

Policy: Harassment Free Workplace

Number: SHA-06-009

Date Effective: November 18, 2024

Scope: Saskatchewan Health Authority

Date Revised:

This policy applies to the following team members:

- Staff
- Practitioner Staff
- Contracted Individuals
- Patient Family Partners
- Knowledge Keepers
- Volunteers
- Learners
- Contractors

(See Appendix A for Definitions)

1. Purpose

This policy sets out the Saskatchewan Health Authority's (SHA) commitment to fostering a harassment-free workplace and learning environment where all SHA team members are treated with respect and dignity. Workplace harassment is against the law. This policy reinforces the protection of the rights of all SHA team members under the *Saskatchewan Employment Act* and the *Saskatchewan Human Rights Code, 2018* which protect team members from harassment and discrimination.

This policy applies to every team member while they are in the workplace, or at any location related to employment. This includes:

- while travelling, at conferences, training, information sessions or social events sponsored by the SHA;
- using technology or social media as it relates to employment or workplace relationships; and
- incidents that occur outside of the workplace or working hours, but are related to the workplace and may constitute harassment as defined in this policy (for example, inappropriate phone calls, e-mails, social media posts, unwelcomed visits to a team member's home and incidents at luncheons or after work socials).

This policy encourages prevention of harassment and early resolution of harassment incidents.

This policy covers:

- **Harassment Based on Prohibited Grounds** including any inappropriate conduct, comment, display, action or gesture by a person that:
 - is based on any prohibited ground as defined in [The Saskatchewan Human Rights Code, 2018](#) or on physical size or weight; or
 - constitutes a threat to the health or safety of the team member.
- **Personal Harassment** including any inappropriate conduct, comment, display, action or gesture by a person that:

- adversely affects a team member's psychological or physical well-being; and
- the perpetrator knows or ought to reasonably know would cause the team member to be humiliated or intimidated.

Personal harassment must involve repeated conduct or a single, serious incident that causes a lasting harmful effect on the team member. All incidents of inappropriate conduct need to be appropriately addressed to ensure that the workplace remains respectful and free of harassment.

Personal harassment may include:

- verbal or written abuse or threats;
 - insulting, derogatory or degrading comments, jokes or gestures;
 - personal ridicule;
 - harmful or embarrassing gossip;
 - unjustifiable interference with another's work or work sabotage;
 - refusing to work or co-operate with others; or
 - interference with or vandalizing personal property; and
- **Sexual Harassment** is any conduct, comment, display, action or gesture of a sexual nature that the person knows or ought reasonably to know is unwelcome.

The definition of harassment in any applicable collective bargaining agreement continues to apply, in the event that it is more specific than the definition in the *Saskatchewan Employment Act*. For the purposes of this Harassment Free Workplace Policy and procedure, this policy's definitions of harassment will be applied to SHA harassment investigations.

What is Not Harassment

Harassment does not include any reasonable action that is taken by an employer, or a manager or supervisor employed or engaged by an employer, relating to the management and direction of the employer's workers or the place of employment. Day-to-day management or supervisory decisions are not considered harassment even if they sometimes involve unpleasant consequences. Managerial actions must be carried out in a manner that is not abusive.

Other situations that do not constitute harassment include:

- physical contact necessary for the performance of the work using accepted industry standards; or
- conflict or disagreements in the workplace, where the conflict or disagreement is not based on one of the prohibited grounds.

Harassment can exist even where there is no intention to harass or offend another. Team members must take care to ensure their conduct is not offensive to another.

Workplace issues that are not harassment should be handled through other policies or processes (see section 6 below for some examples).

2. Principles

- 2.1. A negative and preventable barrier to learning and livelihood such as harassment is a serious violation within an SHA workplace. It is a reasonable expectation to have a safe workplace and learning environment.

- 2.2. The [SHA Values](#) contribute to quality of care, comradery, focus, and efficiency. On the other hand, harassment reduces comradery, and creates distractions which may lead to negative consequences and is not supported by SHA values.
- 2.3. The SHA takes all harassment concerns seriously. The SHA is committed to implementing this policy to ensure it is effective in preventing and stopping harassment, as well as creating a productive and respectful workplace.
- 2.4. All team members are entitled to submit a harassment concern and do so confidentially (in accordance with procedures) without retaliation.
 - It is strictly prohibited to penalize or retaliate against any team member in any manner because of their participation with a harassment concern or when seeking enforcement of this policy and procedure. Doing so is considered to be a breach of this policy and subject to discipline.

