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**Intimate Partner/Domestic Violence Policy**

**If you feel you are or have been a victim of intimate partner/domestic violence or if you have knowledge that someone else is or has been, please review this Policy, and refer to page 13 of this document for a list of resources.**

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## POLICY

The Hospital disapproves of violence against men and women in any form, whether as an act of Workplace Violence or in any staff member's personal life. The Hospital is committed to full compliance with all applicable laws governing intimate partner/domestic violence in the workplace. In particular, the *Occupational Health and Safety Act* requires employers to provide a safe and healthy workplace, and specifically to address the risks of domestic violence in our workplace.


Where the Hospital becomes aware that intimate partner/domestic violence creates a risk of workplace violence, then safety issues cannot be resolved by simply considering it to be a private matter for the staff member to resolve on his/her own. Each and every one of us has a responsibility to act if there is a staff member whom you suspect may be a victim-survivor. Intimate partner/domestic violence presents a danger to the victim-survivor and the workplace and will be treated as such.

## PURPOSE

The Hospital is committed to promoting the health and safety of our staff and to making a significant and continual difference in the recognition of intimate partner/domestic violence. To address these concerns, we are committed to heightening awareness and guiding staff and management in ways to address the occurrence of intimate partner/domestic violence and its impact in the workplace. The purposes of the Policy are to ensure safety of all staff at the Hospital, and provide protection from the potential for workplace violence as a result of intimate partner/domestic violence. The purposes of the Guidelines are to heighten the awareness of intimate partner/domestic violence and all forms of violence against men and women and to provide guidance for stakeholders in addressing these issues in the workplace.

## DEFINITIONS

- A. **Intimate Partner/Domestic Violence:** Is abuse committed against an intimate partner. It is the misuse of power with the intent of harming or controlling another person. Abuse can be physical, psychological, sexual, spiritual or financial.
- B. **Perpetrator:** The individual who commits an act of intimate partner/domestic violence.
- C. **Partner Assault Response Programs:** Programs perpetrators attend that are designed to eliminate violence in intimate relationships, stop other forms of abusive behavior and increase victim-survivor safety.
- D. **Victim-survivor:** The individual who is the subject of an act of intimate partner/domestic violence. The terms "victim" and "survivor" are both used, depending on the context. "Survivor", however, is preferred as it emphasizes an active, resourceful and creative response to the abuse.
- E. **The Workplace:** The workplace includes all on-site locations, including adjacent parking areas, extended Hospital property, and all remote locations where staff engage in Hospital business (including patient/client sites) and/or at Hospital-sanctioned social functions.
- F. **Sexual Assault/ Domestic Violence Treatment Centre (S.A./D.V.T.C.)** - The S.A./D.V.T.C. is located at the Metropolitan Campus, 4th Floor East. S.A./D.V.T.C. provides confidential medical treatment and psychological support to victim of sexual and/or domestic violence including such items as testing and treatment for victims of domestic violence, photographic documentation of injuries if the victim chooses, referral to appropriate community agencies including Hiatus House, and/or follow up by the Domestic Violence Nurse to help the victim with any problems or concerns.

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- G. **Staff:** For the purposes of this Policy, the term "staff" includes all employees, whether full-time, part-time, temporary, casual or otherwise, as well as all physicians, students, volunteers, contractors and consultants engaged to perform services for the Hospital. For clarity, although they may not be "employees" of the Hospital, all physicians granted privileges of any kind with the Hospital (including residents and any other physician groups in training) are considered "staff" for purposes of this Policy. All staff as defined are subject to and required to comply with this Policy.
- H. **Violence:** For the purposes of this Policy, the term "violence" means,
- the exercise of physical force by a person against another, that causes or could cause physical injury to the other person,
  - an attempt to exercise physical force against a person, that could cause physical injury to that person,
  - a statement or behaviour that it is reasonable for a person to interpret as a threat to exercise physical force against a person.

Violence may be committed physically, verbally, in writing, and in person or through the use of telephones, computers, faxes, email, regular mail, electronic communication devices or information systems or the Internet. This list is not intended to be all inclusive of any method that can be used to commit violence.

