



TITLE

**RESPECTFUL WORKPLACES AND THE PREVENTION OF HARASSMENT AND VIOLENCE: TYPE III  
(WORKER-TO-WORKER)**

SCOPE

Provincial

DOCUMENT #

1115-03

APPROVAL AUTHORITY

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Not applicable

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Respectful Workplaces and the Prevention of Harassment and  
Violence Policy (#1115)

SCHEDULED REVIEW DATE

June 3, 2022

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

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## OBJECTIVES

- To outline the processes to implement the *Respectful Workplaces and the Prevention of Harassment and Violence* Policy as it applies to Type III (worker-to-worker) interactions, including:
  - protecting **workers** from, and empowering them to proactively manage and respond to, **disrespectful behaviour, discrimination, harassment and violence** between workers;
  - creating a common understanding of what is considered a safe and respectful **workplace**, and associated expected **respectful behaviour**;
  - proactively managing and responding to worker-to-worker disrespectful behaviour, discrimination, harassment and violence; and
  - directing workers to tools and resources that promote, demonstrate and enable respectful interactions and work relationships between workers.
- To empower **AHS workers** (including **managers/medical leaders and supervisors**) to respectfully address and manage **conflict** with other workers by outlining expectations, responsibilities, and available supports.
  - It is recognized that conflict management is a key strategy in preventing disrespectful behaviour, discrimination, harassment, and violence in the workplace.
- To establish that Alberta Health Services (AHS) managers/medical leaders are accountable to support conflict resolution between AHS workers.

## PRINCIPLES

AHS is committed to providing a safe, healthy, and inclusive workplace where all persons are treated with respect and dignity and which values diversity. This is in alignment with *Our People Strategy*, the *Patient First Strategy*, the *Code of Conduct*, the principles of a **just culture**, and the AHS Values.

Conflict is a normal and expected part of working together. Avoiding conflict often feels like the easiest way to deal with it. However, this avoidance does not bring resolution and can lead to the recurrence of further conflict with negative impacts to people and the workplace.

AHS acknowledges that conflict can contribute to disrespectful behaviour in our working relationships, and that disrespectful behaviour can be a precursor to harassment and violence. Therefore, effective conflict management is a key strategy for preventing harassment and violence in the workplace. By actively addressing and managing conflict when it occurs, the workplace is made more safe, healthy, and respectful for everyone.

AHS does not tolerate workplace harassment or violence. These are considered serious matters and shall be addressed in accordance with AHS' legal obligations under Occupational Health and Safety (OHS) legislation, other applicable legislation, Accreditation Canada standards, the AHS Values, principles of a just culture, applicable collective agreements, the *Non-Union Exempt Employees Terms and Conditions of Employment*, other terms and conditions of employment, the *Medical Staff Bylaws and Rules*, and *Midwifery Staff Bylaws and Rules*.

## APPLICABILITY

Compliance with this document is required by all Alberta Health Services employees, members of the medical and midwifery staffs, Students, Volunteers, and other persons acting on behalf of Alberta Health Services (including contracted service providers as necessary).