3. Policy

- 3.1. Team members are entitled to a workplace free of harassment.
- 3.2. Team members commit to a work environment where the dignity and worth of every person is respected. Harassment in the workplace is not tolerated and all reasonable steps to ensure no team member is subject to harassment will be taken.
- 3.3. Team members refrain from causing or participating in the harassment of another team member, and co-operate with any person investigating harassment concerns, in accordance with Part III of *The Saskatchewan Employment Act*.
- 3.4. The SHA does not normally accept a formal harassment concern where the concern is submitted more than one (1) year after the reporter became aware of the alleged harassment. Decisions are made on case by case basis and an investigation may proceed for certain reasons, which may include sexual assault, a pattern of behaviour, or other exceptional circumstances.
- 3.5. **Malicious/Bad Faith Harassment Concerns**
Where an investigation finds a reporter of a concern has knowingly made a false allegation, the reporter is subject to appropriate discipline.
- 3.6. **Other options for the reporter of a harassment concern**
Nothing in this policy prevents or discourages team members from referring a harassment concern to the *Saskatchewan Occupational Health and Safety Branch* at the *Ministry of Labour Relations and Workplace Safety* under *The Saskatchewan Employment Act* and regulations.

Team members may file a concern with the *Saskatchewan Human Rights Commission* under *The Saskatchewan Human Rights Code, 2018*.

This Policy is not intended to discourage or prevent team members from exercising any other legal rights pursuant to any other law.

Post-secondary learning Institutions (U of S, U of R, Saskatchewan Polytechnic, etc.) may have harassment policies, clinical placement agreements, and affiliation agreements applicable to learners and clinical instructors/faculty. The SHA and the post-secondary learning institution will collaborate on situations where there is dual jurisdiction. A reporter of harassment may be referred to the post-secondary learning institution in the event that they have sole jurisdiction.

4. Roles and responsibilities

4.1. Team Members

- Have a role and responsibility in developing and maintaining a harassment free workplace.
- Review and adhere to the *Harassment Free Workplace Policy* (SHA-06-009) and related procedures as they apply to team members including employees, practitioner staff, contractors, contracted individuals, patient family partners, knowledge keepers, volunteers and learners.
- Refrain from causing or participating in the harassment of another team member.
- Co-operate with any person investigating harassment concerns.
- Report breaches of this policy, in accordance with associated procedures, to their supervisor or Human Resources contact.

4.2. Leaders/Managers/Supervisors

- Ensure, insofar as is reasonably practicable, that all team members under the supervisor's direct supervision and direction are not exposed to harassment at the workplace.
- Provide an opportunity to review and discuss this policy and related procedure to the team members you supervise.
- Direct and support team members to complete harassment training as required.
- Accept and address concerns regarding a potential breach of this policy.
- Support and advise team members you supervise on matters related to workplace harassment. Consult with Human Resources as required.
- In consultation with Human Resources (Labour and Employee Relations) and/or Practitioner Staff Affairs, determine next course of action for reported workplace harassment concerns.
- Cooperate with and assist with workplace harassment investigations as required.

4.3. Human Resources

- Advise and educate managers about this policy and its application.
- Provide managers with the necessary tools to educate team members about this policy.
- Include this policy in new hire orientation programs and ensure that new team members have reviewed the provisions of the policy.
- Assist managers to assess potential breaches of this policy.
- Respond to reported alleged breaches of this policy.

5. Failure to follow this policy

Failure to follow this policy will be handled according to:

- collective bargaining agreements;
- applicable legislation, regulations, policies, procedures and processes;
- SHA Practitioner Staff Bylaws; and/or

- Clinical Placement Agreements

Breach of this policy may result in discipline up to and including termination/revocation of:

- employment;
- contractual relationship;
- practitioner staff appointment;
- privileges; and/or
- access to SHA workplaces for learning experiences

6. Documents that relate to this content

Policy

Appendix A: Definitions

Appendix B: Replaced Documents

Procedure

SHA-06-009P1 [Harassment Free Workplace Procedure](#)

Other

SHA-06-007 [Workplace Expectations Policy](#)

[SHA Interim Practitioner Staff Bylaws](#)

[The Saskatchewan Employment Act](#)

[The Saskatchewan Human Rights Code, 2018](#)

[The Occupational Health and Safety Regulations, 2020](#)

7. Roles that manage and approve this policy

Policy Sponsor: Chief Human Resource Officer

Approve the policy and related content.

- Share responsibility for revisions and renewal with the owner.

Policy Owner: Executive Director, Labour & Employee Relations

- Manage this policy including policy communication, education, implementation, evaluation and audit.
- Share responsibility for revisions and renewal with the sponsor.

8. References

1. Government of Saskatchewan. [Harassment Prevention: An employer's guide for developing a harassment prevention policy](#); 2022. #34.

