



South East Toronto

Family Health Team

**Workplace Violence and Harassment
Policies and Guidelines**

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Workplace Violence and Harassment Policies and Programs

Policy: Violence Policy and Program	
Policy Number: WVH 1.0	Section: Health and Safety – Workplace Violence
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Workplace Violence Policy and Program

A. INTRODUCTION

South East Toronto Family Health Team (SETFHT) is committed to building and preserving a safe working environment. Actions of violence in the workplace will not be tolerated against SETFHT’s workers.

SETFHT is committed to assessing the risk factors in the workplace to identify workers who may be exposed to violence. In conjunction with our workers, we will develop a program to minimize or eliminate the risks of violence in the workplace. SETFHT is also committed to training and informing workers on the contents of the Program to ensure that they are knowledgeable of the risk factors and how to eliminate or respond to violent situations.

SETFHT’s Board of Directors has designated the Joint Health and Safety Committee as the Officers in charge of the Violence Prevention Program.

A copy of this Violence Policy and Program shall be posted in a readily accessible location for use by all workers.

B. SCOPE OF VIOLENCE POLICY AND PROGRAM

This Violence Policy and Program applies to all full-time, part-time, temporary and casual employees. It also applies to all contractors, students, AND volunteers who provide services to SETFHT. This policy will use the terms “workers” to refer to those persons who are covered by the scope of this policy.

This Violence Policy and Program applies to any incident of workplace violence perpetrated against workers by any other workers, including supervisors or other members of management, members of the Board of Directors, patients/clients, family members, visitors, any person working on behalf of or affiliated with SETFHT, or members of the public.

Any workers that subject other workers to workplace violence may be subject to disciplinary action up to and including termination of employment for cause or any other applicable and available disciplinary remedies.

Other perpetrators of workplace violence against workers will be subject to whatever measures are reasonably available to ensure the safety of the workers.

C. DEFINITIONS

Workplace Violence

- The exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker
- An attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker
- A statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker

Violence can be classified into four categories:

- The perpetrator who has no relationship to the workplace (e.g. burglary by stranger);
- The perpetrator who is a patient/client or visitor or other third party affiliated with SETFHT who becomes violent towards a worker;
- The perpetrator who is a current or former worker or other individual performing work at the workplace; and
- The perpetrator who has an intimate relationship with a worker (e.g., domestic violence).

Examples of workplace violence include, but are not limited to, the following:

- Verbally threatening to attack a worker;
- Leaving threatening notes at, or sending threatening e-mails, to a workplace;
- Shaking a fist in a worker's face or making other threatening gestures;
- Wielding a weapon at work;
- Hitting or trying to hit a worker;
- Throwing an object at a worker;
- Sexual violence against a worker; and
- Kicking an object the worker is standing on, such as a ladder.

Workplace violence does not require that the perpetrator have the capacity to appreciate that his or her actions could cause physical harm. For example:

- A person with a medical condition that causes them to act out physically in response to a stimulus in their environment, resulting in injury to a worker. This would still be considered workplace violence.
- Situations where two non-workers, patients/clients for example, are fighting. A worker could be injured when he or she intervenes. The non-worker may not have intended their violence to spill over to anyone else, but they used physical force, which could ultimately cause physical injury to a worker.

However, workplace violence **does not** include a situation where a worker is accidentally hurt (i.e. a worker tripping over an object and then falling or pushing into another worker).

Workplace

Any location where any worker is carrying out any work-related function

Examples of possible "workplaces" for SETFHT workers:

- Multi-site office environment (any of the clinic sites and the administration office);
- SETFHT-sponsored conference or training site;
- Worker-accompanied patient/client transport;

- Any location workers are required to be during the course of their duties (i.e. patient/client apartment or worker-patient/client meeting location (e.g. coffee shop)); and
- Patient/client residences or community settings.

Management

Managers who control or direct the business of SETFHT

Supervisor

A person who has charge of a workplace or authority over a worker, whether or not they are managers

Complainant

The worker who reports a violent or potentially violent incident

Respondent

The person (worker, client, etc.) about whom a complaint of violence or potential violence is made

D. ROLES AND RESPONSIBILITIES

Supervisors and Management

SETFHT’s supervisors and management must ensure, as much as reasonably practical, that workers are not subjected to violence in the workplace.

Management will take corrective action with anyone under their direction who subjects workers to violence. Supervisors and management will ensure all workers are aware of the risks of violence in the workplace. Management will ensure that workers are properly trained and equipped to protect themselves.

SETFHT, its managers and supervisors are responsible for creating a safe working environment, free from violence. Anyone aware of violence in the workplace must bring it to the attention of their supervisor or management so that the issue can be addressed immediately.

Workers

Every worker contributes to the creation of a safe and healthy work environment by demonstrating respectful and appropriate conduct at work.

All workers must accept as a personal responsibility their own role in eliminating the risk of workplace violence in the day-to-day activities of their own work. Therefore, workers must:

- comply with this Violence Policy and Program and refrain from any acts of violence;
- work together in a professional manner and resolve issues in a non-violent manner. Workers are to bring issues to their supervisor, if they cannot be mutually resolved;
- report to their immediate supervisor or Human Resources any incidents of violence or potential risk of violence they may experience or witness. This includes issues in the worker’s non-work life that may impact on the worker’s or other workers’ safety, such as domestic violence;
- attend training and information sessions provided by SETFHT to reduce violence or risks of violence; and
- co-operate with police, SETFHT investigators or other authorities as required during any investigation related to violence.

The Officer* in Charge of the Violence Prevention Program will:

- ensure that the procedures in the Violence Policy and Program are implemented;
- review all reports submitted regarding workplace violence and other incident reports as appropriate pertaining to incidents of workplace violence that result in personal injury or threat of personal injury, property damage, or police involvement and make recommendations for corrective measures to minimize recurrence of incidents ;
- in conjunction with the Joint Health and Safety Committee (JHSC) respond to concerns related to workplace violence and communicate these to management;
- review violence policies and procedures annually to ensure that this Violence Policy and Program and procedures are current and relevant ; and
- conduct a workplace violence risk reassessment as necessary and provide recommendations to management to reduce or eliminate the risk of violence.

**Note – officer will be Human Resources Manager unless otherwise indicated.*

E. WORKERS' RIGHT TO REFUSE UNSAFE WORK

A worker who reasonably believes that workplace violence may endanger himself or herself has a right to refuse work. The process for a work refusal is set out in *Schedule A* attached to this Violence Policy and Program.

A worker's right to refuse work in unsafe conditions is important. However, it should not be the first and automatic response to an unsafe working condition. A worker who identifies unsafe situations must first (if time permits) report the health and safety concern to his/her supervisor and the JHSC. The worker should work in conjunction with these parties to find solutions to reduce/eliminate the risk before it becomes an immediate danger.

If a worker feels like their safety is at risk or is in an uncomfortable situation, should keep in mind the following tactics to protect themselves:

- Move counseling session to main clinic space;
- Type 'Come and knock on my door' instant message if they want someone to come interrupt the session;
- Press the "Little Green Button" on the computer which will send an alert to all computers in the clinic;
- Let people around them know about the patient so they are aware; and
- Keep the door slightly ajar during the counseling session.

Workers must also be cognizant of their standards of practice as established by their professional college or regulatory body:

- Nurse Practitioners – http://www.cno.org/docs/prac/41038_StrdRnec.pdf
- Registered Nurses – <http://www.cno.org/pubs/compendium.html>
- Registered Dietitians – <http://www.cdo.on.ca/en/aboutRD/practice.asp>
- Social Workers and Mental Health Workers – http://www.ocswssw.org/en/code_of_ethics.htm
- Pharmacists – <http://www.ocpinfo.com/regulations-standards>
- Chiropodists – <http://www.cocoo.on.ca/index.html>
- Psychologists - http://www.cpo.on.ca/Professional_Conduct_and_Concerns.aspx

Please note that workers cannot be threatened, dismissed, disciplined, intimidated or coerced for complying with the work refusal process.

F. REPORTING PROCEDURES

1. In situations where the violent act or threatened violent act is serious, workers should call 911 immediately.
2. Workers must report all threats and attempted or actual violence, to their immediate supervisor or to a member of the Board of Directors.
3. The supervisor or JHSC member will take immediate action to resolve any situation that involves violent behaviour and to ensure the safety of workers.
4. The supervisor or JHSC member will ensure the Complainant and any other workers receive first aid or medical aid as required.
5. If the Respondent is a patient/client, the supervisor or JHSC member will notify the patient/client's attending physician and health care team. It is also expected that the Complainant make note of the incident in the patient/client's electronic medical record and send an instant message to the patient/client's primary care provider.
6. The Complainant must complete the Violent Incident Reporting Form which records important details of the incident including the date and time of the incident, the nature of the violence, and names of people who may have witnessed the incident.
7. If the Complainant refuses to complete or sign the Violent Incident Reporting Form, the supervisor or JHSC member will complete the form to the best of their ability.
8. The failure of the Complainant to complete the Violent Incident Report Form will not preclude SETFHT from investigating or dealing with the alleged violent incident; however, it may restrict SETFHT's range of possible actions in this regard.
9. The supervisor or JHSC member will report all incidents of violence (including situations where there is a reasonable expectation that the threat may become violent) to the Executive Director as soon as possible.
10. Incidents that constitute criminal acts will be referred to the local police department or other appropriate policing agency.