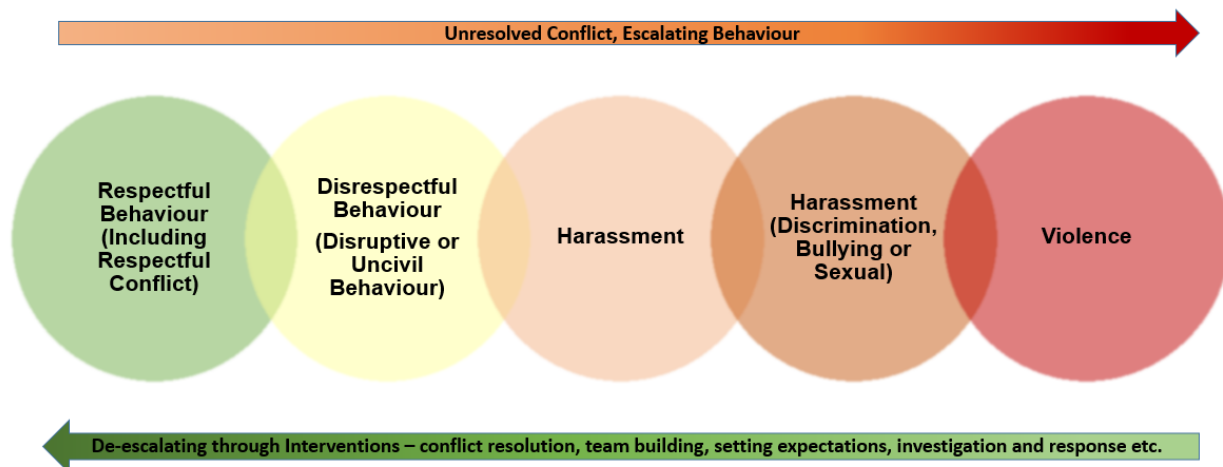
## ELEMENTS

### 1. Points of Emphasis

- 1.1 All workers, including managers/medical leaders and supervisors, have a shared responsibility to promote and sustain safe and respectful behaviour in the workplace, and are expected to participate in, and work collaboratively towards, ensuring a healthy workplace that is free from disrespectful behaviour, discrimination, harassment, and violence.
- 1.2 AHS recognizes that respectful conflict can lead to greater excellence in patient care and other positive outcomes, and that in most cases, conflict is best addressed through discussion between those who are closest to and affected by the issue(s).
- 1.3 All AHS workers have a shared responsibility to:

- a) promote and sustain respectful behaviour in the workplace in line with the AHS Values;
- b) participate in and work collaboratively towards addressing and managing conflict with other AHS workers; and,
- c) not exhibit disrespectful behaviour, discrimination, harassment, or violence in the workplace.

1.4 AHS has adopted the following behaviour continuum, which guides its assessment of and response to conflict, disrespectful behaviour, harassment, and violence between AHS workers:



## 2. Conflict Between Workers

- 2.1 In line with the continuum outlined at Section 1.4, AHS acknowledges that conflict can contribute to disrespectful behaviour in our working relationships, and that disrespectful behaviour can be a precursor to harassment and violence.
- 2.2 Worker-to-worker harassment and violence are not tolerated and are considered workplace health and safety hazards.
  - a) Sections 4 through 9 of this Procedure apply to harassment and violence between workers.
  - b) Section 5 applies to reporting harassment and violence concerns.
- 2.3 AHS workers are accountable to address conflict with other workers in a respectful and timely manner in accordance with the AHS Values, unless doing so would put their personal safety at risk.

- 2.4 There are many options available to workers to seek help in dealing with conflict or disrespectful behaviour. Where AHS workers are not sure what to do next and need more tools, resources, or coaching, they can contact their manager/medical leader, **next level manager**/medical leader, or supervisor for support and guidance.
- 2.5 Where conflict cannot be resolved by the affected workers, or where addressing the conflict would put a worker's personal safety at risk, the affected AHS workers shall involve their manager(s)/medical leader(s) to explore other appropriate options to address and manage the conflict.
- 2.6 Where an AHS worker is requesting assistance that requires manager/medical leader intervention in the situation, the AHS worker shall share all relevant and specific details of their concerns with their manager/medical leader, and what actions the AHS worker has taken to try and address their concerns.
- 2.7 Conflict management and resolution efforts by AHS workers and managers/medical leaders shall be undertaken in accordance with established AHS programs and processes, which can be found on the Respectful Workplaces Insite page.
- 2.8 Where AHS workers do not feel comfortable contacting their manager/medical leader, next level manager/medical leader, or supervisor for support and guidance, they may contact Human Resources Business Partnerships (HRBP) or Medical Affairs, as applicable.
- 2.9 Any party involved in or affected by conflict, who believes the conflict has not been appropriately managed or resolved, may seek assistance from the next level manager/medical leader.

### 3. **Manager/Medical Leader Accountability**

- 3.1 AHS managers/medical leaders are responsible to provide guidance to AHS workers upon request and, as necessary, support conflict resolution and other interventions between AHS workers.
- 3.2 Where the manager/medical leader is unable to resolve conflict, or where they are involved in the unresolved conflict, the next level manager/medical leader shall be engaged to support conflict resolution.
  - a) Further escalation to the next level manager/medical leader shall continue until the conflict is appropriately managed or resolved.
- 3.3 Managers/medical leaders shall:
  - a) be the accountable agent of AHS in ensuring incidents of disrespectful behaviour, discrimination, harassment and violence are addressed as soon as is reasonably practicable, regardless of:

- (i) how they became aware of the concern or incident (that being whether they received a report of the incident, witnessed the incident, or became aware of the incident through any other means); or
  - (ii) whether the concern or incident arose within the area they manage or supervise.
- b) report concerns arising in another work area to the applicable manager/medical leader of the other work area, or the next level manager of that work area as required.