Appendix A: Definitions

Contracted Individuals: Individual providing services:

- in their personal capacity; or
 - through a sole proprietorship;
- pursuant to a contract with the SHA.

Contractor: A business (incorporated entity or partnership) providing services pursuant to a contract with the SHA.

Knowledge Keepers (First Nation, Métis and Inuit Elders): There is a spiritual understanding combined with sacred and ancient knowledge within the Knowledge Keepers. Knowledge Keepers have attained a high degree of wisdom, knowledge and understanding of First Nation, Métis, or Inuit history, traditional teachings, ceremonies, and healing practices. They are role models within their communities by leading a healthy lifestyle and are acknowledged by the community as Knowledge Keepers.

Learners: Clinical and Non-clinical student placements.

Patient Family Partners (PFPs): Patient Family Partners (PFPs) have healthcare experience(s) as a patient/resident/client, or a family member/support person. PFPs partner with the SHA to:

- develop policies, programs, and practices affecting patients;
- improve the quality and safety of the patient experience; and
- embed people/patient & family centered care across the SHA.

Practitioner Staff: Qualified members of a health profession who are legally entitled to practice in Saskatchewan and who have been granted privileges by the SHA.

Reporter: The team member who is submitting the report of harassment. Most often, this is the individual who feels that they have been harassed.

Respondent: The team member who is alleged to have committed harassment.

Staff: SHA employees include in-scope, out-of-scope, full-time, part-time and casual staff in all facilities owned, operated and leased by the SHA as well as SHA staff working in the community or remote.

Team/Team Member: In the context of SHA policy, 'the team' represents all individuals working, volunteering, or learning within the SHA. This could include staff, contractors, contracted individuals, Patient Family Partners, Knowledge Keepers, volunteers and learners. The specific team member groups required to follow a policy or procedure are listed in the header/title page of the document.

Volunteer: A person that provides services with no financial gain to the benefit of individuals or groups within the SHA.

Appendix B: Replaced Documents

SHA policy and procedure replaces all related:

- departmental,
- unit, or
- former regional documents.

Teams may need to update local work standards to make sure they are not different from SHA policy and procedure before they continue to use them.

This policy replaces or partially replaces the following former regional health authority policies, procedures, forms or other related documents including but not limited to:

Harassment Free Workplace Policy and Procedure (SHA-06-009 & SHA-06-009P1) Full Repeals

Cypress	Abuse/Harassment	7-01
Cypress	Harassment in the Workplace	2-80
Heartland	Harassment	OHS02-04
	<ul style="list-style-type: none"> • Harassment Meeting Letter • Harassment Informal Closure • Formal Harassment Complaint • Respectful Workplace Poster 	OHS02-04.01 Exh OHS02-04.02 Fm OHS02-04.03 Fm OHS02-04.04 Exh
Keewatin	Respectful Workplace – Inappropriate Behavior	SP-413
Kelsey Trail	Abuse-Harassment	8-060
Kelsey Trail	Alleged Harassment Report Form	
Kelsey Trail	Harassment	4-130
Kelsey Trail	Harassment/Abuse	5-050
Kelsey Trail	Harassment/Abusive Behavior	6-090
Mamawetan	Violence Prevention Program	E-01A
Prairie North	Harassment and/or Abuse Policy	6008
	<ul style="list-style-type: none"> • Harassment and/or Abuse Procedure • Harassment Complaint Form • Harassment Assessment Checklist • Harassment Investigation Checklist 	6008(P) 6008(A) – Appendix A 6008(A) – Appendix B 6008(A) – Appendix C
Prince Albert Parkland	Harassment Prevention Policy	210-40-01
	<ul style="list-style-type: none"> • Harassment Prevention Procedure • Harassment Complaint Form 	210-40-01P
Regina	Workplace Harassment Policy	210
	<ul style="list-style-type: none"> • Workplace Harassment – Complaint Resolution Procedure • Appendix A – Report of Harassment Form • Appendix B – Complainant Consultation Checklist • Appendix C – Preliminary Screening Form • Appendix D – Respondent Consultation Checklist • Appendix E – Challenge for Thoroughness Application 	210-1
Saskatoon	Psychological Hazard: Harassment Policy	54-001
	<ul style="list-style-type: none"> • Psychological Hazard: Harassment Procedure 	