Notification of Workers at Risk

When an actual incident of violence has occurred or when it is reasonably expected to become violent, the Organization will take the following steps to ensure the safety of all workers:

- The supervisor or JHSC member will advise the workers who are at risk. They will also coordinate a review of current procedures to minimize risk.
- Depending on the circumstances, appropriate steps will be taken to protect workers.

Incident Reporting Requirements

If a person is disabled from performing his/her usual work or requires medical attention because of an incident of workplace violence at a workplace, but no person dies or is critically injured because of that occurrence, SETFHT must give written notice and details of the occurrence within 4 days to:

- The JHSC; and
- a Director from the Ministry of Labour if an inspector from the Ministry requires notification.

G. INVESTIGATING VIOLENT INCIDENTS

1. Human Resources will appoint an internal or external person to investigate all reported incidents of actual or threatened violence.
2. The Complainant and the Respondent will be advised of the investigation.
3. The investigation will be conducted in a fair, efficient and prompt manner. The exact conduct of the investigation will depend on the nature and seriousness of the allegation. Management has the discretion to determine the appropriate investigation procedures in the circumstances. Generally, the investigation will consist of the following:
 - a. Interviews will be conducted of the Complainant, the Respondent, and any witnesses.
 - b. The investigation will involve:
 - obtaining all pertinent information from the Complainant;
 - informing the Respondent of the details of the complaint, and getting her or his response;
 - interviewing any witnesses;
 - deciding whether, on a balance of probabilities, the violent incident or threat of violence did take place; and
 - recommending appropriate remedies, penalties, or other actions.
4. Human Resources may separate the Complainant and the Respondent during an investigation, if necessary, and if reasonably possible.
5. If the Respondent is a patient/client, the investigation will also focus on the possible cause of the abusive behaviour and the level of responsibility of the abusive client, including the patient/client's cognitive ability to understand his/her actions.
6. All documents related to a complaint or incident of workplace violence, including the written complaint, witness statements, investigation notes and reports, and documents related to the complaint, will be maintained by the investigator separate from personnel files.
7. The investigator shall determine whether there is:
 - a. Sufficient evidence to substantiate that workplace violence has occurred and/or that this Violence Policy and Program was contravened; or
 - b. Insufficient evidence to substantiate that the workplace violence has occurred and/or that this Violence Policy and Program was contravened
8. The investigator will complete a Violent Incident Follow Up Form.
9. All Violent Incident Reports and Violent Incident Follow Up Forms will be sent to the Officer in Charge of the Violence Prevention Program (i.e. the JHSC) for review. Certain information may be withheld to protect the confidentiality of workers and other parties, as deemed appropriate by management.
10. The Officer (i.e. the JHSC) will review current procedures, and any recommendations to revise the Violence Prevention Program will be forwarded to Human Resources.

11. Any proposed revisions to the Violence Prevention Program will be forwarded to other members of the JHSC for consultation prior to implementation.

H. CORRECTIVE ACTION AND DISCIPLINE

Corrective Action where the Respondent is a Worker

If management decides there has been a violation of this Violence Policy and Program by a worker, the following conditions should be considered when determining corrective action:

- the impact of the incident on the Complainant;
- the nature of the incident;
- the degree of aggressiveness and physical contact;
- the period of time and frequency of the incidents; and
- the vulnerability of the Complainant.

The following corrective actions may be considered depending on the particular incident and the factors set out above:

- apology;
- violence risk assessment by professional;
- referral to an assistance program;
- reassignment or relocation;
- report to a professional body;
- suspension (with or without pay);
- demotion;
- discharge; and
- legal action.

Corrective Action where the Respondent is a Patient/Client

Following the incident of violence where the Respondent is a client, all reasonable measures will be taken to ensure the safety of workers, including:

- requiring that the patient/client be accompanied by family member or police when visiting the workplace;
- issuing verbal or written warnings;
- moving the patient/client;
- removing items which the patient/client can use as a weapon;
- imposing conditions which the patient/client must agree to abide by to continue receiving care;
- employing physical or chemical restraints;
- contacting the police;
- discharging the patient/client or transferring him/her to another facility or services provider; and
- issuing a trespass warning letter or trespass order.

In addition, the health care team will conduct an assessment of the client including reviewing any behavioural triggers and successful de-escalating actions.

The patient/client's plan of care will be updated and the team will ensure appropriate documentation in the patient/client chart and ongoing evaluation. The plan of care:

- must be documented;
- must describe all precautions to be taken by caregivers and recorded in the Care Plan;

- must include all medications and restraints reviewed by the physician as the patient/client's condition changes;
- must be evaluated for effectiveness on a predetermined periodic basis- those evaluations must be reflected in ongoing documentation;
- will include appropriate educational programs, materials and resources for workers to provide help in problem solving and assistance in caring for the abusive patient/client; and
- must be revised as needed.

Corrective Action where the Respondent is neither a Worker nor a Patient/Client

If the Respondent is not a worker or a patient/client, SETFHT will take whatever measures are reasonably available to ensure the safety of its workers.

Personnel Files (where Respondent is a Worker)

No record of the complaint, investigation or decision will go in the Complainant's personnel file, if the complaint was made in good faith.

If the investigation does not find evidence to support the complaint, there will be no documentation concerning the complaint placed in the Respondent's file. When the investigation reveals a violent incident has occurred, the incident and the discipline that is imposed on the abuser will be recorded in the Respondent's file.

Complaints made in Bad Faith

This Violence Policy and Program must never be used to bring fraudulent or malicious complaints against workers or other parties.

In the rare event that a complaint is made in bad faith – in other words, the person making it had absolutely no basis and deliberately and maliciously filed the complaint – that person will be subject to the same remedies as set out above, and a record of the incident will be put in his or her file, if applicable.

I. TARGET ASSISTANCE

Workers who have been the target of violence will be:

- encouraged to obtain medical help;
- provided with the opportunity to be examined by a physician; and
- provided with transportation if required.

Workers and their families can get crisis counseling through the employee assistance plan (EAP). Please talk to Human Resources for more information on SETFHT's EAP Program.

J. CONFIDENTIALITY

Strict confidentiality is required to properly investigate an incident and to offer appropriate support to all parties involved. Any individual who becomes aware of an incident of violence should not disclose the details of the incident to any third party without prior consultation with SETFHT. Gossiping about an incident seriously undermines the privacy of all parties involved and will not be tolerated.

SETFHT will strive to maintain confidentiality in its handling of any complaint in an attempt to protect the privacy of all individuals. Management will not disclose the name of a complainant or the circumstances of the complaint to anyone except where disclosure is:

- necessary to protect SETFHT's workers;
- necessary to investigate the complaint;

- required to take corrective action;
- necessary to improve SETFHT’s Violence Prevention Program; and
- required by law.

K. ASSURANCE AGAINST RETALIATION

This Violence Policy and Program encourages workers to freely express any concerns about violence or potential violence in the workplace. Complainants must not be penalized nor subjected to any prejudicial treatment as a result of making a complaint in good faith. Witnesses must not be subject to any negative repercussions as a result of participating in an investigation.

Any retaliation by the Respondent or anyone acting on behalf of the Respondent against the Complainant or any witnesses is strictly prohibited and will result in appropriate disciplinary action.

L. TARGET’S LEGAL RIGHTS

Nothing in this Violence Policy and Program prevents a worker who has been a target of violence or threat of violence from seeking or pursuing his/her own legal remedies.

M. RECORD KEEPING

The documents corresponding to the investigation will be kept on file in a secured location, for a period of seven years (7) from the date of the incident.

N. ANNUAL REPORTING

The Officer in Charge of the Violence Prevention Program will make an annual report to the Board President of the number of complaints proceeded with and the resolution, mediation, and dispositions made under this Violence Policy and Program. The Board President will present his/her report including the report received from the designated workers to the Board of Directors, together with any recommendations with respect to matters contained in the report.