## PRINCIPLES OF THE HOSPITAL

Recognizing that intimate partner/domestic violence and other forms of violence are workplace issues that affect the safety, health, and productivity of all staff, the Hospital is joining employers across the nation to take a stand against workplace violence by committing to following principles that guide our **Creating a Safe Workplace** Program.

### *Creating a Safe Workplace*

Following Hospital policy HR-45 “ **Creating a Safe Workplace**”, the Hospital will strive to create a workplace environment that is safe from all forms of violence, including intimate partner/domestic violence, and to be an employer that supports victim-survivors of violence.

The Hospital will strive to assist victim-survivors and all other staff to understand intimate partner/domestic violence, how to access help and information, and to educate staff on the protections available to them.


The Hospital will take active measures to increase the safety of staff members who request assistance because they are victim-survivors of violence.

In all workplace responses to intimate partner/domestic violence, the Hospital will respect the authority and autonomy of the adult victim-survivor to direct her or his own life.

### *Creating a Nondiscriminatory Workplace*

The Hospital acknowledges and respects the rights of staff who are victim-survivors of intimate partner/domestic violence and other forms of violence to the same rights, opportunities and benefits as all other staff.

The Hospital is committed to nondiscrimination against victim-survivors of violence in all aspects of our operations. The Hospital will not discipline or terminate staff simply because they have been the victim-survivor of domestic violence. The Hospital will not retaliate against a staff member who reports circumstances raising a concern for safety from intimate partner/domestic violence.

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Where it is appropriate, the Hospital may provide referrals to available Partner Assault Response Programs to any staff member affected by intimate partner/domestic violence.

### *Creating an Informed and Productive Workforce*

The Hospital will provide education on intimate partner/domestic violence to all staff. The Hospital will make all personnel, benefits, and security policies responsive to the needs of staff who are victim-survivors of violence.

### *Creating a Socially Responsible Workplace*

As a member of local, provincial, and national communities, the Hospital believes in our responsibility to support community efforts to end intimate partner/domestic violence.

## **SCOPE**

This policy applies to all WRH employees, professional staff, affiliates, students, patients and visitors.

## **PROCESS**


### **RESPONDING TO VICTIM-SURVIVORS OF INTIMATE PARTNER/DOMESTIC VIOLENCE**

1. Recognizing the complexity of the issues surrounding intimate partner/domestic violence and that a victim-survivor of intimate partner/domestic violence may face threats of violence or death when he or she attempts to end a violent relationship, the Hospital will make every effort to provide a nonjudgmental and supportive environment for the staff member which is not dependent on the staff member's decisions regarding the relationship.
2. If a staff member is a victim-survivor of intimate partner/domestic violence or is aware of an intimate partner/domestic violence situation that is affecting the work environment, the staff member is encouraged to contact his/her Manager or Supervisor. It is the Policy of the Hospital to use early prevention strategies in order to avoid or minimize the occurrence and effects of intimate partner/domestic violence in the workplace. The Hospital is committed to assisting staff who are, or have been, the victim-survivors of intimate partner/domestic violence. This support may include, but is not limited to:
  - Confidential means for coming forward for help, as well as providing resources and internal and external referral information (including medical, counseling, or legal assistance);
  - Creating a workplace safety plan for the staff member as set out in Appendix A, in consultation with the Violence Response Team as described below, including, as appropriate, providing additional security at the workplace or work schedule adjustments; and/or
  - Discussing personal leave options.

Other appropriate assistance will be provided based on individual need.

3. The Hospital will attempt to maintain, publish, and post in locations of high visibility, a list of resources for victim-survivors and perpetrators of intimate partner/domestic violence, including but not limited to: the Employee Assistance Program (1-800-668-9920 (24 hours a day, 7 days a week), contact information for those unionized staff who have a women's advocate available as a resource, the phone number and description of local intimate partner/domestic violence resources including Windsor Regional Hospital's Sexual Assault /Domestic Violence Treatment Centre (S.A./D.V.T.C.) and a list of local Partner Assault Response Programs (see Appendix B for a list

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of community and internal resources). The Hospital will also have the resources listed in Appendix C, or equivalent resources, available. Through education the Hospital endeavors to create an environment where it is safe to talk about intimate partner/domestic violence and for staff who are victim-survivors to seek assistance.