Saskatoon	Workplace Harassment Policy	7311-30-022
	<ul style="list-style-type: none"> • Workplace Harassment Procedure • Appendix A – Criteria to Establish Whether Discrimination has Occurred • Appendix B – SHR Harassment Complaint Form • Appendix C – SHR Harassment Handbook 	
Sun Country	Workplace Harassment	HR-25-10
Sunrise	Workplace Harassment Policy	1221.001
	<ul style="list-style-type: none"> • Workplace Harassment – Complaint Resolution Process Procedure • Harassment Complaint Form - Confidential 	<p>1221.001.1</p> <p>1221.001.2</p>

Harassment Free Workplace Policy and Procedure (SHA-06-009 & SHA-06-009P1) Partial Repeals

Cypress	Hazard Identification	2-10
Cypress	Occupational Health and Safety Orientation	4-10
Cypress	Statement of Responsibilities and Accountabilities	1-20
Heartland	Incident Investigations	OHS05-03
Heartland	LTC Placement Process	C02-01
Heartland	Resident/Family Handbook	C04-26
Sun Country	Abuse of Client/Patient/Resident	HR-20-00
Sunrise	Abuse	130.006

SHA-06-009P1

Harassment Free Workplace Procedure

Related Policy: Harassment Free Workplace Policy
Scope: Saskatchewan Health Authority

This procedure applies to the following team members:

- Staff
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- Contractors

Table of Contents

1. Purpose	3
2. Roles and responsibilities	3
2.1. Team Members	3
2.2. All levels of Management	3
2.3. Human Resources, Labour & Employee Relations	3
3. Preliminary Matters	3
3.1. Reporter's Rights	3
3.2. Respondent's Rights	4
3.3. Concerns of Third Party Harassment	4
4. Procedure	5
4.1. Informal Harassment Concern	5
4.2. Formal Harassment Concern	7
5. Confidentiality	11
6. Failure to Follow This Procedure	12
7. Documents That Relate to This Content	12
8. Roles that manage and approve this procedure	12
9. References	12
10. Replaced Documents	13
Appendix A: Definitions	14

1. Purpose

This procedure sets the expectation and explains the process for team members to report a harassment concern to SHA. It also explains the SHA's processes to respond to harassment concerns. A reported concern that does not meet the definition of harassment may constitute a breach of a different SHA policy and should be managed through the procedures of the other applicable policy.

Nothing in this procedure prevents or discourages team members from referring a harassment complaint to the Saskatchewan Occupational Health and Safety Branch at the Ministry of Labour Relations and Workplace Safety under [The Saskatchewan Employment Act](#) and regulations.

Team members may file a complaint with the Saskatchewan Human Rights Commission under [The Saskatchewan Human Rights Code, 2018](#).

2. Roles and responsibilities

2.1. Team Members

- Report concerns of harassment to your supervisor or Human Resources as outlined in this procedure.
- May participate in voluntary harassment mediations as outlined in this procedure.
- Participate in required harassment investigations as outlined in this procedure.

2.2. All levels of Management

- Respond to harassment concerns as outlined in this procedure.

2.3. Human Resources, Labour & Employee Relations

- Respond to harassment concerns as outlined in this procedure.
- Maintain this policy and procedure as needed.

3. Preliminary Matters

Any situation involving criminal behavior, violent acts of force, aggression, or where staff safety and security is under threat of violence should be reported immediately (see [Culture of Safety Policy](#) (SHA-02-001)). Complaints that involve a criminal offence may also be reported to the appropriate law enforcement agency.

3.1. Reporter's Rights

A Reporter is a person who brings forward a concern of alleged harassment to the SHA's attention. The Reporter has the right to:

- File a report of alleged harassment without fear, embarrassment or reprisals (retaliatory action is prohibited against any team member who has exercised their rights under this policy and procedures);
- Be protected from further harassment;

- Be supported during the investigation, which includes confidentiality (except in circumstances when investigation procedures and disciplinary action warrant disclosure);
- Be represented by union and/or supported by a support person who is not a direct supervisor or a co-worker. Additional cultural support (e.g. an Elder) is appropriate and can be arranged by the Reporter;
- Request the assistance of an Occupational Health Officer by contacting the Saskatchewan Occupational Health and Safety Branch at the Ministry of Labour Relations and Workplace Safety at any time during the process; and
- Receive fair impartial treatment in an environment free of harassment and discrimination and be kept informed throughout the process of the status of the investigation and the findings of the investigation.

3.2. Respondent's Rights

The Respondent is someone who has been named as an alleged harasser pending the outcome of the concern. The Respondent has the right to:

- Be informed that a concern has been filed prior to the commencement of an investigation;
- Be presented with a copy of the written statement of allegations and to be afforded an opportunity to respond;
- Be supported during the investigation, which includes confidentiality (except in circumstances when investigation procedures and disciplinary action warrant disclosure);
- Be represented by union and/or supported by a support person who is not a direct supervisor or a co-worker. Additional cultural support (e.g. an Elder) is appropriate and can be arranged by the Respondent;
- Contact the Saskatchewan Occupational Health and Safety Branch at the Ministry of Labour Relations and Workplace Safety at any time during the process; and
- Receive fair impartial treatment in an environment free of harassment and discrimination and be kept informed throughout the process of the status of the investigation and the findings of the investigation.