O. VIOLENCE POLICY AND PROGRAM REVIEW

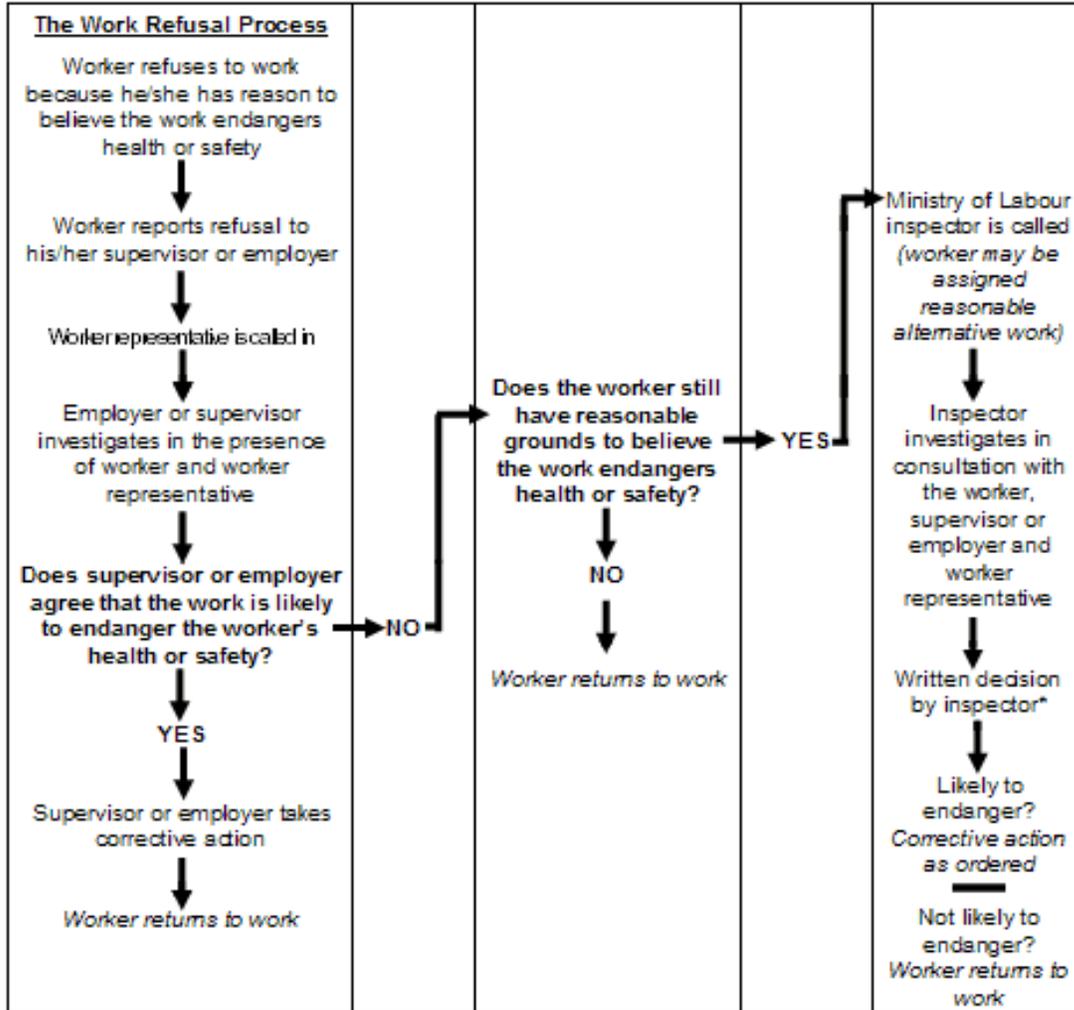
The Violence Policy and Program will be reviewed as often as necessary, but at least on an annual basis, by management.

Date: August 2010	Contact Person: Kavita Mehta	Phone: 416-423-8800 x222 Email: kavita.mehta@setfht.on.ca
Scheduled Revision/Review Date: February 2015	Revision/Review Person: Stephanie Houghton	Pages: Policy – pages 4-12 (in guide) 10 attachments

Attachments:

- Appendix A: Diagram of the Work Refusal Process
- Appendix B: The Work Refusal Process
- Appendix C: Violent Incident Reporting Form
- Appendix D: Suspect and Vehicle Identification Sheet
- Appendix E: Violent Incident Follow Up Form
- Appendix F: Risk Assessment Approach
- Appendix G: Worker Survey
- Appendix H: Inherent Risk Checklist
- Appendix I: Physical Inspection Checklist
- Appendix J: Statutory Compliance Checklist

Appendix A: Diagram of the Work Refusal Process



Appendix B: The Work Refusal Process

1. The worker must immediately inform the supervisor or employer of a work refusal with an explanation.
2. The supervisor or employer must investigate the situation immediately and resolve the issue in the presence of the worker and one of the following:
 - JHSC or another worker who has been chosen by his peers to represent the workers.
3. The refusing worker must remain as near as reasonably possible to their work station and remain available to the employer for the purpose of the investigation. This period is defined as the “*first stage*” of a work refusal. If the situation is resolved at this point, the worker will return to work.
4. In the event that a worker is unsatisfied with the results of the investigation, he/she may continue to refuse the work provided he/she has reasonable grounds on which to base their continued refusal. This period is defined as the “*second stage*” of a work refusal and a Ministry of Labor inspector must be notified.
5. The supervisor or employer may assign other reasonable work during normal work hours for a worker who has refused work.
6. The Ministry of Labour inspector conducts an investigation in consultation with the worker, their representative (if any) and the employer.
7. The inspector will determine if the work is likely to endanger the worker or any other person.
8. The inspector’s decision must be given in writing, to the worker, employer and the worker representative.
9. If the work is found to be unlikely to endanger anyone, the refusing worker will be expected to return to work.

Appendix C: Violent Incident Reporting Form

Complainant Information	
Name	Job Title
Date of Incident	
Type of incident <input type="checkbox"/> Physical <input type="checkbox"/> Verbal <input type="checkbox"/> Other	
Assailant Information	
<input type="checkbox"/> Employee <input type="checkbox"/> Patient/Client <input type="checkbox"/> Visitor <input type="checkbox"/> Delivery Person <input type="checkbox"/> Ex-employee <input type="checkbox"/> Other (please specify)	
Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female	Name (if known)
Age:	Weight: Height:
Other distinguishing marks: Please fill out the attached Suspect and vehicle identification sheet if assailant is unknown	
Vehicle Description (if any)	
Description of Incident	
Description of incident. Give a thorough description of the incident (what happened, where it occurred, what led up to the incident, who else was present and what action was taken at the time)	
Location of Incident:	
Weapons or tools used:	
Has the assailant been involved in any previous incidents with employees? If yes, please provide details.	
Did any working conditions contribute to the incident?	
Name of witnesses and relationship to workplace or Complainant (i.e., co-worker, visitor, Complainant's spouse, etc.)	

<p>First aid required? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Medical attention required? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Provide details:</p>	<p>Lost time from work? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>WSIB reported issued? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Provide details:</p>
<p>Investigation conducted? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Name of Investigators involved:</p>	<p>Reported to supervisor? Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Name of Supervisor:</p>
<p>Please provide any other information you think is relevant:</p>	
<p>_____</p> <p>Signature of Person Completing Report</p> <p>_____</p> <p>Name of Person Completing Report</p> <p>_____</p> <p>Date</p>	

Appendix D: Suspect and Vehicle Identification Sheet

Please describe the assailant's:

Hair (color and style)	
Eyes (color, glasses)	
Complexion	
Race	
Jewelry	
Scars/marks	
Tattoos	
Hat	
Coat	
Shirt/Blouse	
Shoes	
Tie	
Mustache/Beard	
Other facial details such as: <ul style="list-style-type: none">• Shape of lips• Shape of nose• Shape of ears• Shape of eyes• Cheeks (full or sunken)• Neck and Adam's apple• Wrinkles• Eyebrows	
What did suspect say	

Appendix E: Violent Incident Follow Up Form

Complainant Worker's Name	Complainant Worker's Position
Alleged Perpetrator's Name	Alleged Perpetrator's Position or connection with the Organization
Date of the Incident(s)	Date of Formal Accusation
Accusation received by: <input type="checkbox"/> HR Department <input type="checkbox"/> Supervisor <input type="checkbox"/> JHSC	
Investigation Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Findings (Results) from Investigation	
Action taken	

Signature of Person Completing Report

Name of Person Completing Report

Date

Appendix F: Risk Assessment Approach

Risk Assessment Team

A Risk Assessment Team will be established and part of their duties will be to:

- assess the risks of workplace violence at our workplace(s);
- reach agreement on control measures to be implemented;
- audit our overall Workplace Violence Program;
- develop worker training programs in violence prevention;
- plan for responding to acts of violence; and
- communicate this plan internally to the JHSC and to all workers.

The Risk Assessment Team will consist of:

- The Chair of the Board of SETFHT;
- Executive Director of SETFHT;
- Human Resources Manager;
- Employee members of the Joint Health and Safety Committee; and
- Any other employee that has indicated interest in joining the team.

The Risk Assessment Team will:

1. Review previous incidents of violence at our workplace(s). They will:
 - Survey workers to identify past history of violent incidents and current concerns to identify or confirm the need for improved security measures.
 - Use discussion groups to generate more ideas.
 - Review existing records of violent incidents to identify risks of violence in the workplace(s).
2. Evaluate the work tasks of all workers to determine the presence of inherent hazards, conditions, operations and other situations that might indicate a risk of workplace violence.
3. Inspect the physical workplace.
4. Communicate with similar local organizations and trade associations concerning their experiences with workplace violence.

Risk Assessment

1. History of Workplace Violence

In order to understand the context of the workplace, the following actions have taken place:

a) Worker Survey (See Appendix G for full survey questions).

b) Discussion Groups

The Chair of the Board and ED of SETFHT conducted discussion employee dialogues with questions including:

- What violence or threat of violence have you experienced at work?
- Have any of your co-workers experienced workplace violence?
- Have you felt at risk of violence without actually experiencing a violent incident?
- Are you concerned about workplace violence? What are your concerns?

c) Records Review.

The Risk Assessment Team reviewed historical information of the workplace:

- Incident reports (nil on workplace violence);
- Records of or information compiled for recording of violent incidents or near violent incidents (nil on workplace violence);
- Insurance records (nil on workplace violence);
- First aid records (nil on workplace violence);
- Joint Health and Safety Committee complaints (nil on workplace violence); and
- Accident investigations (nil on workplace violence).

2. Risk Factors Inherent in the Workplace

The Risk Assessment Team also assessed the work tasks of our workers to determine the presence of inherent hazards, conditions, operations and situations which might place workers at risk of workplace violence. The following factors were considered:

- Working with people who have mental or physical disabilities;
- Working with unstable or volatile people (i.e., criminal justice system, social services or health care);
- Working in an emergency, psychiatric or extended-care unit;
- Dispensing drugs or work in area where drugs (i.e. samples) are available;
- Working in community-based settings;
- Making home visits or field visits;
- Dealing with people who may be under the influence of drugs or alcohol;
- Dealing with people who are deeply troubled or distressed;
- Having a mobile workplace;
- Travelling as part of work;
- Making decisions involving intense organizational change;
- Managing workplace terminations;
- Resolving problem behaviour;
- Monitoring or regulating the activity of others or carry out procedures or make decisions which adversely affect others;
- Performing duties that that may result in a negative or confrontational response;
- Carrying out inspection or enforcement duties;
- Working alone or with a small group of co-workers during normal working hours;
- Working alone or with a small group of co-workers after normal working hours;
- Working from home;
- Performing security functions; and
- Delivering or collect items of value.