- The Hospital encourages staff to support and volunteer for local intimate partner/domestic violence and sexual assault prevention and intervention programs.

## CONFIDENTIALITY

Inappropriate distribution of information may prevent effective planning or response, may impede civil or criminal actions against the perpetrator or may heighten the danger to the victim-survivor's and/or violate his or her right to privacy. In all responses to intimate partner/domestic violence, the Hospital will respect the confidentiality and autonomy of the reporting staff member, informing other staff or external agencies on a need to know basis only and to the extent necessary to protect safety and to comply with the law. However, in cases where the immediate safety of a victim-survivor or any other individual is endangered, the police will be contacted. Wherever practicable, advance notice will be given to the reporting staff member if the Hospital needs to inform others about the intimate partner/domestic violence situation.

The Hospital will maintain the confidentiality of the staff member's personal information, including his/her working hours, to the extent possible, and his/her personal contact information (including where he/she lives and his/her personal telephone number and personal email address). The Hospital will limit information about the staff member that is disclosed by telephone.

## LEAVE OPTIONS FOR STAFF MEMBERS WHO ARE EXPERIENCING THREATS OF VIOLENCE


At times, a staff member may need to be absent from work due to intimate partner/domestic violence. Staff, supervisors, and managers are encouraged to first explore whether options can be arranged that will help the staff member cope with an intimate partner/domestic violence situation without having to take a formal leave of absence. Depending on the circumstances, this may include arranging flexible work hours so the staff member can handle legal matters, court appearances, housing, and childcare.

The Hospital will consider whether it is appropriate to use available leaves such as sick, annual, shared leave, compensatory time, leave without pay or any other forms of paid or unpaid leave available in accordance with the Hospital's policies or the Collective Agreement (if applicable). The type of leave and duration of the leave shall be determined by the individual's situation, through collaboration with the staff member, supervisor/manager, human resources representative, and union representative (where the staff member is represented).

Where circumstances warrant, the Hospital may place a staff member on leave of absence, with or without pay.

## PROCEDURES FOR STAFF MEMBERS WITH PERFORMANCE ISSUES RELATED TO INTIMATE PARTNER/DOMESTIC VIOLENCE

- While the Hospital retains the right to discipline staff members for cause, the Hospital recognizes that victim-survivors of intimate partner/domestic violence may have performance or conduct problems such as chronic absenteeism or inability to concentrate as a result of the violence. When a staff member subject to discipline confides that the job performance or conduct problem is caused by intimate partner/domestic violence, a referral for appropriate assistance will be offered to the staff member. Staff members who are represented by a union are encouraged to refer to their respective Collective Agreement for any relevant terms.

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## DISCIPLINARY PROCEDURES FOR STAFF MEMBERS WHO COMMIT ACTS OF INTIMATE VIOLENCE/DOMESTIC VIOLENCE

The Hospital will not tolerate nor excuse conduct that constitutes workplace intimate partner/domestic violence, whether against staff members or any other individuals in the workplace. Staff members who commit acts of workplace intimate partner/domestic violence will be subject to some or all of the following actions as appropriate (referred to herein as "Corrective Action"):

- Remove the perpetrator from the workplace, through the use of security or the police if necessary;
- Prohibit the perpetrator from attending at any Hospital workplace in the future, either for a certain period of time or indefinitely;
- Report the conduct of the perpetrator to the police;
- In addition to the above, where the perpetrator is a Hospital staff member:
  - require the perpetrator to attend counselling or training;
  - require that the perpetrator seek help at the Employee Assistance Program or attend and successfully complete an approved Partner Assault Response Program;
  - take disciplinary action, up to and including a demotion, transfer, change in reporting relationships, change in location or hours of work, suspension (paid or unpaid) or termination; and/or
- Take any other action appropriate in the circumstances, including making continued employment contingent upon not committing any other acts of intimate partner/domestic violence and obeying all conditions of any Court Order, whether criminal or civil.