3.3. Concerns of Third Party Harassment

This policy includes harassment connected to any matter or circumstance arising out of the workplace including conduct perpetrated by a third-party with whom SHA does business with or whom staff is required to meet with. This may include patients, residents, clients, families, and the public.

The jurisdiction to investigate and/or sanction conduct can be limited in these circumstances. Based on the specific situation, the SHA will support its team members by taking practicable action within its control to stop or reduce the risk to its team members of being harassed by third-parties.

4. Procedure

If a team member feels that they are being harassed based on the definition of harassment in the Harassment Free Workplace Policy, the following procedure will be used to resolve the issue:

4.1. Informal Harassment Concern

Informal concerns are concerns of alleged harassment brought to SHA Management's attention where the Reporter is not seeking a formal investigation. Informal concerns do not result in a harassment investigation. Informal processes are focused on preventing harassment from occurring in the future.

If the alleged harasser is a team member's direct supervisor, the informal concern should be brought to the attention of that person's direct supervisor.

If an informal concern of harassment is raised to a team member who is not management, that team member should refer the Reporter of the concern to the appropriate SHA Manager.

Informal harassment concerns can occur when a Reporter:

- suspects they have been the target of harassment but is not sure;
- is hesitant to submit a formal written concern;
- may only want information or indirect assistance in stopping the offending behavior from continuing; or
- wants to determine a course of action, without a formal investigation.

Lack of a formalized concern does not mean that there is no problem to address. Using informal concern procedures can allow reporters to maintain more control over the resolution.

Informal Concern Where the Alleged Harasser is NOT Named

Sometimes a Reporter of a concern may not wish to identify the alleged harasser nor ask for direct intervention. A Reporter may only want information, advice or indirect assistance in stopping the offending behavior from continuing. When no harasser is named, the Manager or designated authority may use any combination of the following strategies to respond:

- Indirectly intervene as required by arranging for all staff to review the SHA Harassment Free Workplace Policy and educate staff on the contents of what is and is not acceptable. Offer Employee and Family Assistance Program (EFAP: Wellbeing & Resilience);
- Remind the Reporter of other health benefits they may have available to them;
- Review the contents of the Harassment Free Workplace Policy and Procedure with the Reporter of the concern;
- Outline the protections, duties and obligations (e.g., retaliation, confidentiality) involved with a formal investigative processes. Encourage the team member to file a formal report of harassment where the matter poses a serious threat to the health or safety of the team member or others, is criminal in nature or where

- circumstances lead the Manager or designated authority to suspect intervention and educational activities cannot prevent the harassment from recurring;
- Provide the Reporter guidance, when appropriate, to object to the alleged harasser. Document all discussions and actions taken using the [Manager Informal Report Checklist](#); and
 - Monitor and measure the scenario. Meet with the Reporter periodically (e.g. once or twice over the next few weeks or months) to enquire if matters are improving.

Informal Concern where the Alleged Harasser is Named

In some circumstances the Reporter names an alleged harasser and requests informal intervention. In this case, the Reporter may not be seeking an admission of guilt, apology or discipline. Rather, they may be looking for an agreement with the alleged harasser that the offensive behaviour will not continue. This agreement does not have to be in writing.

Resolution options to informal concerns:

- **Can the Reporter of the alleged harassment concern resolve the issue directly?**
The Reporter is encouraged to approach the Respondent(s) to address the issue directly if they are comfortable in doing so, and if it is safe to do so. The Reporter may make it known to the Respondent(s) that the behaviour is inappropriate and must stop. A person may not be aware that their behaviour constitutes harassment. Often, simply informing a person that their behaviour is inappropriate and offensive is enough to end it. If the concern can be resolved by those directly involved, it reduces the disruption in the workplace or learning environment and contributes to better relationships in the future.
- **Can someone else help the Reporter to resolve the issue?**
If the Reporter is unable to approach the other person or the discussion does not improve the situation, the Reporter may seek assistance from a Leader or a union representative, where appropriate. In consultation with Human Resources (HRBP, Labour Relations, Employee Relations), Practitioner Staff Affairs, Learner Placement Unit, and/or a union representative, as appropriate, the Leader will assist in resolving the issue as appropriate in the circumstances.
The use of coaching, performance management, critical conversations to correct inappropriate behaviour, mediation and/or facilitation can resolve the issue and prevent it from escalating or reoccurring. Any of these options may resolve the issue without the requirement of a formal concern being filed. The Leader will keep documentation of the incident and actions taken using the [Manager Informal Report Checklist](#). Other culturally appropriate alternative dispute resolution options may be appropriate. (Eg. A talking Circle may be an appropriate alternative to mediation).
 - An informal resolution is not a formal investigation and no record of the complaint or the agreement will be kept on either the Reporter or the alleged harasser's personnel file.
 - If resolution is not possible, the concern may be withdrawn by the Reporter or forwarded to a formal investigation.
 - Managers should document all discussions and actions taken. At any time during the forgoing steps, the Reporter is encouraged to file a formal

