conduct themselves in a manner that is in keeping with the Core Values of the Hospital to ensure a safe, secure, healthy and professional workplace.

i. Respect for the Individual

We treat everyone at The Ottawa Hospital with fairness, equity and respect. Our linguistic and cultural diversity are strengths in the delivery of our programs and our response to community needs.

- a) I treat patients and visitors in the same manner I wish my loved ones to be treated. I treat colleagues in the same manner as I wish to be treated.
- b) I ensure that patients and families are served in the official language of their choice.

- c) I value and respect cultural, spiritual and personal diversity. I remain open to new viewpoints, ideas, talents and abilities.
- d) I treat patients as the most important members of the patient-care team, and include patients and family in decisions about their care.
- e) I maintain confidentiality and privacy standards.
- f) I use discretion when discussing personal, patient and organizational information.
- g) I respect others by maintaining their physical privacy and personal space. I
 protect their personal dignity.

ii. Compassion

We care for patients and their loved ones with dignity and respect in a safe, healing environment. We value the physical, emotional and spiritual health of our patients and colleagues.

- a) I am polite, respectful and courteous. I demonstrate compassion and listen with care.
- b) I greet everyone by making eye contact, introducing myself by name and role, smiling and speaking in a warm and friendly voice.
- c) I keep patients and families informed by explaining what I am doing, letting them know what to expect and ensuring all questions are answered.
- d) I provide legible, understandable and specific communications and avoid technical terms and acronyms when communicating with patients.
- e) I meet patients' and families' immediate needs or kindly take them to someone who can.
- f) I offer to escort people to their destination, or find someone who can.
- g) I use positive language and avoid destructive conversations.

iii. Working Together

We believe that collaboration and working together are essential to restoring and improving health. We communicate honestly and openly and value the contributions of all team members.

- a) I fulfill my responsibilities as an important member of the team. I maintain a high level of professionalism and competence in my job.
- b) I take initiative and proactively assist others with tasks and problem solving.
- c) I collaborate and communicate effectively, whether in person, in writing or using technology, to ensure excellent patient care and service.
- d) I maintain a professional image by wearing neat, appropriate clothing and jewelry, avoiding scents. I maintain good personal hygiene. I wear my ID badge above my waist and ensure my name and photograph are visible at all times.
- e) I resolve conflicts respectfully, directly and promptly with the individual(s) involved.
- f) I recognize and celebrate others' achievements and successes. I show appreciation and say 'Thank You'.

iv. A Commitment to Quality

We value our ability to listen, to learn from each other and to continuously improve. We aim to meet and exceed nationally and internationally recognized standards for quality and excellence in the delivery of patient care, and in our education and research programs.

- a) I provide suggestions and new ideas to improve the quality of care and service.
- b) I am committed to the safety of patients, visitors and team members. I report errors, near misses and safety hazards and follow up to ensure action is taken. I follow proper hand-hygiene practices.
- c) I take pride in my work environment. I maintain a safe and clean work area and take appropriate action when needed. I respect property and care for equipment.
- d) I acknowledge and apologize when a problem occurs. I actively listen and correct the problem by taking action or informing the appropriate person who can correct the problem.
- e) I use health-care resources responsibly and wisely.
- **15. Traumatic Event:** An occurrence or situation which causes or is likely to cause extreme physical and/or emotional distress to an Employee or Member of Personnel and may be regarded as outside the normal range of experience of the people affected.
- **16. Vexatious**: Without reasonable or probable cause or excuse; causing or tending to cause annoyance, frustration, or worry.
- **17. Witness(es):** A person or persons who sees, hears or otherwise observes an event, incident or occurrence.
- **18. Workplace:** Generally, the Workplace is defined as the premises of TOH. However, where an allegation under this policy is made regarding activities which occur off the premises of the Hospital, the Hospital will investigate the matter. Where it is found that the relationship between the individuals and the nature of the allegations are related to their association with the Hospital, the complaint will be investigated as if it occurred in the Workplace. Some examples include:
 - I. at the Workplace;
 - II. at work-related social functions;
 - III. at conferences, seminars and training sessions;
 - **IV.** during work-related travel;
 - V. e-mail and other electronic communication including social media; or
 - VI. over the phone including voicemail.
- **19. Workplace Violence (includes Threat of Workplace Violence):** The exercise of physical force by an Employee or Member of Personnel against an Employee or

Member of Personnel, in a Workplace, that causes or could cause physical injury to the Employee or Member of Personnel.