The Hospital will maintain the perpetrator's confidentiality to the extent feasible.

This Policy applies not only to acts of intimate partner/domestic violence in the workplace, but may also apply to acts outside of the workplace. Staff members found to have committed acts of intimate partner/domestic violence outside of the workplace may be subject to Corrective Action as appropriate, depending on the circumstances, if such act affects the work performance of the staff member, affects the reputation of the Hospital or affects the normal operation of the Hospital.

The Hospital may investigate allegations of intimate partner/domestic violence where a staff member is named as a perpetrator in a civil, administrative or criminal proceeding, or if there is reason to believe that a staff member has committed intimate partner/domestic violence at the workplace or against another staff member, even if no legal action has taken place.

Upon completion of the investigation, whether the staff member has been convicted criminally or found liable civilly, the Hospital will take Corrective Action appropriate in the circumstances.

## STAFF ROLES: RESPONDING TO WORKPLACE INTIMATE PARTNER/DOMESTIC VIOLENCE

It is important that all staff know how to respond to the effects of intimate partner/domestic violence in the workplace. All staff are required to review, be familiar with, and abide by this Policy, and participate in intimate partner/domestic violence training as provided by the Hospital.


In addition, the following clarifies roles for certain staff:

### *Managers /Supervisors/Medical Leaders:*

Managers/Supervisors/Medical Leaders ("Leaders") are expected to:

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1. Be alert to possible signs of abuse, including physical or behavioral changes in staff, chronic absenteeism, inappropriate/excessive clothing, obsession with time, repeated physical injuries, chronic health problems (e.g. chronic pain), isolation, emotional distress, depression, distraction, and excessive number of personal phone calls.
2. Be responsive when a staff member who is either the victim-survivor or the perpetrator of intimate partner/domestic violence asks for help, recognizing that the Leader's role is not to diagnose or counsel the staff member, but to offer the staff member appropriate resources.
3. Immediately contact Human Resources, Supervisor, Legal Affairs, Security, S.A., and/or D.V.T.C. for assistance in dealing with any intimate partner/domestic violence issues.
4. Be respectful of staff members' personal choices, even if the Leader disagrees with the decisions she/he is making regarding the relationship. If the Leader observes the signs of violence, it is appropriate to convey concern regarding signs and to educate the staff member regarding resources available, recognizing that a victim-survivor of intimate partner/domestic violence may make numerous attempts to leave before she/he is finally able to leave the Perpetrator. It is critical that the Leader respect the staff member's privacy and not pressure the staff member to disclose any personal information. Unless the staff member tells the Leader about the abuse, a Leader should not make direct inquiries about known or suspected abuse.
5. Refer the situation and employee to any of the areas noted in 3 above to engage the appropriate Violence Response Team be coordinated to develop a personal workplace safety plan (See Appendix A) to minimize the risk of violence to the victim-survivor, other staff and patients, and make reasonable accommodation to implement that plan, recognizing that the Hospital cannot guarantee the victim-survivor's safety.
6. Where deemed appropriate, work with the victim-survivor, Human Resources and union representatives (if applicable) to grant leave, adjust work schedules, or attempt to find continued work for him/her, if possible.
7. Comply with all court orders. If both the victim/survivor and the perpetrator in a court order are staff at the Hospital and the order does not require the perpetrator to stay away from the worksite, Leaders must work with Human Resources, the staff members' Union Representative(s) (if applicable), the Employee Health Nurse, Medical Leader, and/or Security to ensure that if necessary, the perpetrator is relocated to a workspace to ensure compliance with the court order. If violations of the court orders are observed, document these violations and call the police and/or security. Instruct the victim/survivor to keep a copy of the court order with him/her at all times.
8. Maintain communication with the staff member during any leave of absence granted due to domestic violence.
9. Maintain the confidentiality of intimate partner/domestic violence circumstances and any other referrals under this Policy.
10. Properly document, in writing, any report of intimate partner/domestic violence, including the circumstances of the violence, any and all offers of assistance made to the staff member, and any decision by the staff member to refuse assistance.
11. In the event of a violation of this Policy, after consultation with Human Resources, take any appropriate Corrective Action as set out in this Policy.