3. Physical Workplace Inspection

Monthly inspections are done through the JHSC; they look for potential issues related to workplace violence.

4. Communication with Similar Organizations or Industry Organizations

The Risk Assessment Team will, on an ongoing basis, communicate with organizations that may assist with the development of the workplace violence program.

TRAINING AND EDUCATION

Training for all workers, including managers and supervisors, will be provided and repeated every one to two years.

Training will include:

- a review and definition of workplace violence and workplace harassment;
- a full explanation and full description of our program (all workers will be given a copy of this Program at orientation);
- instructions on how to report all incidents including threats and verbal abuse;
- methods of recognizing and responding to workplace security hazards;
- training on how to identify potential workplace security hazards (such as no lights in parking lot while leaving late at night, unknown person loitering outside the building, etc.);
- review of measures that have been instituted at SETFHT to prevent workplace violence including:
 - use of security equipment and procedures,
 - how to attempt to diffuse hostile or threatening situations,
 - how to summon assistance in case of an emergency or hostage situation, and
 - post-incident procedures, including medical follow-up and the availability of counseling and referral.

All training records will be filed with Human Resources.

Workplace Violence Prevention training will be given to new workers as part of their orientation.

Appendix G: Worker Survey

Workplace violence is a serious concern to SETFHT. Management is determined to take all necessary measures to ensure that none of you ever fall victim to it. This survey is part of our prevention efforts. It is meant to help us detect potential problems at the workplace.

Instructions:

Workplace Violence is defined in the *Occupational Health and Safety Act* (“OHS”) as:

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

Note: workplace violence is the act or threat (which includes statements or behaviour) of physical force that causes or could cause physical injury.

When filling out this survey, keep in mind that, when we say “violence,” we are referring to:

- any behaviours, including threats;
- by any person, including acts of people at SETFHT, including co-workers, supervisors and management, as well as persons outside the Organization, including contractors, clients/patients, visitors, suppliers, strangers, etc.; and
- that led to or that you thought could lead to workplace violence.

SETFHT Worker Survey

Introduction

To better understand what the needs are of the employees of SETFHT in relation to workplace violence, please take a moment to fill in this survey. Do your best to be honest but also ensure you provide some solution-based interventions to help us plan a program to suit everyone in the FHT.

The survey results will be shared with the Board of Directors and will help inform the policies being developed. Worker dialogues will also occur the week of June 7th that will allow you to discuss in a group setting your concerns and solutions.

We thank you in advance for your contribution.

Physical Environment

1. Do you feel safe at work?

- YES NO

2. Has your workplace been designed to protect you from workplace violence?

- YES NO

3. In your opinion, are there adequate measures to protect you?

- YES NO

4. If you answered No to any of the previous questions, please indicate whether the following require improvement:

- Lighting
 YES NO N/A
- Security checks or protocols (identification checks, sign-in sheets etc.)
 YES NO N/A
- Security in areas used to store personal belongings (i.e. lunch room)
 YES NO N/A
- Security staff
 YES NO N/A
- Security of restrooms
 YES NO N/A
- Layout of work areas (visual obstructions, unsecured objects and furniture, etc.)
 YES NO N/A
- Security devices (telephone, panic button, alarms etc...)
 YES NO N/A
- Other (please specify):

5. What changes would you recommend? How can you be part of the solution to the issues?

Incidents at Work

6. Have you been hit, pushed, physically assaulted, or otherwise attacked while at 840/833 Coxwell/1871 Danforth?

- YES NO

7. If you answered Yes, where did the incident occur?

8. Did you report the incident?

- YES NO

9. How did you report the incident?

- Orally Written

10. Who physically assaulted or otherwise attached you?

- Patient Co-worker Manager/Supervisor
 Member of the public Partner/Ex-partner Other

11. Have you been sexually assaulted or been the target of a sexual incident while at 840/833 Coxwell/1871 Danforth?

- YES NO

12. If you answered Yes, where did the incident occur?

13. Did you report the incident?

- YES NO

14. How did you report the incident?

- Orally Written

15. Who assaulted or otherwise attached you?

- Patient Co-worker Manager/Supervisor
 Member of the public Partner/Ex-partner Other

16. Have you been threatened with physical harm (orally, in writing, or otherwise) while at 840/833 Coxwell/1871 Danforth?

- YES NO

17. If you answered Yes, where did the incident occur?

18. Did you report the incident?

- YES NO

19. How did you report the incident?

- Orally Written

20. Who threatened you?

- Patient Co-worker Manager/Supervisor

- Member of the public Partner/Ex-partner Other

21. Have you been harassed (sexual harassment, insults or bullying) while working at 840/833 Coxwell/1871 Danforth?

- YES NO

22. If you answered Yes, where did the harassment occur?

23. Did you report the harassment?

- YES NO

24. How did you report the harassment?

- Orally Written

25. Who harassed you?

- Patient Co-worker Manager/Supervisor
 Member of the public Partner/Ex-partner Other

Conclusion

26. In your opinion, what steps could be taken to make the workplace safer?

27. Any other comments?

Appendix H: Inherent Risk Checklist

(TO BE COMPLETED BY ASSESSMENT TEAM OR SUPERVISOR)

Department: _____

Completed by: _____

Date: _____

Description	Yes	No
Do the tasks involve working with people who have mental or physical disabilities?		
Do the tasks involve working with unstable or volatile people (i.e., criminal justice system social services or health care)?		
Do the tasks involve working with the public (social work, nursing, human resources)?		
Do the tasks involve working in an emergency, psychiatric or extended-care unit?		
Do the tasks involve dispensing drugs or working in an area where drugs are available?		
Do the tasks involve working in community-based settings?		
Do the tasks involve visiting clients in their homes?		
Do the tasks involve working with clients who have sensitivity to disruptive events?		
Do the tasks involve being in a community in areas with high crime rates and/or gang-related problems?		
Do the tasks involve working with people who may be under the influence of or have an addiction to drugs or alcohol?		
Do the tasks involve working with people who are deeply troubled or distressed?		
Do the tasks involve working with people who have a history of violence?		
Do the tasks involve working with people who have violent/abusive family/friends?		
Do the tasks involve working with people who have difficulty communicating?		
Is this a mobile workplace?		
Is there travel involved? a) By car? b) By public transit c) Other _____		

Do workers have to stay in hotels as part of the work?		
Do the tasks involve transporting other people as part of the work?		
Do the tasks involve making decisions involving intense organizational change?		
Do the tasks involve managing workplace terminations?		
Do the tasks involve resolving problem behaviour?		
Do the tasks involve conducting performance appraisals?		
Do the tasks involve monitoring or regulating the activities of others or carrying out procedures or making decisions that adversely affect others?		
Do the tasks involve performing duties that that may result in a negative or confrontational response?		
Do the tasks involve performing security functions?		
Do the tasks involve carrying out inspection or enforcement duties?		
Are there other aspects of the work in the worker's department that might spark a violent response or which might cause the worker concern?		
Do the tasks require workers to work alone or with a small group of co-workers during normal working hours?		
Do the tasks require workers to work alone or with a small group of co-workers after normal working hours?		
Do the tasks involve the worker working from home?		
Does the public have uncontrolled access to the worker's department?		
Do the tasks involve working with money or other valuables?		
Do the tasks involve delivering or collecting items of value?		

Signature of Person Completing Checklist

Name of Person Completing Report

Date

Appendix I: Physical Inspection Checklist

Date :

Location:

Name:

PARKING LOT

- Are entrances and exits well marked? YES NO
- Does the lot have a sign with security reminders? (e.g., "lock your car", "security patrolled")? YES NO
- Is there enough lighting? YES NO
- Are alarms clearly marked? YES NO
- Do pass cards control access to the lot? YES NO
- Are SETFHT vehicles parked on-site after hours? YES NO
- If yes, is there a secured parking lot for Organization vehicles after hours? YES NO
- Have vehicles been stolen from the parking lot? YES NO
- Have vehicles been broken into? YES NO

AROUND THE OUTSIDE OF THE BUILDING (PERIMETER)

- Is your workplace near any buildings or businesses that are at risk from violent crime (e.g., bars, banks, police stations)? YES NO
- Do violent, criminal, drunk or drugged persons ever come into your building? YES NO
- Is your building located in a high-crime area? YES NO
- Are you isolated from other buildings? YES NO
- Is there graffiti on the building walls or other signs of vandalism? YES NO
- Is the building entrance well lit? YES NO
- Is the outside of the building well lit? YES NO
- Are outside lights checked before dark? YES NO
- Are garbage areas, external buildings, or equipment that worker use:
- In an area with good visibility? YES NO
 - Close to the main building with no possible hiding spaces? YES NO
- Is your building shared with other businesses? YES NO
- If yes, is entry to your area(s) controlled? **Describe**
-