An attempt to exercise physical force against an Employee or Member of Personnel, in a Workplace, that could cause physical injury to the Employee or Member of Personnel.

A statement or behaviour that is reasonable for an Employee or Member of Personnel to interpret as a threat to exercise physical force against the Employee or Member of Personnel, in a Workplace, that could cause physical injury to the Employee or Member of Personnel.

Examples of Workplace Violence include, but are not limited to:

- I. Stalking;
- **II.** Threatening behaviour such as shaking fists, destroying property or throwing objects;
- III. Verbal or written threats that express an intent to inflict harm;
- **IV.** Physical attacks;
- **V.** Any other act that would arouse fear in a reasonable person in similar circumstances.
- **20. Workplace Harassment:** Engaging in a course of vexatious comment or conduct against an Employee or Member of Personnel in a Workplace that is known or ought reasonably to be known to be unwelcome. Workplace Harassment includes workplace sexual harassment. Workplace Harassment may include, but is not limited to a pattern of behaviour of repeated words or actions, such as making jokes, offensive remarks or innuendos that demean, ridicule, intimidate, offend or serve to isolate a person in the workplace.
 - i. Workplace Harassment does not include:
 - a) Performance management, including, but not limited to: routine coaching and feedback; fair and objective performance appraisals; Performance Improvement Plans; appropriate and justifiable disciplinary action;
 - b) Providing fair and reasonable constructive feedback or evaluation of the work completed by a colleague or a direct report;
 - c) Assignment of additional work;
 - d) Minor differences of opinion and/or occasional workplace conflict that does not escalate;
 - e) Occasionally showing frustration or annoyance, where such behaviour is justified and displayed in a respectful manner without any threat of violence, intimidation or other reprisals.
- 21. Workplace Sexual Harassment: Engaging in a course of vexatious comment or conduct against an Employee or Member of Personnel in a Workplace because of sex, sexual orientation, gender identity or gender expression, where the course of comment or conduct is known or ought reasonably to be known to be unwelcome, or making a sexual solicitation or advance where the person making the solicitation or advance is in a position to confer, grant or deny a benefit or advancement to the Employee or Member of Personnel and the person knows or ought reasonably to know that the solicitation or advance is unwelcome.

Workplace sexual harassment includes unwelcome solicitation or advances from a Leader or another person who has the power to reward or punish the Employee or Member of Personnel.

ALERTS: N/A

PROCEDURE:

1. Scope

The Respectful Conduct in the Workplace policy applies to all Employees and Members of Personnel, regardless of level, position or union affiliation.

Note: Workplace Harassment or violent acts or threats by a Member of Personnel against another Member of Personnel are managed by their respective employer(s).

Note: Harassment or violent acts or threats by members of the public, including patients, directed at Employees or Members of Personnel are managed through the Violence and Harassment in the Workplace Policy, #00245

Note: A physician/professional with Hospital privileges who alleges harassment or violent acts or threats by an Employee or Member of Personnel should refer to the procedures outlined in Medical Staff Rules and Regulations – Code of Conduct Policy #00135.