***Human Resource Professionals:***

1. Human Resource Professionals are expected to:

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2. Maintain a list of services available to victim-survivors and perpetrators of intimate partner/domestic violence. This list will include: Employee Assistance Program, local domestic violence shelters, Partner Assault Response Programs available to perpetrators, information on how to obtain court orders of protection and criminal justice options, and any other available community resources. See Appendix B for a list of community and internal resources currently available. Be a resource to all staff for the intake of intimate partner/domestic violence situations and appropriate escalation and referral to the Violence Response Team for handling.
3. Work with the victim-survivor, Leader, Security staff, union representatives (if applicable), the Employee Health Office, law enforcement, and community intimate partner/domestic violence programs, if necessary, to develop a personal workplace safety plan (See Appendix A) to minimize the risk of violence to the victim-survivor, other staff and patients.
4. Where deemed appropriate, work with Leaders and union representatives if applicable) to grant leave, adjust work schedules, or attempt to find continued work for staff who are victim-survivors of intimate partner/domestic violence, if possible.
5. Maintain the confidentiality of intimate partner/domestic violence circumstances and any other referrals under this Policy,
6. In the event of a violation of this Policy, advise Leaders respecting appropriate Corrective Action as set out in this Policy, involving Legal Affairs if considered appropriate.

#### *Employee Health & Safety Professionals:*


1. In addition to the expectations listed at b) above and in consideration of the unique role of the Employee Health team, Employee Health & Safety Professionals are also expected to:
  - Screen for domestic violence all staff seen for injury, chronic health problems, somatic complaints, mental health problems or substance abuse. Screen in a confidential setting. Document that screening for domestic violence was conducted.

#### *Security:*

Security is expected to:

1. Participate in intimate partner/domestic violence training and other training designed to teach security personnel to react, assess, document and respond to workplace violence as made available by the Hospital from time to time.
2. Provide consultation and reasonable assistance to staff experiencing intimate partner/domestic violence;
3. Document violations of any court order and each report of intimate partner/domestic violence, regardless of who makes that report. Take all information seriously regardless of the source, and evaluate it based on the facts available.
4. Maintain the confidentiality of intimate partner/domestic violence circumstances and any other referrals under this Policy.
5. Respond and intervene, as needed, to calls concerning safety in the workplace.
6. Accept transferred harassing telephone calls from a perpetrator, and document the calls.
7. Work closely with appropriate law enforcement agencies to ensure workplace safety.
8. Keep a copy of any court orders provided by the staff member to Security in a confidential file. Access to orders and information contained in them will be limited and on a need to know basis.
9. Provide escorts to parked cars and priority parking near the building entrance for staff who fear violence at the workplace, or who have escorts required as part of a documented personal workplace safety plan.
10. Work with victim-survivors, Human Resources, Employee Health Office, union representatives (if applicable), law enforcement, Legal Affairs and community intimate partner/domestic violence programs if necessary, to assist in developing a personal workplace safety plan (Appendix A) to minimize the risk to the victim-survivor and others in the workplace.



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11. Ensure that Human Resources and Legal Affairs/Risk Management are aware of any reports of intimate partner/domestic violence, breaches of court orders relating to domestic violence, or any other actions or reports taken by Security Services in respect of intimate partner/domestic violence issues.

### *Violence Response Team*

A **Violence Response Team** may be created in the event that the Hospital becomes aware of an intimate partner/domestic violence issue that poses a risk to health and safety in the workplace. The Violence Response Team is charged with the responsibility of managing all reports of circumstances that raise a concern for staff safety from intimate partner/domestic violence and assisting the victim-survivor in developing a personal workplace safety plan.

The team will include representatives from departments with a role to play in workplace intimate partner/domestic violence prevention and intervention, namely a representative from:

1. Staff member's Managerial/Supervisory team;
2. S.A.T.C.;
3. Legal Affairs/Risk Management
4. Human Resources;
5. Security
6. Union Representative (if applicable)

The Team's primary role is to assist the victim-survivor in developing a personal workplace safety plan and then to ensure that measures are in place to support this plan in order to provide appropriate protection to the victim-survivor and all others in the work environment.