- Is there a system to alert workers if intruders enter? YES NO
- If yes, do you know how to use the system? YES NO
- Are offices designed so that public and private spaces are clearly identified? YES NO
- Do you use coded cards or keys to control access to the building or to certain areas of the building? YES NO
- Is there a system in place to limit the number of keys/entry cards given out? YES NO
- Do you change locks/codes immediately if keys/cards are lost or misplaced? YES NO
- Are there overgrown shrubs or landscaping that obstructs the view or provides a hiding place? YES NO
- Is the entrance to the building easily visible from the street or to the public? YES NO

SECURITY SYSTEM

- Do you have a security system at your location? YES NO
- If yes, is the system tested on a regular basis (e.g., at least monthly)? YES NO
- Is the security system adequate based on past performance (i.e., have there been break-ins which the security system failed to prevent or respond to adequately)? YES NO
- Are there security guards/safety walking services available at your location? YES NO
- Are signs posted indicating that there is a security system in use? YES NO
- Are there security cameras placed in locations that would deter potential offenders? YES NO

RECEPTION

- Is your reception area easily seen and easy to get to? YES NO
- Can the receptionist clearly see incoming visitors/customers? YES NO
- Is the reception counter visible to fellow workers or members of the public? YES NO
- Is your reception area staffed at all times? YES NO
- Can outsiders enter the building when there is no receptionist present? YES NO
- Is the reception area the first stop for visitors? YES NO
- Do you have a policy for receiving, escorting and identifying visitors? YES NO
- Does the reception area function as a security screening area for unwanted visitors? YES NO
- Does your receptionist work alone at times? YES NO
- Is there an emergency call button at the reception area? YES NO
- If yes, have the response procedures been developed? YES NO
- Are there objects/tools/equipment in this area that someone could use as a weapon? YES NO

SIGNS

- When you enter the building, are there signs to identify where you are? YES NO
- Are there signs inside the building showing you where to get emergency assistance, if needed? YES NO
- If no, what signs are needed and where? **Describe**
-

- Are visitor areas and private areas clearly marked? YES NO
- Are rules for visitors clearly posted? YES NO
- Are there exit signs? YES NO
- Are there areas where exit signs are not present, but are needed? YES NO
- If yes, where? **Describe**
-

- Can the posted signs be easily seen by everyone? YES NO
- If no, where are these signs located? **Describe**
-

- Are the hours of operation clearly posted? YES NO
- Impression of overall signage
- very poor poor satisfactory good very good
- What other signs should be added? **Describe**
-

LIGHTING

List areas where lighting was a concern (too dark, too bright) during the inspection? **Describe**

Is the lighting evenly spaced? YES NO
Are any of the lights out? YES NO
Is yes, where are they located? **Describe**

Can you access main control light switches? YES NO
If yes, where? **Describe**

STAIRWELLS AND EXITS

Do exit doors identify the exit location? YES NO
Could someone easily hide at the bottom of the stairwells? YES NO
If yes, where? **Describe**

Is the lighting bright enough? YES NO
Can lights be turned off in the stairwell? YES NO
Is there more than one exit route? YES NO
Are there any exit routes that prevent you from getting away? YES NO
Is yes, where? **Describe**

Do stairwell doors lock behind you:
• During regular hours of operation? YES NO
• After regular hours of operation? YES NO

POSSIBLE AREAS FOR AN ATTACK

Are there any empty rooms that should be locked? YES NO
If yes, where? **Describe**

PLACES TO HIDE

Are there small areas where someone could hide, such as:
 recessed doorways unlocked storage areas stairwells elevators
 others **Describe**

What would make it easier to see if someone is hiding?
 transparent materials like glass mirrors windows in doors angled corners
 less shrubbery others **Describe**

Do members of the public enter from the front of the building only? YES NO

WORKING ALONE

Has an emergency contact number been established for all hours of operation? YES NO

At the time of the inspection, did any areas feel isolated? YES NO

If yes, what areas? **Describe**

Are emergency telephones located in key areas, accessible to all workers? YES NO

In these isolated areas, is there a telephone or a sign directing you to emergency assistance? YES NO

In these areas, how far away is the nearest person who could hear calls for help?

Describe

Are alarms or panic buttons installed? YES NO

Are alarms or panic buttons easily accessible? YES NO

Do you periodically check that the alarms or panic buttons are functioning? YES NO

How many people were around you at the time of this inspection? **Describe**

It is easy to predict when people will be around? YES NO

PATTERNS OF MOVEMENT

Do workers who work alone or work outside normal hours arrive and leave at the same time every day using the same route? YES NO

If yes, how easily could someone get to know their patterns or movements?

very easily somewhat easily no way of knowing

ELEVATORS

Are you able to see if the elevator is occupied before entering? YES NO

Is there an emergency phone or emergency call button in each elevator? YES NO

Is there a response procedure for elevator emergencies? YES NO

WASHROOMS

Can the public use the same washrooms as workers? YES NO

If yes, is the washroom locked and are workers provided with a key? YES NO

Can the lights in the washroom switch off? YES NO

Are washrooms checked before building is vacated? YES NO

INTERVIEW AND MEETING ROOMS

Do you have a separate interview/meeting room? YES NO

If yes, can workers see inside? YES NO

Is there an alarm in this room? YES NO

PHARMACY/MEDICATION/TREATMENT ROOM

Is the furniture arranged to allow for emergency exits? YES NO

Is there another way out for an emergency exit? YES NO

Are furniture/counters arranged to allow both visibility and protection of workers? YES NO

Do the width and height of the counter/desk provide an appropriate barrier between workers and the public? YES NO

Does the area have an alarm system? YES NO

Do workers sometimes work alone? YES NO
If so, do they know emergency alert procedures? YES NO
Are pharmacy workers required to handle cash? YES NO

WAITING AREAS

Does the waiting area isolate patients/clients from workers and hinder communication with workers? YES NO
Are there objects, tools or equipment that could be used as weapons? YES NO
Are confidential files/records kept in a locked room? YES NO
Are file cabinets containing confidential records locked? YES NO

INDIVIDUAL OFFICES

Are certain workers at higher risk of violence? YES NO
Has the furniture been arranged to:
• Allow for a quick exit from the office? YES NO
• Maintain a safe distance between workers and clients? YES NO
Are there objects that can easily be used as weapons? YES NO
Do these offices have good visibility: i.e., shatterproof glass in walls/doors? YES NO

IDENTIFICATION SYSTEM FOR CLIENTS AND VISITORS

Have name tags, preferably with photo and no last name, been issued to workers? YES NO
Have tags, preferably a different colour than those for workers, been issued to visitors? YES NO
Is there a visitors' sign-in book to document who is entering and exiting the facility? YES NO
Have clients with a history of violent behaviour been flagged in computers, charts and wristbands? YES NO

EMERGENCY ASSISTANCE

Has an emergency contact number been established for use:
• During regular hours of operation? YES NO
• After regular hours of operation? YES NO
Are emergency numbers posted on the phones? YES NO
Are emergency phones accessible in all areas? YES NO
If no, where is access needed? **Describe**

Is there a designated safe room where workers can go during an emergency? YES NO
Does this room have a telephone and a door that can be locked from the inside? YES NO

OTHER COMMENTS

Appendix J: Statutory Compliance Checklist

Note: The Occupational Health and Safety Act is the legislation that sets out the requirements regarding workplace health and safety. This will be referred to as the OHS Act throughout this document.

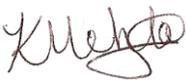
- YES (Y) answers indicate compliance
- NO (N) answers require investigation and correction by management.

Some questions are identified as Optional, meaning they are not required under the OHS Act but are being recommended as a best practice. A NO response to these questions does not require correction by management.

VIOLENCE AND HARASSMENT	Y	N
General		
1. The OHS Act requires employers to implement programs and policies regarding workplace violence and harassment to protect the employer's workers . A worker is defined as a person who performs work or supplies services for monetary compensation.		
Violence Risk Assessment – Employers are required to conduct a violence risk assessment (No risk assessment is required for harassment)		
2. Has there been a risk assessment that addresses the risks that may arise from the nature of the workplace, the type of work or the condition of work?		
3. Has a risk assessment been conducted that takes into account circumstances specific to the workplace?		
4. Has a risk assessment been conducted that takes into account circumstances that would be common to similar workplaces?		
5. Have the results of the risk assessment been communicated to the Joint Health and Safety Committee (JHSC)?		
6. Is there some mechanism in place to ensure the risks of violence are reassessed as often as necessary and the JHSC are informed of the results of the reassessment?		
Violence Policy and Program – Employers are required to develop a policy and program for violence in the workplace (Can be separate from or part of harassment program and policy)		
7. Is there a written policy addressing violence?		
8. Has the violence policy been posted in a conspicuous place in the workplace?		
9. Will the violence policy be reviewed annually?		
10. Is there a program that directs how workers should report incidents of violence to the employer or to the supervisor?		
11. Is there a program that explains how the employer will investigate incidents or complaints of workplace violence?		
12. Are there measures designed to advise workers on how to summon immediate assistance in the event of a violent incident?		
13. Is there a program that explains how the employer will deal with/resolve incidents or complaints of workplace violence?		
14. Does the program contain measures and procedures to control the risks identified in the risk assessment?		
15. Have the workers been informed of the contents of the program including: <ul style="list-style-type: none"> • how to report incidents of violence to the employer or to the supervisor? • how the employer will investigate incidents or complaints of workplace assessment? • how the employer will deal with/resolve incidents or complaints of workplace assessment? • the measures and procedures to control the risks identified in the risk assessment? 		

