



## POLICY

OWNER DEPT: ADMINISTRATION

EFFECTIVE DATE: Sept 3, 2019	REVISED DATE:
SUPERSEDES: C.a. 002	MOTION NUMBER: #290-19

TITLE: WORKPLACE VIOLENCE PREVENTION

### POLICY STATEMENT:

The Town of Slave Lake is committed to the prevention of workplace violence and is ultimately responsible for worker health and safety. We will take whatever steps are reasonable to protect our employees from the potential hazards associated with workplace violence. Violent behavior or threat of violence in the workplace is unacceptable from anyone. The Town will not tolerate any type of violence within the workplace or during work-related activities. The Town is committed to allotting whatever time, attention, authority and resources necessary to ensure a safe and healthy working environment for all employees and clients. The Town will take every reasonable precaution to protect an Employee from physical injury if we become aware, or believe, that domestic violence is a risk.

### POLICY OBJECTIVES:

The purpose of this policy is to:

1. Provide a policy against workplace violence, meaning that violence in the workplace of any sort is deemed completely unacceptable and is not tolerated under any circumstance.
2. Ensure all Town staff and volunteers have a full understanding of what workplace violence is and encompasses.
3. Ensure that if workplace violence does occur, staff and volunteers shall be assured of the fact that all incidents will be addressed quickly, thoroughly and effectively.
4. Provide measures and procedures to protect Employees from the hazard of workplace violence and a process for Employees to report incidents, or raise concerns.

Brian Vance, CAO

September 3, 2019  
Date Approved

**PROCEDURE**

**Definitions**

**Physical assault:**

Refers to any physical force or threat of physical force to create fear and control another person. Some examples include: hitting, blocking, shoving, choking, slapping or biting, or pulling hair; threats of violence, and using a weapon or other objects to threaten, hurt or kill.

**Sexual assault:**

Refers to any unwanted sexual act done by one person to another. Examples include: kissing or forcing/coercing the person into kissing; touching the person's body with or without clothes on; forcing/coercing the person to masturbate; sexual intercourse; penetrating with an object; causing bodily harm; removing or attempting to remove clothing; taking advantage of a position, trust, or authority to get sex; and threatening to harm someone else if the person does not agree to do any of these things.

**Threat (verbal or written):**

Refers to a communicated intent to inflict physical or other harm on any person or to property by some unlawful act. A direct threat is a clear and explicit communication distinctly indicating that the potential offender intends to do harm, for example, "I am going to make you pay for what you did to me." A conditional threat involves a condition, for example, "If you don't leave me alone, you will regret it." Veiled threats usually involve body language or behaviours that leave little doubt in the mind of the victim that the perpetrator intends to harm.

**Town:**

Refers to the Town of Slave Lake

**Verbal/Emotional/Psychological abuse:**

Refers to a pattern of behaviour that makes someone feel worthless, flawed, unloved, or endangered. Like other forms of abuse, it is based on power and control. Examples include: swearing, put-downs/name calling over a period of time, labelling the victim in a derogatory way such stupid, crazy or irrational, acts of humiliation, extreme jealous behaviour, attacking the victim's self-esteem in other ways. It can also include harming pets and damaging property.

**Workplace violence:**

Includes the exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker; the exercise of physical force by a person against another person, in a workplace, that causes or could cause physical injury to the worker; an attempt to exercise physical force against a worker that could cause physical injury to the worker; and / 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

**Responsibilities**

**Administrative Services Coordinator:**

- In conjunction with the HS Coordinator, ensure a workplace violence prevention plan is in place.
- In consultation with the JHSC and the HS Coordinator, facilitate training and education for all Employees.
- Coordinate all reported incidents.
- Receive a copy of all records filed.
- At the request of an Employee, be present at any stage of the reporting process.
- Ensure a report goes to WCB of all incidents where an Employee loses time from work.
- Ensure consistency with municipal policy and procedures.

**Chief Administrative Officer (CAO):**

- Review this policy and make necessary changes as needed.
- Ensure that measures and procedures in the violence prevention program are carried out.
- Hold Management accountable for responding to and resolving complaints of violence.
- Assure that all Employees are familiar with this and all personnel policies and that they are followed accordingly.
- Follow Policy guidelines in a timely manner.
- Appoint those responsible for conducting investigations into complaints of workplace violence, as deemed necessary.

**Director:**

- Assist the immediate Supervisor in the implementation of their respective duties and assure that all Employees are treated in a fair and equitable manner.
- Facilitate medical attention and support for those involved directly or indirectly.
- If an incident is filed, follow those guidelines addressed in this policy in a timely manner.