harassment concern when the matter poses a serious threat to the health and safety of the Reporter or other team members; is potentially criminal in nature, or where circumstances lead the SHA to suspect intervention and educational activities may not prevent the alleged harassment from recurring.

4.2. Formal Harassment Concern

Where the circumstances warrant it and the issue cannot otherwise be resolved, the Reporter of the alleged harassment may complete a [Report of Harassment](#) Form and email it to harassment@saskhealthauthority.ca.

The SHA does not normally accept a formal harassment concern where the concern is submitted more than one (1) year after the reporter became aware of the alleged harassment. Decisions are made on case by case basis and an investigation may proceed for certain reasons, which may include sexual assault, a pattern of behaviour going back more than a year, or other exceptional circumstances.

Submission of the Report of Harassment commences a formal concern.

Recording and Referral of a Formal Concern:

Human Resources will:

- *acknowledge receipt of the formal concern with the Reporter;*
- *record the formal concern for tracking and monitoring purposes;*
- *assign it to an appropriate resource (Labour Relations or Employee Relations Specialist) within two working days.*

The assigned resource is responsible for:

- *Informing the most directly responsible leader (RL) that a formal harassment concern has been received by Human Resources;*
- *The process management of a formal concern;*
- *Oversight of the mediation process, where used; and*
- *Conducting an internal investigation, or overseeing an external investigation, of a formal concern.*

Consideration of Interim Measures:

The most directly responsible Leader(s) of the Reporter and of the Respondent (the "Responsible Leader(s)", or RL) will consider whether any interim measures are necessary to ensure the ongoing safety of the Reporter and Respondent. Consideration will include, but not be limited to:

- the nature of the alleged harassment;
- the prevailing circumstances in the workplace; and
- the request and/or circumstances of the Reporter and the Respondent.

The Responsible Leader(s) will consult with Human Resources (HRBP, Labour Relations, Employee Relations), Practitioner Staff Affairs, Learner Placement Unit, and/or the union(s) of the Reporter and Respondent. If separation is required it may include shift rearrangement, reassignment of duties, suspension pending investigation, transfer or access to leave provisions.

Withdrawal of the Formal Concern:

The Reporter may withdraw the formal concern at any stage by forwarding a written request to harassment@saskhealthauthority.ca. Human Resources will confirm the withdrawal with the Reporter and notify the Respondent, if necessary a Union representative, and Responsible Leader(s). Withdrawal of a concern does not prohibit the SHA from investigating the incident further if it is determined to be necessary.

Consultation Meeting with the Reporter:

A consultation meeting will be scheduled with the Reporter.

When arranging a consultation meeting, The Reporter will be notified of their access to a support person or representative. In addition to a representative, a cultural support person is appropriate and can be arranged by the individual.

The purpose of the consultation meeting with the Reporter is to:

- review the reported concern for completeness;
- provide information on the definition of harassment; the Harassment Free Workplace Policy and this Procedure;
- complete the Reporter Consultation Checklist;
- complete the Confidentiality Contract; and
- discuss resolution options including mediation and investigation.

At the conclusion of the consultation meeting, the Reporter will elect one of the following resolution processes:

- Take no further action: the Reporter may decide not to proceed with a formal concern under this policy.
- Resolve through Informal Process – the Reporter may choose to proceed through a mediation process or other culturally appropriate resolution process with the Respondent. If the Respondent agrees, a mediation will be coordinated. Whenever possible the parties are encouraged to attempt mediation prior to resorting to the formal investigation process.
- Formal Investigation Process – the Reporter may decide to proceed through the formal investigation process. An investigation may or may not move forward depending on a preliminary screening of the concern.

Preliminary Screening of the Concern:

Where the Reporter elects to proceed with a formal investigation, a Labour Relations Specialist or Employee Relations Specialist will review the written concern to determine:

- if the circumstances detailed in the concern are proven to be true; would the concern constitute harassment as defined in the Policy?