#### 4. Preventative Strategies

- 4.1 AHS acknowledges conflict can contribute to disrespectful behaviour in our working relationships and disrespectful behaviour can be a precursor to harassment and violence. Therefore, effective conflict management is a key strategy for preventing harassment and violence between workers.
- 4.2 The prevention and management strategies/plans for Type III harassment and violence include, but are not limited to:
- a) fostering a safe, healthy and inclusive workplace which supports workers' physical, psychological, and social well-being;
  - b) providing supports to enable shared accountability between AHS workers, managers/medical leaders, supervisors, and AHS, in addressing and resolving conflict between workers;
  - c) providing training for AHS workers, managers/medical leaders, and supervisors in support of respectful workplace behaviour, effective conflict management, and the prevention of harassment and violence (more information on training can be accessed on the Respectful Workplaces Insite page);
  - d) communication tactics to make workers aware of the various supports available to help them to protect themselves and others from Type III harassment or violence;
  - e) clear behavioural expectations as outlined in the *Respectful Workplaces and the Prevention of Harassment and Violence Policy* and this Procedure;
  - f) systems and processes to support accountability and effective performance management of behavioural expectations;
  - g) the AHS *Code of Conduct*;

- h) *Our People Strategy*;
- i) implementation of *Our People Survey* and *Pulse Survey*;
- j) implementation of the *Diversity and Inclusion Census*;
- k) completing applicable workplace harassment and violence risk assessments, including, but not limited to:
  - (i) the *Hazard Identification, Assessment and Control (HIAC) Process*, which is a fundamental activity that helps prevent injury and illness in the workplace. It is also a requirement within the *Workplace Health and Safety Management System (WHS MS)* and the *Occupational Health and Safety Code (Alberta)*;
  - l) workplace supports such as Emergency Response Codes and Plans, and Protective Services presence; and
  - m) local law enforcement contact information.

## 5. Incident Response and Reporting

- 5.1 Where an incident of violence occurs, immediate assistance may be obtained by doing one or more of the following:
- a) requesting assistance from another worker in the area, the manager/medical leader, or the supervisor;
  - b) initiating the appropriate Emergency Response Code (for example, Code White, Code Purple, Code Black, or Active Assailant);
  - c) calling Protective Services at 1-888-999-3770; or
  - d) calling 911 for law enforcement.
- 5.2 Incidents of harassment and violence involving or affecting AHS workers shall be immediately reported to the manager/medical leader or supervisor.
- a) Where the direct manager/medical leader or supervisor is the alleged **respondent**, the incident shall be reported to the next level manager/medical leader.
- 5.3 If an AHS worker affected or injured by workplace harassment or violence is unable to notify a manager/medical leader or supervisor, the worker responding to the incident is responsible for the notification. If the responding worker is unsure if the incident has been reported, they shall notify the manager/medical leader or supervisor.

- 5.4 All incidents, including **near miss** events, shall be reported, as soon as possible, through MySafetyNet by the affected AHS worker, responding AHS worker, or the affected AHS worker's manager/medical leader. Reports shall be fully completed, contain all pertinent information, and consider all events leading up to, during, and after the incident.
- 5.5 Workers reporting an injury or adverse symptom resulting from an incident of workplace harassment or violence shall be advised by their manager/medical leader or supervisor to consult a health care professional of their choice for treatment or referral to treatment.
- 5.6 Workplace Health and Safety (WHS) shall report incidents involving AHS worker injury or illness needing assessment by a physician, or licensed health care professional, to the Workers' Compensation Board (WCB). This notification is triggered by the MySafetyNet report.
- 5.7 It is the responsibility of the manager/medical leader or supervisor to ensure that the incident has been reported properly according to the AHS *Incident Management* Process and where necessary, to Protective Services.
- 5.8 AHS workers may escalate issues of non-compliance with this Procedure by the manager/medical leader or supervisor by reporting this to the next level manager/medical leader.