2. Guiding Principles

- i. Collaboration and Cooperation: Abuse of Authority, Bullying and Workplace Harassment Complaints are a shared concern between Leaders, affected Employees or Members of Personnel, and unions, and all shall work together in a collaborative and respectful manner.
- **ii. Confidentiality:** All persons associated with a complaint and/or its resolution must recognize the serious nature of such cases, and respect the sensitivity and confidentiality of the situation. Every effort will be made to preserve the dignity and self-respect of all parties concerned. All information and documentation concerning a complaint case will be kept as confidential material except where disclosure is necessary for the purposes of protecting the Employee or Member of Personnel, investigating or resolving the complaint, taking corrective action, or as otherwise required by law.
- **iii. Criminal Conduct:** In cases where harassment leads to acts or behaviours that constitute criminal conduct under the Criminal Code of Canada, Employees may choose to proceed with notifying the police, even when TOH is following the administrative steps set out in this policy. In any event, the Hospital will assist Employees or Members of Personnel in filing their complaint with the police. At such time, the appropriate law enforcement agency may conduct its own independent investigation.
- iv. Frivolous and Vexatious complaints: Any complaint found to have been made in a frivolous and vexatious manner will be considered serious misconduct and

may result in severe disciplinary action being taken by the Hospital in accordance with the Hospital's Discipline Policy.

- v. Freedom from reprisal or retaliation: All members of TOH Leadership must ensure that every effort occurs to fully protect Employees or Members of Personnel, be they the Respondent, or, a Witness or other persons involved, from any form of retaliation for filing a complaint or for participating in an investigation, during the investigation process and following its conclusion.
- vi. **Parallel Proceedings:** Where an Employee chooses to also file a complaint with an external body or file a grievance under the applicable collective agreement, TOH will determine, at its discretion, whether to initiate or to continue an investigation under this policy.
- vii. Records: Human Resources will retain records of any investigations that are completed. Where discipline results from an investigation's findings, this disciplinary action will remain on the Employee's file for a timeframe determined by the Employee's collective agreement and/or applicable Discipline Policy. Where there is no evidence of a violation of this policy, and the complaint was made in good faith, no documentation of the complaint will be placed in the Employee file of the Respondent, or of any person involved in the complaint.

3. Responsibilities

- i. Employees and Members of Personnel are responsible for:
 - a) Being aware of and complying with this policy;
 - b) Following good personal hygiene, dressing professionally and cleanly with minimal accessories, and adhering to all policies, procedures, rules or regulations relating to appearance and dress designed in the interest of patient care or health and safety;
 - c) Assuming ownership and accountability for their own actions and behaviours;
 - d) Being aware of and demonstrating behaviours that are consistent with TOH Standards of Behaviours and Core Values;
 - e) Raising concerns to their Leader about other Employees or Members of Personnel who are not adhering to these standards;
 - f) Attempting to resolve the matter by discussing inconsistent behaviour with the person involved and making it clear that the behaviour is unwelcome, in a confidential, positive and professional manner;
 - g) Reporting behaviours where they witness incidents of violence, Abuse of Authority, Bullying or Workplace Harassment where they themselves are not the target;
 - h) Reporting conflicts of interest to their Leader which involve themselves;
 - i) Reporting Conflicts of Interest to Human Resources if the conflict of interest involves the Employee's or Member of Personnel's Leader;
 - j) Submitting any Workplace Harassment complaint in good faith;
 - Reporting any incident of Workplace Violence or Workplace Harassment, for which they have knowledge of;
 - I) Advising a manager if they have a restraining order against someone, including the particulars of the order;

- m) Co-operating with any efforts to investigate and resolve matters arising under this policy;
- n) Participating in education and training programs and being able to respond appropriately to any incident of Workplace Violence or Workplace Harassment;
- o) Informing their Leader if they suspect or are aware of a Domestic Violence situation involving a colleague;
- p) Informing their Leader if they suspect a colleague's spouse/partner may come into the Workplace and be violent.

ii. Managers are responsible for:

- a) Promoting a positive and respectful working environment, free of violence, discrimination and harassment;
- b) Requiring that each individual under their direction is aware of and upholds the principles and terms of all policies and procedures relevant to their job;
- Advising unionized Employees of their right to union representation and advising the union when a complaint has been filed by a bargaining unit member;
- d) Protecting Employees and Members of Personnel from any form of retaliation;
- e) Assisting with any action to be taken to resolve any complaints (providing that they have no direct involvement in the complaint);
- f) Maintaining the confidentiality of the persons involved in any investigations;
- g) Informing Employees about services available through EFAP;
- h) Reporting Conflicts of Interest to their leader;
- i) Liaising with Human Resources where needed for assistance in investigating behaviours that are not in keeping with this policy;
- j) Undergoing training to recognize, prevent, manage, respond to and investigate Workplace complaints, and understanding when to involve Human Resources;
- k) Taking all reasonable precautions in the circumstances for the protection of an Employee or Member of Personnel if TOH becomes aware of a Workplace Violence/Domestic Violence situation that would likely expose an Employee or Member of Personnel to physical injury in the Workplace;
- I) Participating in the development and implementation of a safety plan, as required;
- m) Reviewing all reports of Workplace Violence and Workplace Harassment in a prompt, objective and sensitive manner, respecting the privacy of all concerned as much as possible;
- n) Facilitating medical attention and appropriate support for all those either directly or indirectly involved in a Workplace incident;
- o) Informing and ensuring that any Employee involved in a Workplace Violence or Workplace Harassment incident follow up with Occupational Health and Wellness if the incident in question required any medical attention and/or has rendered the Employee disabled from performing his/her usual work NOTE: This clause applies to Employees only. Members of personnel should report to their employer;
- p) Cooperating fully with any Ministry of Labour Investigators that may investigate the incidents;

- q) Implementing any and all recommendations from Security, Safety, Human Resources or the Ministry of Labour;
- r) Understanding the personal and corporate liability for Abuse of Authority, Bullying and Workplace Harassment in the Workplace;
- Advising Human Resources when an Employee indicates a wish to file a formal written complaint, and reporting up within their respective portfolio as needed;
- t) Assisting with the process, including, but not limited to: conducting investigations in an expeditious, thorough, impartial and confidential manner, facilitating any reassignments or changes in reporting relationships, releasing Employees who need to be interviewed, being flexible with working environments and schedules where possible.

iii. Human Resources is responsible for:

- a) Supporting TOH in its commitment to providing a work environment where the dignity and worth of every individual is respected;
- b) Communicating this policy to all Employees and informing them of their options and rights under this policy;
- c) Providing appropriate training programs for Leaders and Employees, as required;
- d) Offering EFAP to Employees;
- e) Providing confidential advice to Employees, if requested, on how to deal with a situation of Workplace Harassment and/or Workplace Violence and how to bring forward a complaint;
- f) Providing a formal process to receive, review and address written complaints that were not successfully resolved through the Employee's Leadership structure or complaints which directly involve the Employee's Leadership;
- g) Overseeing complaint investigations to ensure they are carried out in a thorough, expeditious, neutral and objective manner;
- h) Maintaining confidentiality except where disclosure is necessary to conduct an effective investigation into a complaint;
- i) Consulting on disciplinary sanctions, if any, following the completion of an investigation.
- j) Collaborating with management, Security, union (if applicable) and other partners to ensure that investigations are completed in an expeditious and thorough manner;
- k) Advising unionized Employees of their right to union representation and advising the union when a complaint has been filed by a bargaining unit member;
- Participating in the development and implementation of a safety plan, as required;
- m) Following up on the result of investigations;
- n) Completing any Human Resources action required as the result of an investigation, including disciplinary action.
- o) Providing support and advice to Leaders;
- p) Conducting investigations in an expeditious, thorough, impartial and confidential manner;
- q) Documenting all discussions about an investigation into a complaint shall be documented, and a file kept that includes all relevant documents, including as applicable, but not limited to: the complaint form; any incident forms; written communications with the Complainant, Respondent and any Witnesses;

interview reports; findings and written decisions; and report of disciplinary actions taken.