**Employees:**

- Understand and comply with this workplace violence prevention policy and related procedures.
- Participate in education and training programs in order to respond suitably to any incident of workplace violence.
- Report all incidents or injuries of violence or threats of violence to the site supervisor immediately. Complete the Workplace Violence and Threat Report.
- Inform the JHSC or the site safety representative about your concerns regarding the potential for violence in the workplace.
- Seek support when confronted with violence or threats of violence.

If an Employee feels intimidated with the individual in question they may take the issue to their Director or Administrative Services Coordinator for remediation.

**Health and Safety Coordinator**

Develop a reporting process for incidents of workplace violence.

Assist in the violent incident investigation process, when necessary.

Ensure any fatalities or critical injuries are reported to Alberta OHS.

In consultation with the JHSC and the Administrative Services Coordinator, facilitate training and education for all Employees.

**Joint Health and Safety Committee (HSC):**

Consult about the development, establishment and implementation of violence prevention measures and procedures.

Make recommendations to Management for developing, establishing and providing training in violence prevention measures and procedures.

Periodically review the workplace violence and harassment prevention program.

Participate in the investigation of all critical violence-related injuries.

Immediately review reports of critical injury or fatality. Outline in writing the circumstances and particulars within 48 hours of the occurrence.

Within four days, review written notices of lesser injuries where any Employee is disabled from performing their usual work or requires medical attention.

**Managers / Supervisors:**

Enforce policy and procedures and monitor worker compliance.

Investigate all workplace violence using the organization's incident investigation procedure and form, and contact the police as required.

Facilitate medical attention for employee(s) as required.

Debrief those involved in the incident either directly or indirectly, and address all problems or complaints in an expeditious and fair manner to resolve the issue.

Contact human resources to ensure the victimized Employee receives further counselling about their legal rights.

Track and analyze incidents for trending and prevention initiatives.

Immediately report a fatality or critical injury to Alberta OHS, the police (as required), JHSC, HS Coordinator, and investigate with the JHSC. Report the circumstance to all parties in writing within 48 hours.

Issue a report to the Employer and WCB on all lost-time incidents where a worker requires medical care.

Copies of incident information where there is no critical injury must be provided to the HS Coordinator within 48 hours of the occurrence.

Ensure the workplace violence and prevention program is reviewed annually.

**Standards/Guidelines**

This policy applies to all of The Town's Employees, and includes Volunteers, Contractors, and/or Consultants while they are engaged in the Town's business working on and/or off Town premises or worksites, and operating Town vehicles and equipment. Violations of this policy will result in disciplinary action up to and including termination of employment.

This document is intended as a guide for all Town Employees on the common sense approach to ensuring that the Policy is implemented in a fair and consistent manner throughout the organization.

The Town considers workplace violence to be an unacceptable form of behaviour, which will not be tolerated. The Town is therefore committed to action, which ensures the absence of violence in the workplace. Appropriate disciplinary action will be taken, up to and including dismissal and prosecution, against any individual engaging in workplace violence. Examples of workplace violence include, but are not limited to:

- a) Pushing or shoving;
- b) Choking;
- c) Physically restraining;
- d) Striking with any part of the body;
- e) Striking with any foreign object;
- f) Threats of physical harm;
- g) Forced or unwanted proximity into an individual's personal space;
- h) Use of a weapon to cause physical harm;
- i) Any intentional action resulting in physical injury.
- j) Physical or verbal assault.
- k) Sexual assault

**Expectations**

- a) Employees and Managers are expected to act towards other individuals professionally and respectfully. As such, the Town believes that the highest standards of conduct among its Employees and Managers are essential to maintain and enhance the public's trust and confidence in the Town.
- b) The conduct and language of Town Employees in the workplace must follow acceptable workplace standards while contributing to a positive work environment.
- c) Employee conduct must not compromise the integrity or credibility of the Town.
- d) Employees must not engage in conduct which tarnishes the reputation of the Town or brings the administration of the Town into disrepute.
- e) Employees are to treat each other in the workplace with respect and dignity and must not engage in workplace violence.
- f) Everyone is responsible for safe work practices free of workplace violence.

- g) Employees who are aware of an incident of workplace violence involving the Employee, co-workers, or member of the public are required to report it to their Supervisor or Manager.
- h) Employees are expected to become familiar with and comply with this Policy, to report incidents of workplace violence to their Supervisors or Managers, participate in work site hazard assessments, and implement control measures to mitigate associated hazards as required. Employees are to cooperate with Supervisors, Managers and other Town representatives regarding this Policy

## **Policy and Procedures**

### **Reporting and Investigation**

- a) Workers are to report all violence-related incidents or hazards to their Manager or Supervisor. This report can be made confidentially at the Employee's request. However, sharing information to ensure the safety of others and prevent recurrence may be necessary (e.g., contents of a police report).
- b) The Manager or Supervisor receiving the report investigates it and ensures that measures are taken to safeguard Employees and curtail the violence or harassment. No report of workplace violence or risks of violence may be the basis of reprisal against the reporting Employee.
- c) The Employer reports all injuries to OHS and WCB as required by the Occupational Health and Safety Act and WCB Act.