## 6. Investigation and Documentation

- 6.1 Managers/medical leaders and/or supervisors, as applicable, have a duty to investigate all reports and incidents of Type III harassment or violence in the workplace in a timely, fair, safe, and respectful manner in order to take appropriate steps to respond, and in an effort to prevent reoccurrence.
- 6.2 Managers/medical leaders and/or supervisors shall, on behalf of AHS and in partnership with HRBP (and Medical Affairs, where applicable), conduct a preliminary review of the concern or incident to determine what form(s) of investigation is appropriate to the situation in accordance with legal, procedural, and other requirements.
- 6.3 Review or investigation processes may include, but are not limited to:
- fact-finding and root cause analysis;
  - identification of possible informal resolution or other intervention options (for example, corrective actions); and/or
  - formal investigation (as per the *Incident Reporting and Investigation Standard of Practice* and *Investigations Policy*).

- 6.4 More than one type of review or investigation (as per section 6.3) may be required in certain circumstances. Where this is the case, the reviews or investigations shall be conducted to meet the respective requirements of each required type of review or investigation. Managers/medical leaders can seek guidance from HRBP on managing multiple investigations where they are deemed necessary.
- 6.5 Following investigation, manager/medical leader and/or HRBP, as applicable, shall:
- a) document a description of the incident and how the investigation was undertaken;
  - b) determine and document root causes, corrective actions, and/or findings pertinent to the incident; and
  - c) retain this information in the investigation file(s), as applicable.
- 6.6 Where determined necessary, the manager/medical leader and/or supervisor shall implement the identified corrective actions, ensuring timely communication to impacted parties.
- 6.7 Where a report was filed in the MySafetyNet system, the manager/medical leader and/or supervisor shall ensure the report is completed with the required information.
- 6.8 MySafetyNet reports are kept in electronic format in the event of an inquiry from Alberta OHS. MySafetyNet reports are kept in accordance with the AHS *Records Retention Schedule*.

## 7. Investigation Communication

- 7.1 Where there are necessary corrective actions, the manager/medical leader and/or supervisor shall communicate the required information to implement the corrective actions to the impacted parties on a need-to-know basis.
- 7.2 At the conclusion of an investigation, the manager/medical leader, in consultation with HRBP (and Medical Affairs where applicable), shall ensure that:
- a) the reporting party is notified of the investigation's findings and general outcome, subject to applicable legislation, bylaws, or AHS policies; and,
  - b) the respondent(s) is notified of the investigation's findings and of further corrective actions and/or outcomes, if any.



## 8. Disclosing Information

- 8.1 See Sections 3.6 through 3.9 of the *Respectful Workplaces and the Prevention of Harassment and Violence* Policy for details about disclosure of information.

## 9. AHS Worker Support

- 9.1 To support the physical and psychological health and safety of AHS workers, AHS offers and provides support to AHS workers who are affected by respectful workplace concerns, workplace harassment or violence, or otherwise involved in a review or investigation. These supports may include, as applicable:
- a) access to the AHS Employee and Family Assistance Program;
  - b) access to the Alberta Medical Association Physician and Family Support Program;
  - c) information about WCB benefits;
  - d) the supports outlined in the Workplace Violence – Post Incident Employee Supports tool; and
  - e) any other available supports deemed reasonable and appropriate by AHS.
- 9.2 Performance management and/or discipline may be used as a corrective action as per the *Performance Management* and *Progressive Discipline* procedures.

## 10. Respectful Workplaces and the Prevention of Harassment and Violence Training

- 10.1 AHS offers training to AHS workers as one of many controls to protect workers and empower them to proactively manage and respond to disrespectful behaviour, harassment, and violence between workers (more information on training can be accessed on the Respectful Workplaces Insite page).
- 10.2 Additional training may be available to employees to support the prevention of workplace harassment and violence.

## DEFINITIONS

**AHS worker** means AHS employees, members of the medical and midwifery staffs, students, and volunteers, but excludes contracted service providers and their workers.