iv. Union Representatives are responsible for:

- a) Advising bargaining unit members of this policy and supporting the member during any of the processes under this policy;
- b) Communicating information received concerning complaints under any section of this policy to the appropriate person;
- c) Maintaining the confidentiality of the persons involved in any investigations under this policy.

v. The Complainant in any investigation is responsible for:

- a) Making every effort to resolve the conflict either themselves or within their leadership group (i.e. supervisor/manager/director, vice-president);
- b) Making themselves available to meet with the investigator to review their complaint;
- c) Maintaining confidentiality with respect to any complaint.

vi. The Respondent in any investigation is responsible for:

- a) Making themselves available to meet with the investigator to review the complaint;
- b) Reviewing the written complaint;
- c) Maintaining confidentiality with respect to any complaint;
- d) Abstaining from reprisal or the threat of reprisal or retaliation.

vii. Security is responsible for:

- a) Responding to all incidents of violence and reported threats received, or the potential for violence;
- b) Participating in the development and implementation of a safety plan, as required;
- c) Participating in investigations, as deemed appropriate, required under this policy;
- d) Providing information to the Joint Health & Safety Committees as required;
- e) Assisting Employees or Members of Personnel with police reports if required;
- f) Participating in discussions surrounding recommendations following incidents.

viii. Safety is responsible for:

- a) Communicating, implementing and enforcing any Ministry of Labour orders or recommendations under this Section;
- b) Participating in the development and implementation of a safety plan, as required;
- c) Communicating and liaising with the Ministry of Labour.

ix. The External Consultant is responsible for:

- a) Being aware of and evaluating adherence to this policy;
- b) Advising the respective parties of their rights;
- c) Maintaining confidentiality except where disclosure is necessary to conduct an effective investigation into a complaint;
- d) Conducting the investigation thoroughly and expeditiously;

- e) Conducting investigation/mediation in a neutral and objective manner, which may involve the Leader;
- Facilitating a process of attempting to reach a mutually satisfactory resolution to the complaint;
- g) Documenting the process and outcome;
- h) Making a determination as to whether there has been a violation of this policy.

4. Procedures

i. Violations of Standards of Behaviour and Core Values

Any violations of the Hospital's Standards of Behaviour and Core Values shall be reported to the Employee's Leader or the Employee's next level of Leadership in the case of a complaint against the Leader.

5. Threats of Workplace Violence (includes Sexual Violence/Domestic Violence)

Any instance of threatening violence or actual violence must be reported immediately to Security. All reports of this nature will be treated with the utmost confidentiality, urgency and sensitivity. If an Employee or Member of Personnel feels threatened by another Employee or Member of Personnel, or an Employee or Member of Personnel witnesses threatening actions or behaviours or is either themselves the victim of Domestic Violence, or suspects that their colleague might be the victim of Domestic Violence, and that the violent spouse may enter the Workplace, the following steps should be followed:

a) Employees or Members of Personnel ensure their own immediate physical safety, remove themselves from the situation and report to their Leader, Human Resources and/or Security, as soon as possible following the incident.

 b) Depending on the situation, Employees or Members of Personnel will either approach their Leader with information about the threat, or will report the threatening incident directly to Security. Security can be called at:

- Civic Campus 12999
- General Campus 72999
- Riverside Campus 82999
- Prince of Wales 14888
- Queensway Carleton Site 14888
- c) Employees will report to Occupational Health and Safety, using the Employee Incident Report Form (EIR), all incidents of Workplace Violence requiring any medical attention and/or rendering them disabled from performing their usual work.

NOTE: Applies to Employees only. Members of Personnel should report to their respective employer.