A written conclusion in the Preliminary Screening Form will be completed.

If the concern meets the criteria, a harassment investigation will occur.

If the concern does not meet the criteria:

- The RL will be notified.
- The Reporter will be notified of the outcome of the preliminary screening in writing;
- The harassment concern process is concluded; and
- Where appropriate, the issue raised will be addressed through other problem-solving mechanisms outside of the policy (e.g. the behaviour described may contravene a different SHA Policy).

Notification of the Respondent

If the Reporter elects to proceed with mediation, Employee Relations will initiate a consultation meeting with Respondent prior to a preliminary screening of the Concern.

If the Reporter elects to proceed by formal investigation, Employee Relations will initiate a consultation meeting with the Respondent once the Report passes a preliminary screening.

When arranging a consultation meeting, the Respondent will be notified of their access to a support person or representative. In addition to a representative, a cultural support person is appropriate and can be arranged by the individual.

The purpose of the consultation meeting with the Respondent is to:

- review and provide a copy of the Report of Harassment;
- provide information on the definition of harassment; the SHA Harassment Free Workplace Policy and Procedure;
- complete the Respondent Consultation Checklist;
- complete the Confidentiality Contract; and
- where appropriate determine if the Respondent is willing to participate in a mediation process.

Resolution - Mediation (or other culturally appropriate resolution process):

Mediation may occur at any time during informal or formal concern processes. Where the Reporter and Respondent agree to mediate, an appropriate facilitator/mediator to guide the process this will be arranged. The objective is to resolve the concern as soon as possible in a fair and respectful manner without resorting to the formal investigation process. The process does not involve an investigation, a report or an official decision on the merit of the concern. It provides a confidential, non-confrontational, facilitated opportunity for the Reporter and Respondent to openly communicate about the issue and focus on a mutually acceptable resolution. If resolution is not possible, the concern may be withdrawn by the Reporter or

forwarded to a formal investigation. If resolution is achieved, the Responsible Leader(s) will be notified that the concern has been resolved through this process.

Resolution - Investigation of the formal concern (if screened in for investigation):

Assignment of the Investigation after preliminary screening:

- **Internal investigation:**

Where no conflict of interest exists, the investigation may be assigned for an internal investigation.

- An investigation will be conducted.
- Upon completion, a report will be distributed.

- **External investigation**

It may be determined that an external investigator should conduct the investigation. Upon completion, a report will be distributed.

- **Investigation process (whether done internally or externally):**

The investigation will:

- give the Reporter an opportunity to explain the concern;
- allow the investigator to interview others who have information directly relevant to the events contained in the reported concern or the response; and
- allow the Respondent an opportunity to respond to the allegations in the reported concern and those which may arise as part of the investigation.

In the event that an informal resolution option presents itself during the investigation an investigator may recommend a pause in the investigation to explore informal measures.

- **The Investigation Report:**

At the conclusion of the investigation, the investigator's report shall include the:

- reported concern;
- Respondent's response;
- list of witnesses interviewed (may be redacted in the report and provided in a confidential appendix if determined to be appropriate);
- summary of relevant witness statements;
- summary of relevant documents used in analyzing the concern;
- factual findings of the investigation; and
- investigator's conclusion respecting each allegation indicating whether the concern was founded, unfounded or made in bad faith.

- **Distribution of the Investigation Report**

The investigation report will be distributed to:

- the Reporter and union representative as applicable;
- the Respondent and union representative as applicable;
- the Responsible Leader(s); and
- Labour Relations Specialist, Employee Relations Specialist, Practitioner Staff Affairs, or Learner Placement Unit as appropriate.

In the event of multiple Reporters, only the details pertaining to an individual concern will be provided to that Reporter. In the event of multiple Respondents,

only the details of the report pertaining to the individual Respondent will be provided to that Respondent.

- **Outcome Upon Receipt of the Final Investigation Report:**

In consultation with the appropriate support departments, each Responsible Leader shall determine the appropriate course of action to be taken which may include:

- education through a review of the SHA's Workplace Expectations Policy and Harassment Free Workplace Policy;
- referral to the Employee and Family Assistance Program; and/or other health benefits that may be available to the individual;
- conflict resolution or other mediation to assist in reconciliation of the Reporter and Respondent or others;
- performance expectations; and
- corrective discipline in the event the Harassment Free Workplace Policy, or other policies, were breached.
- no further action required if harassment was unfounded and a response is not necessary.

Note: Due to confidentiality laws, any corrective disciplinary actions taken by the SHA will not be communicated to the Reporter of the concern or witnesses who were interviewed during the investigation.