Domestic Violence – Employers have a duty to protect employees from domestic violence if they become aware of or ought to reasonably be aware that domestic violence that might expose a worker to physical injury may occur in the workplace.		
16. <u>Optional</u> – There is nothing further in the OHS Act to assist employers in fulfilling the obligations regarding domestic violence. The following are suggestions only and are not statutorily required: <ul style="list-style-type: none"> • Develop a domestic violence policy • Develop procedures in the event that domestic violence is reported • Train supervisors and workers on what to do in the event that they become aware that there is a potential of domestic violence occurring in the workplace 		
Duty to inform – Employers have a duty to provide workers with information (including personal information) about people who have a history of violence if: a) the worker can be expected to encounter the person in the course of his/her work, and b) the risk of workplace violence is likely to expose the worker to physical injury.		
17. <u>Optional</u> – There is nothing further in the OHS Act to assist employers in fulfilling this duty to inform. The following are suggestions only and are not statutorily required: <ul style="list-style-type: none"> • Ensure management and supervisors are aware of the obligation to inform workers of the duty to inform • Consider the impact that privacy legislation (especially PHIPA) may have on the duty to inform 		
Right to Refuse Work – The current right to refuse work provisions of OHS Act apply to situations involving workplace violence. There are exceptions for workers in hospitals and other health care facilities.		
18. Are your supervisors and JHCS or H/S Rep. aware of the right to refuse work provisions of the OHS Act and the exemptions for health care workers?		
HARASSMENT PREVENTION		
Harassment Policy and Programs		
19. Is there a written policy addressing harassment?		
20. Has the harassment policy been posted in a conspicuous place in the workplace?		
21. Will the harassment policy be reviewed annually?		
22. Is there a program that tells workers how to report incidents of harassment to the employer or to the supervisor?		
23. Is there a program that explains how the employer will investigate incidents or complaints of workplace harassment?		
24. Is there a program that explains how the employer will deal with/resolve incidents or complaints of workplace harassment?		
25. Have the workers been informed of the contents of the program including: <ul style="list-style-type: none"> • how to report incidents of harassment to the employer or to the supervisor? • how the employer will investigate incidents or complaints of workplace harassment? • how the employer will deal with/resolve incidents or complaints of workplace harassment? 		

Workplace Violence and Harassment Policies and Programs

Policy: Harassment Policy and Program	
Policy Number: WVH2.0	Section: Health and Safety – Harassment
Approval Date: August 2010	Executive Director Approval: 

Harassment Policy and Program

A. INTRODUCTION

It is the policy of SETFHT to build and preserve a positive working environment for all its workers.

No one has the right to harass a worker at work or in any situation related to the workplace. This policy is one step toward ensuring that our workplace is a comfortable place for all of us.

The Organization promises to treat all complaints of harassment seriously, whether they are made informally or formally. We undertake to act on all complaints to ensure that they are resolved quickly, confidentially, and fairly. We will discipline anyone who has harassed a worker. We will discipline managers who do not act properly to end harassment.

A copy of this Harassment Policy and Program shall be posted in a readily accessible location for use by all workers.

B. SCOPE OF HARASSMENT POLICY AND PROGRAM

This Harassment Policy and Program applies to all full-time, part-time, temporary and casual employees. It also applies to all health care professionals, contractors, students, and volunteers who provide services to SETFHT. This policy will use the terms “workers” to refer to those persons who are covered by the scope of this Policy.

This Harassment Policy and Program applies to all incidents of workplace harassment perpetrated against workers by any other workers, including supervisors or other members of management, members of the Board of Directors, clients, family members, visitors, or any person working on behalf of or affiliated with the Organization.

Any workers who subject other workers to workplace harassment may be subject to disciplinary action up to and including termination of employment for cause or any other applicable and available disciplinary remedies.

Other perpetrators of workplace harassment will be subject to whatever measures are reasonably available to ensure a healthy and safe work environment.

C. DEFINITIONS

Workplace Harassment

Engaging in a course of vexatious comment or conduct against a worker in a workplace that is known or ought reasonably to be known to be unwelcome

Harassment is any behaviour that demeans, humiliates, or embarrasses a person, and that a reasonable person should have known would be unwelcome. Harassment may result from one incident or a series of incidents.

The definition includes, but is not limited to:

- making remarks, jokes or innuendos that demean, ridicule, intimidate, or offend;
- displaying or circulating offensive pictures or materials in print or electronic form;
- bullying;
- making repeated offensive or intimidating phone calls or e-mails;
- engaging in inappropriate sexual touching, advances, suggestions or requests;
- spreading malicious rumours; and
- belittling a worker's opinions.

Harassment includes Sexual Harassment, such as:

- any unwelcome sexual advance or request for sexual favours;
- implied or expressed threat of reprisal for refusal to comply with a sexually oriented request;
- unwelcome remarks, jokes, innuendos, propositions, or taunting about a person's body, attire, sex or sexual orientation;
- physical contact with an underlying sexual connotation;
- leering; and
- displays of pornographic or sexual material

Harassment **does not** include

- reasonable action or conduct by an employer, manager or supervisor that is part of the normal job function even if there are unpleasant consequences for the worker – for example:
 - changes in work assignments or scheduling,
 - job assessment and evaluation,
 - workplace inspections,
 - implementation of dress codes,
 - disciplinary action,
- differences of opinion or minor disagreements between co-workers;
- consensual banter or relationships:
 - two or more workers bantering back and forth is not harassment if everyone involved is in agreement. But if any worker feels uncomfortable with this behaviour, and the behaviour continues even after that person has expressed their discomfort, or if the other worker(s) involved should have known the person was uncomfortable, then the behaviour does constitute harassment.
- Workers flirting with each other, or becoming involved in a romantic or sexual relationship, as long as the relationship is consensual. If one of the workers changes her or his mind, and the other person persists in trying to continue the relationship, this is harassment.

Workplace

Workplace is defined as: any location where any worker is carrying out any work-related function

Examples of possible “workplaces” for SETFHT workers:

- Multi-site office environment (any of the clinic sites and the administration office);
- SETFHT-sponsored conference or training site;
- Worker-accompanied patient/client transport;

- Any location workers are required to be during the course of their duties (i.e. patient/client apartment or worker-patient/client meeting location (e.g. coffee shop)); and
- Patient/client residences or community settings.

Management

Managers who control or direct the business of the Organization

Supervisor

A person who has charge of a workplace or authority over a worker, whether or not they are managers

Complainant

The worker who reports harassment

Respondent

The person (worker, client, etc.) about whom a harassment complaint is made

D. ROLES AND RESPONSIBILITIES

Supervisors and Management

SETFHT’s supervisors and managers must ensure, as much as reasonably practical, that no workers are subjected to harassment in the workplace.

Management will take corrective action with anyone under their direction who subjects workers to harassment.

SETFHT, its managers and supervisors are responsible for creating a positive working environment, free from harassment. Anyone aware of harassment in the workplace must bring it to the attention of their supervisor or management so the issue can be addressed immediately.

Workers

Every worker contributes to the creation of a safe and healthy work environment by demonstrating respectful and appropriate conduct at work.

All workers must accept as a personal responsibility their own role in eliminating the risk of workplace harassment in the day-to-day activities of their own work. Therefore, workers must:

- comply with this Harassment Policy and Program and refrain from any acts of harassment;
- work together in a professional manner and resolve issues in a respectful manner. Workers are to bring issues to their supervisor, if they cannot be mutually resolved;
- report to their immediate supervisor or Human Resources any incidents they experience or witness;
- attend training and information sessions provided by the Organization to reduce incidents of harassment; and
- co-operate with investigators or other authorities as required during any investigation related to harassment.

E. REPORTING PROCEDURES

Speak Up

All workers are encouraged to speak directly to the person who is acting in an offensive, harmful or humiliating manner. The offender should be advised that their behaviour is inappropriate and you want it to stop. Workers are advised to make notes of the offensive behaviour, the date it happened, the feelings it created, what was done about it, and who else was present, if there were any witnesses.

Informal Complaint

If there are concerns about speaking directly to the person committing the offensive behaviour, or if the offender does not stop the behavior after the matter is raised with him or her, then workers are advised to seek advice from and report the matter to their immediate supervisor with a view to informally settling the matter. Where the alleged harasser is a patient/client, the supervisor will also contact the Lead Physician.

Formal Complaints

If the informal route for resolving a harassing situation does not succeed or is not appropriate, SETFHT supports its workers in filing a formal complaint on SETFHT's Harassment Reporting Form. If the Respondent is a patient/client, the supervisor will also contact the Lead Physician.

Note: All workers have a responsibility to report harassment if they or someone else is being harassed.

F. INVESTIGATING INCIDENTS OF HARASSMENT

1. Human Resources will appoint an internal or external person to investigate all reported incidents of harassment.
2. The Complainant and the Respondent will be advised of the investigation.
3. The investigation will be conducted in a fair, efficient and prompt manner. The exact conduct of the investigation will depend on the nature and seriousness of the allegations. Management has the discretion to determine the appropriate investigation procedures. Generally, the investigation will consist of the following:
 - a. Interviews will be conducted of the Complainant, the Respondent, and any witnesses.
 - b. The investigation will involve:
 - getting all pertinent information from the Complainant;
 - informing the Respondent of the details of the complaint, and getting her or his response;
 - interviewing any witnesses;
 - deciding whether, on a balance of probabilities, harassment did take place; and
 - recommending appropriate remedies, penalties, or other action.
4. Human Resources may separate the Complainant and the Respondent during an investigation, if necessary and if reasonably possible.
5. If the Respondent is a patient/client, the investigation will also focus on the possible cause of the abusive behaviour and the level of responsibility of the abusive client, including the patient/client's cognitive ability to understand his/her actions.