Process Document is available upon request. Please contact the Dispute Resolution Team at <u>disputeresolution@toh.ca</u>

6. Harassment/Sexual Harassment, Abuse of Authority, and Bullying Employees or Members of Personnel should make every reasonable effort to resolve any conflict informally either themselves or within their Leadership team.

Note: The processes listed below are applicable to Employees however are available for Members of Personnel to consider. Members of Personnel are also encouraged to consult with their respective Leaders/Human Resources representatives.

Employees are encouraged to discuss the conflict directly with the person involved, advising that the behaviour is not welcome. If the situation continues or if the Employee is uncomfortable or unwilling to confront the other party directly, they are encouraged to report the conflict in confidence to their Leader or Human Resources. If the complaint is against their Leader, they are encouraged to report the conflict in confidence to the next level of Leadership or Human Resources.

The Leader/Human Resources will facilitate through mediation where possible to reach a mutually satisfactory resolution to the conflict, ensuring any mediation is conducted in a neutral and objective manner. Both parties are to participate openly in this attempt at resolution and follow the process outlined below:

Early Resolution Process:

- a) Employees discuss the conflict directly with the person involved in the conflict, if they feel safe to do so; the communication needs to be prompt, thorough and in a respectful manner.
- b) Where the conflict remains unresolved or if the conflict involves a Leader, Employees escalate discussion of the conflict to the next level of Leadership.
- c) If the conflict remains unresolved, Employees consult Human Resources. If it is deemed appropriate, Human Resources will facilitate a discussion or attempt to mediate a resolution.

Formal Resolution Process:

- a) Where a conflict remains unresolved, Employees submit a written complaint to their Leader or Human Resources providing information with respect to dates, times, locations, descriptions of behaviour, witnesses, etc.
- b) Leader/Human Resources will meet with the Complainant, Respondent, and relevant witnesses.
- c) As an interim measure, and based on operational capabilities, the Respondent and/or the Complainant may be reassigned or placed on a non-disciplinary leave with pay pending the resolution of the complaint.
- d) The Hospital will launch an investigation, appropriate in the circumstances, into complaints that are deemed to meet the applicable definitions contained in this policy. Leader/ Human Resources will provide findings and recommendations if applicable.
- e) Both the Complainant and the Respondent will be advised of the outcome of the investigation.

Note: Human Resources will determine if a formal investigation will take place and if an External Consultant is to be contacted to conduct the investigation.

Note: Complaints based on an act which occurred more than two (2) years before the receipt of the complaint will not be considered unless the Complainant has valid reason for not filing the complaint within those two (2) years.

All parties to a complaint filed under this policy are expected to maintain confidentiality throughout the investigation process and after its conclusion.

Leaders will ensure that every effort is made to fully protect Employees from any form of retaliation, be they the Complainant, the Respondent, a witness or other persons involved.

Process Document is available upon request. Please contact the Dispute Resolution Team at <u>disputeresolution@toh.ca</u>

Reviews/Appeals:

- a. If parties to the complaint are unsatisfied with the investigator's findings they may appeal the outcome within 20 calendar days following receipt of the investigation report;
- b. The request for appeal must be submitted in writing, to the Executive Vice-President, Human Resources, indicating the grounds upon which the appeal is being sought;
- c. An appeal may be allowed based on the following grounds:
 - New information was raised which was not available at the time of the investigation, that may impact the findings;
 - The findings seem unwarranted based on the evidence gathered and provided;
 - There is evidence of bias by the investigator;
 - There was a blatant omission of facts, which could impact the findings.
- d. Requests for an appeal of the decision of the Executive Vice-President, Human Resources, may be made in writing to the CEO. This will be considered the final appeal.
- e. Unionized Employees may file a grievance.

Potential Outcomes:

If there is evidence of a violation of any component of this policy further consideration may be required, and appropriate corrective action may be taken.

RELATED POLICIES / LEGISLATION:

- 1. Conflict of Interest Policy;
- 2. Discipline Policy;
- 3. Violence & Harassment in the Workplace Policy.