5. Confidentiality

Team members involved in the concern, formal or informal, will maintain confidentiality during, and after, the processes. Medical care providers, counsellors, EFAP(Wellbeing & Resilience), support individuals, and unions are appropriate to provide counsel.

The SHA will not disclose the name of the Reporter or Respondent or the circumstances related to the concern to any person except where disclosure is necessary as part of the resolution process, including the outcome, or required by law or an applicable collective bargaining agreement. No one involved in the circumstances of the concern or the resolution process will discuss or share the information outside of the process. Information is shared on a "need to know" basis and must not be shared further except as required by law. Failure to preserve the confidentiality of information may result in disciplinary action, up to and including dismissal.

Post-secondary learning Institutions (U of S, U of R, Saskatchewan Polytechnic, etc.) may have harassment policies, clinical placement agreements, and affiliation agreements applicable to learners and clinical instructors/faculty. The SHA and the post-secondary learning institution will collaborate on situations where there is dual jurisdiction. A reporter of harassment may be referred to the post-secondary learning institution in the event that they have sole jurisdiction.

The SHA is responsible to retain all documents related to a formal concern for seven years following the conclusion of the concern. No record of the concern will be kept on the personnel file of the Reporter or Respondent unless corrective discipline results.

6. Failure to Follow This Procedure

Failure to follow this procedure will be handled according to:

- collective bargaining agreements;
- applicable legislation, regulations, policies, procedures and processes; and/or
- SHA Practitioner Staff Bylaws.
- Clinical Placement Agreements

Breach of this procedure may result in discipline up to and including termination/revocation of:

- employment;
- contractual relationship;
- practitioner staff appointment; and/or
- Privileges.
- Access to SHA workplaces for learning experiences

7. Documents That Relate to This Content

Policy

SHA-06-009 [Harassment Free Workplace Policy](#)

SHA-06-007 [Workplace Expectations Policy](#)

SHA-02-001 [Culture of Safety Policy](#)

Forms

[Manager Informal Report Checklist](#)

[Report of Harassment Form](#)

Other

[Report of Harassment Flowchart](#)

[Workplace Harassment Handbook](#)

8. Roles that Manage and Approve this Procedure

Procedure Sponsor: Chief Human Resources Officer

- Approves this procedure and related content.
- Shares responsibility for revisions and renewal with the owner.

Procedure Owner: Executive Director, Labour & Employee Relations

- Manages this procedure including procedure communication, education, implementation, evaluation and audit.
- Shares responsibility for revisions and renewal with the sponsor.

9. References

n/a

10. Replaced Documents

See *Harassment Free Workplace Policy* (SHA-06-009) Appendix B

Appendix A: Definitions

Contracted Individuals: Individual providing services:

- in their personal capacity; or
 - through a sole proprietorship;
- pursuant to a contract with the SHA.

Contractor: A business (incorporated entity or partnership) providing services pursuant to a contract with the SHA.

Knowledge Keepers (First Nation, Métis and Inuit Elders): There is a spiritual understanding combined with sacred and ancient knowledge within the Knowledge Keepers. Knowledge Keepers have attained a high degree of wisdom, knowledge and understanding of First Nation, Métis, or Inuit history, traditional teachings, ceremonies, and healing practices. They are role models within their communities by leading a healthy lifestyle and are acknowledged by the community as Knowledge Keepers.

Learners: Clinical and Non-clinical student placements.

Patient and Family Partners (PFP): Have healthcare experience(s) as a patient/resident/client, or a family member/support person. PFPs partner with the SHA to:

- develop policies, programs, and practices affecting patients;
- improve the quality and safety of the patient experience; and
- embed people/patient & family centered care across the SHA.

Practitioner Staff: Qualified members of a health profession who are legally entitled to practice in Saskatchewan and who have been appointed to the Practitioner Staff of the SHA and to whom privileges may be granted by the SHA.

Reporter: The team member who is submitting the report of harassment. Most often, this is the individual who feels that they have been harassed.

Respondent: The team member who is alleged to have committed harassment.

Staff: SHA employees and practitioner staff. Staff include in-scope, out-of-scope, full-time, part-time and casual staff in all facilities owned, operated and leased by the SHA as well as SHA staff working in the community or remote.

Team/Team Member: In the context of SHA policy, 'the team' represents all individuals working, volunteering, or learning within the SHA. This could include staff, contractors, contracted individuals, Patient Family Partners, Knowledge Keepers, volunteers and learners. The specific team member groups required to follow a policy or procedure are listed in the header/title page of the document.

Volunteer: A person who provides services to individuals or groups within the SHA, with no financial gain.