The Behavioral Sciences Section — Threat Assessment Unit of the Ontario Provincial Police (OPP) provides professional risk assessors. The OPP can be contacted at any time by the team where it is deemed appropriate to prevent violence, or for a professional risk assessment of situations causing concern in the workplace. Where the victim-survivor is a staff member, such contact will be done in consultation with the victim-survivor unless the consensus of the Violence Response Team is that doing so would itself create a risk of violence. The Behavioral Sciences Section — Threat Assessment Unit is located in Orillia, Ontario and the phone number is 1-888-310-1122.

This section is not meant to preclude any individual from contacting the police at any time on his/her own initiative if concerned about potential violence or other criminal behaviour.

### *Options for Staff Members who are Victim-Survivors of Intimate Partner/Domestic Violence:*

If you are a victim-survivor of intimate partner/domestic violence, you are encouraged to take some or all of the following steps:

1. Call the local police if in immediate danger to officially document the occurrence of intimate partner/domestic violence.
2. Talk with a trusted co-worker, supervisor, union representative (if applicable) or supervisor/manager about the situation.
3. Engage your supervisor so that a personal workplace safety plan (see Appendix A) can be developed to assist with keeping you and our workplace safe. Save threatening e-mail or voice mail messages. These can potentially be used for future legal action, or can serve as evidence that an existing court order was violated.
4. Make your supervisor aware that no personal information should be disclosed about you, except on a "need to know" basis. Also, leave an emergency contact number with your supervisor if one is available.


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	<b>Author:</b> Denice Shuker Manager, Legal Affairs/ Risk Manager/ Chief Privacy Officer (CPO)	<b>Authorized By:</b> Monica Staley, Regional VP, Cancer Service, Renal, Patient Relations & Legal Affairs	<b>Effective Date:08/01/2008</b> <b>Next Review Date:</b> 10/01/2016 <b>Revision/Creation Date:</b> <b>09/25/2015</b>

5. Work with your supervisor, Human Resources, Security, Employee Assistance Program, Occupational Health Nurse/MD or union representative (if applicable) to develop a personal workplace safety plan (See Appendix A).
6. Notify your supervisor of any need to be absent and discuss options. You should be clear about your plan to return to work and maintain communication with your supervisor during your absence.
7. Give a recent photograph of the perpetrator and a copy of any court orders to your supervisor, Security and the police department, so that the Hospital can identify the perpetrator should he/she appear in the workplace. Keep a copy of any court orders with you at all times. If you are seeking a restraining order/peace bond, WRH must be included in the restraining order/peace bond.

***Options for Staff Members who are at risk of becoming or have been Perpetrators of Intimate Partner/Domestic Violence:***

If you believe that you are at risk of becoming or have been a perpetrator of intimate partner/domestic violence, there is assistance available to you. You are encouraged to:

1. Contact the Employee Assistance Program for confidential consultation and resources. The Employee Assistance Program will not provide any information to the Hospital about the fact you called or the content of your discussion.
2. Contact, enroll in and complete a Partner Assault Response Program (see Appendix B).

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## APPENDIX A – PERSONAL WORKPLACE SAFETY PLANS

### Developing a Personal Workplace Safety Plan:

If a staff member is at risk for workplace violence due to intimate partner/domestic violence, the Hospital will assist in developing a personal workplace safety plan for that staff member, irrespective of whether the domestic violence has occurred at the workplace or away from the workplace. The purpose of this Plan is to minimize the risk of violence to the victim-survivor, other staff and patients at the workplace.


There may be many individuals involved in developing the Plan, including the Violence Response Team, the victim-survivor, Human Resources, union representatives, Security, law enforcement, and community domestic violence programs. Once the Plan is developed, the Hospital will make reasonable accommodation to implement the Plan.