6. All documents related to a complaint or incident of workplace harassment, including the written complaint, witness statements, investigation notes and reports, and documents related to the Complainant, will be maintained by the investigator separate from personnel files.
7. The investigator shall determine whether there is:
 - a. Sufficient evidence to substantiate that workplace harassment has occurred and/or that this Harassment Policy and Program was contravened; or
 - b. Insufficient evidence to substantiate that the workplace harassment has occurred and/or that this Harassment Policy and Program was contravened.
8. The investigator will complete a Harassment Follow Up Form.

G. CORRECTIVE ACTION AND DISCIPLINE

Corrective Action where the Respondent is a Worker

If management decides there has been a violation of this Harassment Policy and Program by a worker, the following conditions should be considered when determining corrective action:

- the impact of the incident on the Complainant;
- the nature of the incident;
- the period of time and frequency of the incidents; and
- the vulnerability of the Complainant.

The following corrective actions may be considered depending on the particular incident and the factors set out above:

- apology;
- training;
- referral to an assistance program;
- reassignment or relocation;
- report to a professional body;
- suspension (with or without pay);
- termination of employment or contractual relationship; and
- legal action.

Corrective action where Respondent is a patient/client

Where the Respondent is a client, all reasonable measures will be taken to ensure a positive work environment for workers, including:

- Requiring that the patient/client be accompanied by family member when visiting the workplace;
- Issuing verbal or written warnings;
- Moving the patient/client;
- Imposing conditions which the patient/client must agree to abide by to continue receiving care;
- Discharging the client or transferring him/her to another facility or services provider; and
- Issuing a trespass warning letter or trespass order

In addition, the health care team will conduct an assessment of the patient/client and the patient/client's plan of care to determine appropriate measures, including educational programs, materials and resources for workers to provide help in maintaining a positive work environment.

Corrective Action where the Respondent is neither a Worker nor a Patient/Client

If the Respondent is not a worker or a patient/client, SETFHT will take whatever measures are reasonably available to ensure the safety of its workers.

Personnel Files (where Respondent is a Worker)

No record of the complaint, investigation or decision will go in the Complainant's personnel file if the complaint was made in good faith.

If the investigation does not find evidence to support the complaint, there will be no documentation concerning the complaint placed in the Respondent's file. When the investigation reveals harassment has occurred, the incident and the discipline that is imposed on the Respondent will be recorded in the Respondent's file.

Complaints made in Bad Faith

This Harassment Policy and Program must never be used to bring fraudulent or malicious complaints against workers or other parties.

In the rare event that the complaint was made in bad faith – in other words, the person making it had absolutely no basis and deliberately and maliciously filed the complaint – that person will be subject to the same remedies as set out above, and a record of the incident will be put in her or his file.

H. CONFIDENTIALITY

Strict confidentiality is required to properly investigate an incident and to offer appropriate support to all parties involved. Any individual who becomes aware of an incident of harassment should not disclose the details of the incident to any third party without prior consultation with SETFHT. Gossiping about an incident seriously undermines the privacy of all parties involved and will not be tolerated.

SETFHT will strive to maintain confidentiality in its handling of any complaint in an attempt to protect the privacy of all individuals. Management will not disclose the name of a Complainant or the circumstances of the complaint to anyone except where disclosure is:

- necessary to investigate the complaint;
- required to take corrective action; and
- required by law.

I. ASSURANCE AGAINST RETALIATION

This Harassment Policy and Program encourages workers to freely express any concerns about harassment in the workplace. Complainants must not be penalized nor subjected to any prejudicial treatment as a result of making a complaint in good faith. Witnesses must not be subject to any negative repercussions as a result of participating in an investigation.

Any retaliation by the Respondent or anyone acting on behalf of the Respondent against the Complainant or any witnesses is strictly prohibited and will result in appropriate disciplinary action.

J. TARGET'S LEGAL RIGHTS

Nothing in this Harassment Policy and Program prevents a worker who has been a target of harassment from pursuing legal action, include a claim under the Human Rights Code.

K. RECORD KEEPING

The documents corresponding to the investigation will be kept on file in a secured location, for a period of seven years (7) from the date of the incident.

L. HARASSMENT POLICY AND PROGRAM REVIEW

This Harassment Policy and Program will be reviewed as often as necessary, but at least on an annual basis, by Management.

Date: August 2010	Contact Person: Kavita Mehta	Phone: 416-423-8800 x222 Email: kavita.mehta@setfht.on.ca
Revision/Review Date: February 2015	Revision/Review Person: Stephanie Houghton	Pages: Policy – pages 35-41 (in guide) 2 attachments

Attachments:

- Appendix K: Harassment Complaint Form
- Appendix L: Harassment Follow Up Form

Appendix K: Harassment Complaint Form

1. Name of complainant: _____

2. Address: _____

3. Work Department: _____

4. Person(s) suspected of harassment (respondent):

5. Nature of the allegations:

6. Date(s), time(s) and place(s) where the incident(s) took place:

7. Did anyone witness the incident? Yes No

If yes:

a) Name(s) of witness(es):

b) Description of their respective role in the incident.

8. How did you react to the harassment?

9. If applicable, describe any incident that took place previously.

I am filing this complaint because I honestly believe that _____ has been harassing me.

I hereby certify that, to the best of my knowledge, the above-mentioned information is true, accurate and complete. Making false or frivolous allegations is in violation of the Harassment Policy and subject to disciplinary sanctions.

Furthermore, I realize that an inquiry will be initiated once this complaint has been filed.

Signature of the complainant

Date

Appendix L: Harassment Follow Up Form

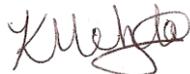
Complainant Worker's Name	Complainant Worker's Position
Alleged Harasser's Name	Alleged Harasser's Position or connection with the Organization
Date of the Incident(s)	Date of Formal Accusation
Accusation received by: <input type="checkbox"/> HR Department <input type="checkbox"/> Supervisor <input type="checkbox"/> JHSC	
Investigation Completed: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Findings (Results) from Investigation <hr/> <hr/> <hr/> <hr/>	
Action taken <hr/> <hr/> <hr/> <hr/>	

Signature of Person Completing Report

Name of Person Completing Report

Date

Workplace Violence and Harassment Policies and Programs

Policy: Domestic Violence Policy	
Policy Number: WVH3.0	Section: Health and Safety – Domestic Violence
Approval Date: August 2010	Executive Director Approval: 

Domestic Violence Policy

A. INTRODUCTION

SETFHT is committed to building and preserving a safe working environment and to building a workplace free from violence including domestic violence.

SETFHT will take all reasonable steps to ensure and maintain the safety of its workforce and will assist workers who are the targets of domestic violence.

SETFHT will not permit perpetrators of domestic violence to use its resources to commit acts of domestic violence and will take all measures available to it to discipline and restrain those that attempt to do so.

SETFHT intends to publish, maintain, and post in locations of high visibility a list of resources for survivors and perpetrators of partner violence; the Employee Assistance Program (EAP) is a resource that can be accessed by SETFHT employees.

A copy of this Policy shall be posted in a readily accessible location for use by all workers.

B. SCOPE OF POLICY

This Policy applies to all full time, part-time, temporary and casual employees. It also applies to all contractors, students, and volunteers who provide services to SETFHT. This Policy will use the terms “workers” to refer to those persons who are covered by the scope of this Policy.

C. DEFINITIONS

Domestic violence is defined as violent behaviour or the threat of violent behaviour committed by a current or former intimate partner against the other partner. The violence can be physical, sexual or psychological. It is coercive behaviour designed to gain control and dominance over the other partner. Domestic violence can occur between individuals involved in all types of relationships: married/unmarried, living together or separately, same sex or heterosexual.

Workplace: This Policy applies at the workplace, which is any location where any worker is carrying out work-related functions (including work-related social functions).

Examples of possible “workplaces” for SETFHT workers:

- Multi-site office environment (any of the clinic sites and the administration office);
- SETFHT-sponsored conference or training site;
- Worker-accompanied patient/client transport;
- Any location workers are required to be during the course of their duties (i.e. patient/client apartment or worker-patient/client meeting location (e.g. coffee shop)); and
- Patient/client residences or community settings.

D. REPORTING PROCEDURES

1. **In situations where domestic violence is likely to occur in the workplace and may expose any worker(s) to physical injury, workers should call 911 immediately.**
2. Workers **must** immediately report threats of domestic violence and attempted or actual domestic violence that are likely to occur in the workplace. The worker must report to their supervisor or to a member of the Board.
3. All workers should report situations where they suspect a co-worker is a target of domestic violence to their supervisor or to a member of the Board.
4. SETFHT will strive to keep all information confidential. However, in certain situations we may need to disclose information to protect other workers.
5. SETFHT will take all reasonable steps to ensure the safety of the worker experiencing domestic violence and other workers where domestic violence may occur in the workplace and expose them to physical injury.
6. SETFHT may be limited in its ability to respond and assist the worker experiencing domestic violence without the cooperation of the worker in identifying himself/herself as a target of domestic violence.
7. **Incidents that constitute criminal acts will be referred to the local police department or other appropriate policing agency.**

Notification of Workers at Risk

When an actual incident of domestic violence has occurred in the workplace or when it is reasonably expected to become violent in the workplace, SETFHT will take the following steps to ensure the safety of all workers:

- Human Resources will advise the workers who are at risk. They will also coordinate a review of current procedures to minimize risk.
- Depending on the circumstances, appropriate steps will be taken to protect workers.