**Conflict** means a disagreement or opposition of interests, ideas or needs. It is a normal and expected part of working together and does not have to be negative in nature. Addressing conflict brings about greater understanding and cohesion, and allows for the incorporation of ideas, which brings about better results.

**Discrimination** means any practice, comment or conduct that is known or ought reasonably to be known to be unwelcome, and which is related to any protected ground in the *Alberta Human Rights Act*.

**Disrespectful behaviour** means comments or conduct that is rude, inconsiderate, or insensitive. Disrespectful behaviour includes behaviours that can be addressed and stopped by bringing them to the attention of the other individual. Disrespectful behaviour can also occur between two or more workers with both sides contributing to the discord. It is recognized that if disrespectful behaviour goes unaddressed, it can lead to harassment or violence.

**Harassment** means any single incident or repeated incidents of objectionable or unwelcome conduct, comment, bullying, or action by a person that the person knows or ought reasonably to know will or would cause offence or humiliation to a worker, or adversely affects the worker's health and safety and includes discrimination and sexual solicitations or advances. Workplace harassment can include incidents that occur outside of the workplace or working hours, but are related to the workplace (for example, inappropriate phone calls, e-mails, social media posts, visits to a worker's home and incidents at luncheons or after work socials) or harassment from clients and service recipients. Harassment excludes any reasonable conduct of a manager/medical leader or supervisor in respect of the management of workers or a workplace.

**Just Culture** means an environment where everyone feels safe, encouraged, and enabled to discuss quality and safety concerns.

**Manager** means the individual(s) who has the delegated human resources authority for directly planning, monitoring, and supervising direct reports.

**Near Miss** means any undesired event that could have resulted in an injury, illness or loss. No first aid or medical attention is required.

**Next level manager** means the manager to whom a manager or supervisor reports.

**Respectful behaviour** means behaviour that shows due regard for the feelings, wishes, rights, or traditions of others. Respectful behaviours support a safe, healthy, and inclusive workplace and are aligned with AHS' *Code of Conduct*, the principles of a just culture, and the AHS Values.

**Respondent** means the individual against whom an allegation has been made.

**Violence** means the threatened, attempted, or actual conduct of a person that causes or is likely to cause physical or psychological injury or harm, and includes domestic or sexual violence. It is acknowledged that harassment may become violence.

**Worker** means AHS employees, members of the medical and midwifery staffs, students, volunteers, and workers of contracted service providers.

**Workplace** means a location where a worker is, or is likely to be, while engaged in their work or work-related activities. The workplace includes all locations where business or social activities organized by AHS are conducted, including but not limited to work in the community and locations of work-related social events. Workplace includes any vehicle or mobile equipment used by the AHS worker as part of their job.

**REFERENCES**

- Alberta Health Services Governance Documents:
  - *Code of Conduct*
  - *Medical Staff Bylaws*
  - *Medical Staff Rules*
  - *Midwifery Staff Bylaws*
  - *Midwifery Staff Rules*
  - *Progressive Discipline Procedure (#1116-05)*
  - *Records Retention Schedule*
  - *Respectful Workplaces and the Prevention of Harassment and Violence Policy (#1115)*
  - *Respectful Workplaces and the Prevention of Harassment and Violence: Type I (External Party) Procedure (#1115-01)*
  - *Respectful Workplaces and the Prevention of Harassment and Violence: Type II (Patient-to-Worker) Procedure (#1115-02)*
  - *Respectful Workplaces and the Prevention of Harassment and Violence: Type IV (Domestic/Personal Relationship) Procedure (#1115-04)*
- Alberta Health Services Resources:
  - AHS Values
  - Collective Agreements
  - *Diversity and Inclusion Census*
  - *Hazard Identification, Assessment, and Control Process*
  - MySafetyNet
  - *Our People and Our People Pulse Surveys*
  - *Our People Strategy*
  - *Patient First Strategy*
  - Respectful Workplaces Insite Page
  - *Workplace Health and Safety Management System*
- Non-Alberta Health Services Documents:
  - Accreditation Canada Standards
  - *Occupational Health and Safety Act (Alberta)*
  - *Occupational Health and Safety Code (Alberta)*
  - *Occupational Health and Safety Regulation (Alberta)*

**VERSION HISTORY**

Date	Action Taken
<a href="#">Click here to enter a date</a>	Optional: Choose an item
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