When assisting a staff member to develop the Plan, the staff member should consider and discuss what changes, if any, could be made at his/her workplace to make him/her feel safer, recognizing that victim-survivors of intimate partner/domestic violence know the perpetrators better than anyone else. The staff member should have substantial involvement in the development of the Plan and what goes into the final Plan, recognizing that the Hospital is responsible for the staff member’s safety while at work. If it is determined that others in the workplace are at risk, the Hospital is required to take measures to provide protection for them, even if the victim-survivor objects to such measures.

### Components of a Workplace Safety Plan:

The following are some elements that should be considered for inclusion in the Plan if it would assist in ensuring the staff member’s safety, recognizing that some of the following may not be appropriate, required or feasible in any particular case (this list is not meant to exclude consideration of other elements that may be included in specific circumstances):

1. A change to and/or unpredictable rotations of the staff member’s work schedule or work assignment.
2. Relocate the staff member to an alternate worksite.
3. Incorporate the terms of any court order in place. Ensure that the police and Security have a copy of the order if there is a concern that the perpetrator might come to the work site.
4. Review the safety of parking/transportation arrangements, including consideration of: the sufficiency of the lighting, the need for security escorts to/from the staff member’s car/public transportation, and the need for priority parking near the building entrance and/or obtaining special parking access.
5. Include specific co-workers and/or supervisors in the Plan, with a request that they call the police if the perpetrator attends at work, threatens or harasses the staff member at work or violates any court order.
6. Provide a picture of the perpetrator to reception areas, nurses’ stations and/or security.
7. Identify an emergency contact person in the event the Hospital is unable to contact the staff member.
8. Screen the staff member’s telephone calls at work.


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9. Request additional or alternate security measures at the work site, such as posting security near the work station, installing security cameras or silent alarms at the work location, relocating the work station to a more secured area, or providing the staff member with a cellular phone for emergency use at work.

The Plan should be reviewed regularly, and updated the event of any changes in circumstances, particularly any changes to the terms of any court order.

Where a staff member has a safety plan initiated it is the expectation of the Hospital that the staff person will maintain regular contact with the Violence Response Team and provide updates as required and immediately notify the Violence Response team where developments arise that necessitate the plan being amended/updated.

The Violence Response Team will periodically review safety plans to assess whether amendments need to be made and/or whether the plan can be closed. Where a plan is “closed” notification to all stakeholders will be provided.

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## APPENDIX B

The Internal Resources noted below will notify and activate the Violence Response Team VRT (Security, Human Resources, Legal Affairs/Risk Management, Staff, Manager/Supervisor, and Union Representative (if applicable)).

### Internal Resources

1. Human Resources
2. Employee Health Nurse
3. Security
4. Union Representatives – including those bargaining units that have a women’s advocate available as a resource (Unifor)
5. Manager/Supervisor
6. S.A./D.V.T.C.

### External Resources

1. Hiatus House — 519-252-7781 [www.hiatushouse.com](http://www.hiatushouse.com)
2. Fresh Start Program for Batterers (operating from Hiatus House) — 519-252-7781 [www.hiatushouse.com](http://www.hiatushouse.com)
3. Windsor Essex County Health Unit — 519-258-2146, extension 1350 [www.wehealthunit.org](http://www.wehealthunit.org)
4. Sexual Assault/Domestic Violence Treatment Centre — 519-255-2234 [www.satc@wth.on.ca](mailto:satc@wth.on.ca)
5. Victim Services of Windsor/Essex — 519-723-2711 [www.vswec.ca](http://www.vswec.ca)
6. Employee Assistance Program — Family Services Employee Assistance Programs (FSEAP) 1-800-668-9920 (see Human Resource Intranet Site for additional information)
7. Windsor Essex County Children’s Aid Society – 519-252-1171
8. Windsor Police Services – Special Services Branch – 519-255-6700, ext. 4308 [www.police.windsor.on.ca](http://www.police.windsor.on.ca)
9. Emergency Services – 911
10. Neighbors, Friends and Families Program – 519-471-6590 [www.neighborsfriendsandfamilies.on.ca](http://www.neighborsfriendsandfamilies.on.ca)
11. Assaulted Women’s Hotline – 1-866-863-0577 [www.awhl.org](http://www.awhl.org)
12. Hotel-Dieu Grace Healthcare – Community Crisis Centre 510-973-4438