E. ASSISTING A WORKER WHO IS A TARGET OF DOMESTIC VIOLENCE

Once a worker has been identified as a target of domestic violence, SETFHT will endeavour to assist the worker in one or more of the following ways:

- a. Provide the worker with contacts for domestic violence resources. Workers and their families can get crisis counseling through the employee assistance plan (EAP). Please talk to Human Resources for more information on SETFHT’s EAP program.

- b. Provide special considerations for work schedule adjustments necessary to obtain medical, counseling, or legal assistance, which may include:
- Flexible use of available leave time for doctors, lawyers or court appointments;
 - Possibility of leave without pay if there is no accrued time available;
 - Changing work hours or alternating work hours; and
 - Changing the target's workspace to a more secure area.

Workers experiencing domestic violence may have performance problems as a result of their situation. SETFHT will make reasonable efforts to resolve performance problems, but workers are still responsible for meeting the standards of their position. Such workers shall be afforded all of the proactive measures outlined in this Policy and shall be provided clear information about performance expectations, priorities, and performance evaluation.

Safety Measures for Workers Experiencing Domestic Violence

SETFHT will make reasonable efforts to maintain a secure workplace which includes:

- Designing a workplace safety plan in coordination with the worker;
- Designating a signal or code word for workers to alert their co-workers that there is trouble and they should call the police;
- Limiting the information about the worker provided to the general public including home contact information, cell phone numbers, work hours or timing of lunch breaks;
- Having calls screened, transferring harassing calls to security;
- Arranging for the worker to have priority parking near the building;
- Providing an escort to and from transportation (including public transportation);
- Removing worker's name from website or telephone directory;
- Changing payroll addresses, direct deposit information or beneficiaries;
- Changing work hours or alternating work hours; and
- Changing the workspace to a more secure area.

The worker should:

- Mention his/her workplace in protection/restraining orders;
- Keep the Organization informed of all threats and abusive actions;
- Provide the Organization with:
 - copies of any restraining orders,
 - a current emergency contact, and
 - a recent photograph or description of the abuser
- Save threatening e-mails or voice mails; and
- Keep a record of all incidents of abuse (include date, what was said and/or done, who witnessed it).

F. RESOURCES FOR TARGETS OF DOMESTIC ABUSE

SETFHT encourages workers who are targets of domestic violence to seek help. The following organizations assist men and women who are the targets of domestic violence:

- www.NeighboursFriendsandFamilies.on.ca for information on how to help women at risk of abuse, how to talk to men who are abusive and how to plan for safety.
- The Assaulted Women's Helpline at 1-866-863-0511 and TTY 1-866-863-7868 offers crisis support for abused women in Ontario. This anonymous and confidential service is available in 154

languages. Service representatives discuss the warning signs of abuse and give practical advice on items such as safety planning. They can also suggest other community resources.

- The Safe @ Work Coalition: www.safeatworkcoalition.org
- Corporate Alliance to End Partner Violence: www.caepv.org

If you are concerned about your immediate safety, call the police.

G. INVESTIGATIONS OF A POLICY BREACH BY A WORKER

1. The Organization will investigate any allegations that a worker is:
 - Using SETFHT resources to commit an act of domestic violence,
 - Committing an act of domestic violence from or at the workplace or from any other location while on official Organization business, and/or
 - Using their job-related authority and/or SETFHT resources in order to negatively affect targets and/or assist perpetrators in locating a target and/or in perpetrating an act of domestic violence.
2. Human Resources will appoint an internal or external person to investigate all reported incidents of actual or threatened violence.
3. The worker will be advised of the investigation.
4. The investigation will be conducted in a fair, efficient and prompt manner. The exact conduct of the investigation will depend on the nature and seriousness of the allegations, and management has the discretion to determine the appropriate investigation procedures. Generally, the investigation will consist of the following:
 - a. Interviews will be conducted of the worker and any witnesses.
 - b. The investigation will involve:
 - obtaining all pertinent information,
 - informing the worker of the details of the complaint, and getting her or his response,
 - interviewing any witnesses,
 - deciding whether, on a balance of probabilities, a violation of this Policy did take place, and
 - recommending appropriate remedies, penalties, or other action.
5. All documents related to a complaint or incident of a violation of this Policy, including a written complaint, witness statements, investigation notes and reports, and documents related to the complainant, will be maintained by the investigator separate from personnel files.
6. The investigator shall determine whether there is:
 - a. Sufficient evidence to substantiate that this Policy was contravened; or
 - b. Insufficient evidence to substantiate that this Policy was contravened.
7. All reports of Policy violations from the investigator will be sent to the Officer in Charge of the Violence Prevention Program for review. Certain information may be withheld to protect the confidentiality of workers and other parties, as deemed appropriate by management.
8. The Officer (JHSC) will review current procedures; any recommendations to revise the Violence Prevention Program will be forwarded to Human Resources.

9. Any proposed revisions to the Violence Prevention Program will be forwarded to the Joint Health and Safety Committee for consultation prior to implementation.

H. CORRECTIVE ACTION AND DISCIPLINE FOR POLICY BREACHES

If management decides there has been a violation of this Policy by a worker, the following conditions should be considered when determining corrective action:

- the impact of the incident on the target of the domestic violence;
- the nature of the incident;
- the degree of aggressiveness and physical contact;
- the period of time and frequency of the incidents; and
- the connectedness of the incident to the workplace or work duties or tasks.

The following corrective actions may be considered depending on the particular incident and the factors set out above:

- apology;
- training;
- violent risk assessment by a professional;
- referral to an assistance program;
- reassignment or relocation;
- report to a professional body;
- suspension (with or without pay);
- termination of employment or contractual relationship; and
- legal action.

Personnel Files

No record of a report, investigation or decision will go in the reporting worker's personnel file, if the report was made in good faith.

If the investigation does not find evidence to support the report, there will be no documentation concerning the report placed in the accused worker's file. When the investigation reveals a violation of this Policy has occurred, the incident and the discipline that is imposed on the worker will be recorded in his/her file.

Complaints Made in Bad Faith

In the rare event that a report is made in bad faith – in other words, the person making it had absolutely no basis and deliberately and maliciously filed the report – that person will be subject to the same remedies as set out above, and a record of the incident will be put in her or his file, if applicable.

I. CONFIDENTIALITY

SETFHT will strive to maintain confidentiality in its handling of any report of domestic violence or a violation of this Policy in an attempt to protect the privacy of all individuals. Management will not disclose the circumstances of the complaint to anyone except where disclosure is:

- necessary to protect SETFHT's workers;
- necessary to investigate the complaint;
- required to take corrective action;
- necessary to improve the SETFHT's Violence Prevention Program; and
- required by law.

J. RESOURCES FOR PERPETRATORS OF DOMESTIC VIOLENCE

SETFHT encourages abusers to seek help. The following organizations work with men who are violent:

1. Canada's Treatment Programs for Men who Abuse Their Partners. This directory provides a listing of treatment programs that address the needs of men who behave abusively in their intimate relationships. The services are listed by province and territory (east to west) and alphabetically by town and city.
 - <http://www.phac-aspc.gc.ca/ncfv-cnivf/sources/fem/fem-dir-trtmt-male/on-eng.php>
2. Changing Ways
 - http://www.changingways.on.ca/index.php?option=com_content&view=article&id=65&Itemid=87
3. Public Health Agency of Canada (PHAC)
 - <http://www.phac-aspc.gc.ca/ncfv-cnivf/ao-eng.php>
4. Canadian Register of Health Service Providers in Psychology (input "offender: violent" and "Ontario" in advanced search option of register and it will pull up for you a list of psychiatrists/psychologists in Ontario who treat violent offenders)
 - <http://www.findapsychologist.ca>
5. I Am a Kind Man (Aboriginal men from across Ontario who are very concerned about the problem of men's violence and abuse against women in Aboriginal communities)
 - <http://www.iamakindman.ca/IAKM/index.php>

K. ASSURANCE AGAINST RETALIATION

This Policy encourages workers to freely express any concerns about domestic violence or potential domestic violence in the workplace. Workers who report concerns of domestic violence or a violation of this Policy must not be penalized nor subjected to any prejudicial treatment as a result of making a report in good faith.

Witnesses must not be subject to any negative repercussions as a result of participating in an investigation. Any retaliation against those reporting suspected incidences of domestic violence or violations of this Policy or any witnesses is strictly prohibited and will result in appropriate disciplinary action.

L. RECORD KEEPING

The documents corresponding to the investigation will be kept on file in a secured location, for a period of seven years (7) from the date of the incident.

M. ANNUAL REPORTING

The Officer in Charge of the Violence Prevention Program will make an annual report to the Board President of the number of complaints proceeded with and the resolution, mediation, and dispositions made under this Policy. The Board President will present his/her report including the report received from the designated workers to the Board of Directors, together with any recommendations with respect to matters contained in the report.

N. POLICY REVIEW

This Policy will be reviewed as often as necessary, but at least on an annual basis, by the Officer in Charge of the Violence Prevention Program.

Date: August 2010	Contact Person: Kavita Mehta	Phone: 416-423-8800 x222 Email: kavita.mehta@setfht.on.ca
Revision/Review Date: February 2015	Revision/Review Person: Stephanie Houghton	Pages: Policy – pages 44 – 50 (in guide)