### **Response Procedures**

- a) Using the incident investigation form, the Manager or Supervisor documents all reports of workplace violence, hazards and measures taken to address them.
- b) If the resolution of the incident is beyond the authority of a Manager or Supervisor, they must make the CAO or designate aware of the report. The CAO or designate involves other Managers or Supervisors in the investigation as appropriate (e.g., when the incident involves clients or employees under another Manager's or Supervisor's area of responsibility).
- c) Management reviews all incident reports, monitors trends and makes recommendations to the CAO or designate for prevention and enhancements to the workplace violence prevention program.
- d) These findings are shared with the JHSC, which is consulted about any revision to the violence prevention and training program.
- e) The CAO or designate reviews reports of workplace violence and ensures that actions are taken.
- f) The Managers or Supervisors who investigate the reported incident warn all staff who might be affected about dangerous situations. They also tell the reporting Employee about the outcome of the investigation to help minimize the chance of similar incidents.
- g) If a violent incident results in a critical injury to an Employee, the JHSC representative or HS Coordinator investigates the incident or injury and reports to OHS and JHSC.

**Support for Employees affected by workplace violence**

- a) Management will respond promptly, assess the situation and ensure that these interventions are followed:
  - (i). facilitation of medical attention;
  - (ii). debriefing (by skilled professional);
  - (iii). referrals to community agencies, treating practitioner and employee assistance program;
  - (iv). completion of incident reports, WCB reports, reports to OHS (critical injury or fatality);
  - (v). reporting to police (as required); and
  - (vi). team debriefing.

**Risk assessment**

Management (with worker involvement) assesses workplace violence hazards in all jobs, and in the workplace as a whole. It reviews risk assessments annually, as well as when new jobs are created or job descriptions are changed substantially.

**Education**

New Employees will receive both general and site-specific orientation to the workplace violence prevention program. In addition, all Employees will receive an annual review of the program's general and site-specific components.

Any training developed, established and provided will be done in consultation with, and in consideration of, the recommendations of the JHSC.

**Program Evaluation**

The effectiveness of the workplace violence prevention program is evaluated annually by management and reviewed by the JHSC.

Frontline Employees, Managers and Supervisors are accountable for establishing and implementing the policy and procedures related to workplace violence. Responsibility for complying with the health and safety policy is part of the job description of Managers, Supervisors and Frontline Employees. Included in the health and safety components of job descriptions are Management responsibilities for enforcing policy and procedures, investigating and responding to workplace violence.

**Accountability**

All workplace parties are accountable for complying with the policy, program, measures and procedures related to workplace violence.

**Records**

All records of reports and investigations of workplace violence are kept for five years.

**Policy Review**

This workplace violence prevention policy and program will be reviewed annually.

# Appendix A – Complaint Form

## Workplace Violence Report

### PRIVATE AND CONFIDENTIAL

The contents of this report and any attachments are confidential and are intended solely for those named as recipients of this report. It is shared in trust, for the sole purpose of accurately documenting the incident and actions taken in response to the incident, as well as to prevent future incidents. Any further use, reproduction or dissemination of this transmission is strictly prohibited. This report shall be used, retained and destroyed in accordance with Town policies for use, retention and destruction of confidential information.

<b>Workplace Violence Definition</b>		
<p>Workplace violence incidents include:</p> <ul style="list-style-type: none"> <li>▪ the exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker</li> <li>▪ the exercise of physical force by a person against another person, in a workplace, that causes or could cause physical injury to the worker</li> <li>▪ an attempt to exercise physical force against a worker that could cause physical injury to the worker</li> <li>▪ 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</li> </ul>		
<b>Part A: To be completed by the supervisor/supervisory designate through discussion with the employee who is reporting workplace violence/threat</b>		
<b>1. Information regarding employee that is reporting workplace violence/threat</b>		
Name (First, Last):	Phone #:	Department:
Job Title:		
<b>2. Type of Workplace Violence Incident</b>		
<input type="checkbox"/> Verbal threat <input type="checkbox"/> Threatening behaviours/gestures <input type="checkbox"/> Attempted assault <input type="checkbox"/> Other (describe): _____	<input type="checkbox"/> Written threat (Email or other) <input type="checkbox"/> Bomb threat <input type="checkbox"/> Assault causing bodily harm	<input type="checkbox"/> Property damage arising from incident (e.g. to vehicle)
<b>3. Time incident occurred</b>		
Date of Incident (dd-mm-yyyy)	Time of incident _____ a.m.      _____ p.m.	Was Employee working alone? <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>4. Place where incident occurred</b>		
Location name and address:	Exact site within location/room where incident occurred:	
<b>5. Information regarding the subject (individual identified by employee as source of workplace violence/threat)</b>		
Subject name and address (if known):	Was the Subject an:  <input type="checkbox"/> Employee <input type="checkbox"/> Client <input type="checkbox"/> Member of the public <input type="checkbox"/> Volunteer <input type="checkbox"/> Other (specify) _____	

**Appendix A – Complaint Form**  
**Workplace Violence Report**  
**PRIVATE AND CONFIDENTIAL**

If unknown, please describe the subject (e.g. male/female, clothing distinct features, etc.):

**6. Other employee(s) at risk from incident (additional to employee reported above):**

Name (First, Last):	Department:	Job Title:	Phone #:

**7. Witnesses**

<input type="checkbox"/> YES <input type="checkbox"/> NO	
Name (First, Last):	Phone #:
Name (First, Last):	Phone #:

At this point, the Supervisor provides the Employee who reported the workplace violence an opportunity to describe the details of the incident in his/her own words.

Employee completes Part D.

**Part B: To be completed by the Supervisor/supervisory designate during incident investigation**

**8. Witness reports**

Witnesses interviewed  YES  NO Attach witness reports

**9. Describe what happened to cause the incident/injury?**

**10. Factors which led to the incident**

**11(a). Actions Taken – (i) Management, (ii) Police**

(i) Was the On-Call Supervisor called? <input type="checkbox"/> Yes <input type="checkbox"/> No	Time Called _____ a.m. _____ p.m.	On-Call Supervisor Name
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(ii) Were the police called? If Yes, complete all remaining 11(a) sections below.

Yes  No

By Whom?	Date Called (dd-mm-yyyy)	Time Called	Time Arrived
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**Appendix A – Complaint Form**  
**Workplace Violence Report**  
**PRIVATE AND CONFIDENTIAL**

		_____ a.m. _____ p.m.	_____ a.m. _____ p.m.
<b>Police Officer's Name (First, Last):</b>		<b>Badge #:</b>	<b>Division:</b>
<b>Are CCTV images available?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Were any of the following activated?</b> <input type="checkbox"/> Alarm <input type="checkbox"/> Duress <input type="checkbox"/> Lockdown	<b>Other information:</b>
<b>11(b). Medical Aid Information – Please attach all injury reports as necessary</b>			
<b>First Aid administered?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>CPR/AED administered?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	<b>Emergency Services Contacted</b> <input type="checkbox"/> Yes <input type="checkbox"/> No	
		<b>EMS Vehicle Number(s):</b>	<b>Fire Vehicle Number(s):</b>
<b>11(c). Actions Taken – Trespass Notice – Please attach copy of Trespass Notice as necessary</b>			
<b>Was a trespass notice issued under the Trespass to Property Act?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Date Issued/to be Issued</b>	
<b>11(d). Other Actions taken in response to this incident</b>			
<b>12. Recommended remedial action to prevent future incidents</b>			
<p><b>Detail recommended action:</b></p> <p> </p> <p> </p>			
<b>13. Provision of Report to JHSC (through co-chairs)/Health and Safety Representative</b>			
<p><b>Name of JHSC Co-chairs/Health and Safety Representative to whom report was provided (please print):</b></p> <p> </p> <p> </p>			
<p><b>Date provided to JHSC Co-chairs/Health and Safety Representative:</b> _____</p>			
<b>Additional Information Attached</b>			
<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<b>Part C – Supervisor/Management Signatures</b>			
<b>Form completed by:</b>	<b>Title:</b>	<b>Phone #:</b>	<b>Supervisor Signature:</b>
<b>Incident review by Next Level of Management</b>			
<b>Name (First, Last):</b>	<b>Title:</b>	<b>Phone #:</b>	<b>Signature:</b>



Appendix A – Complaint Form  
**Workplace Violence Report**  
PRIVATE AND CONFIDENTIAL

<b>Part D – Employee Description of Incident</b>		
Incident Location	Incident date	Incident Time <input type="checkbox"/> _____ a.m. <input type="checkbox"/> _____ p.m.
<b>Employee's description/details</b>		
Name (First, Last) (please print): _____ Signature : _____		
Date (dd-mm-yyyy): _____		
<b>I have decided to provide the details of this incident to my Supervisor verbally but not in writing.</b>		
Name (First, Last) (please print): _____ Signature: _____		
Date (dd-mm-yyyy): _____		