



Employee Handbook



INTRODUCTION

The Peterborough Family Health Team (PFHT) works collectively with our five Family Health Organizations (FHOs) and includes over 85 family physicians and over 100 allied health professionals such as nurse practitioners, mental health clinicians, registered dietitians, pharmacists, registered nurses, registered practical nurses, a physician assistant and clerical staff, working collaboratively to provide comprehensive primary care across Peterborough City and County in Ontario, Canada.

The Peterborough Family Health Team is dedicated to expanding access to primary care in our community. Since their creation, the Peterborough Family Health Team has enrolled over 25,000 new patients and provides care to over 109,000 patients

Our Mission, Vision and Values are the cornerstone upon which employee relations are founded. Upon that foundation, the Handbook for Employees of PFHT outlines Human Resources (HR) policies, employee benefits, administrative processes and employee/employer responsibilities.

Every attempt has been made to reflect a supportive and positive employment experience for everyone. PFHT is committed to continue benchmarking with our FHT comparators and the local healthcare community to ensure we remain an employer of choice.

PFHT believes that increased employee engagement in the broader strategic directions of the organization contributes to improved care for patients and a greater degree of job satisfaction for employees. Employee input and feedback is welcomed.

It is important that all employees of PFHT familiarize themselves with the contents of the handbook. It is also important to recognize that our structure creates complexities not normally experienced in the workplace. Health professionals working in the practices have collaborative relationships with the administrative staff, nurses, and physicians – yet many of these colleagues are not employees of PFHT. Every attempt has been made to recognize this reality in a manner that supports a positive employment experience.

Our structure makes communication difficult and demands a concerted effort on everyone's part. Every PFHT employee is given a FHT email address, access to the Internet and access to the FHT Intranet site. All PFHT activities, announcements and events are communicated using these tools. In addition, each discipline has established protocols for regular meetings and communications. All PFHT employees are required to check their email on a regular basis and make use of these various communication vehicles in order to meet their obligation to the goal of effective communications.

MISSION

As a provincial health care leader and community partner, the Peterborough Family Health Team coordinates and empowers family practice-centred multidisciplinary teams to provide high quality, evidence-based, primary care to meet the needs of all residents of Peterborough County.

Core Values

The organization's core values reflect what is truly important to its people. These are not values that change from time to time, situation-to-situation or person-to-person, but rather they are the underpinning of the FHT's organizational culture and approach to the design and delivery of primary care in our community.

High-Quality Patient-Centred Care

We are committed to high-quality patient-centred care and seek to ensure that every patient's experience is respectful, without prejudice and built on confidence and trust. We believe that patient well-being is a shared responsibility between primary care providers and patients.

Universality

The health and well-being of *all* residents in our region motivates everything we do.

Trust

We build trust with, and among our employees, health professionals, partners, and patients by listening, respecting diverse opinions, valuing their unique contributions, and delivering on our commitments.

Collaboration

We believe that a multi-disciplinary approach to patient care - with our team members and partners - leads to better patient outcomes and a more positive experience for patients and professionals alike.

Innovation

We seek opportunities to advance best practice in our programs, services, and processes. We value professional development and learning as driver of quality.

Transparency & Accountability

We act fairly, ethically, and openly in all that we do.

Guiding Principles

Five guiding principles reflect our values and shape our actions:

1 – Relationships: We focus on building strong relationships to support everything we do – on our teams, with our partners and with our patients. We believe that the relationship between primary care providers and patients is the foundation of high-quality patient-centred care.

2– The patient experience: We believe that the patient experience is influenced by the sum of all of their interactions with primary care. We engage our patients, seeking to understand their experience to improve the delivery of primary care.

3 – Inclusive, Community Focus: We collaborate and partner with others to leverage our collective strength to provide seamless care to all residents of our community.

4 – Strong Leadership: We focus on effective, forward-thinking leadership in the governance and administration of our organization.

5 – Responsible Stewardship: We are responsible and accountable for the financial resources allocated to us and for the trust our residents place in us.

OUR VISION

A leader in the delivery of collaborative family medicine serving the residents of Peterborough County.

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Recruitment and Hiring

PFHT is committed to recruitment practices that are fair and transparent. Responsibility for recruitment and selection of PFHT employees rests with the Human Resource Coordinator or designate and the appropriate FHT/FHO Team Coordinator. Selection will be based on a competitive process that includes screening, interviewing, testing (if appropriate) and checking references and credentials. It is the responsibility of the Human Resource Coordinator or designate to ensure the objectivity of any competition panel of interviewers. Where a candidate is related to a member of the panel, that member must be removed from any interview or selection process affecting the outcome of the competition.

Once hired, no employee shall report directly to a relative. It is incumbent on the Human Resource Coordinator or designate to identify such relationships and ensure appropriate reporting relationships. The same policy shall generally apply to students employed by PFHT, recognizing the need for greater flexibility with regard to student opportunities.

All employees must successfully complete their assessment period.

Applications from existing employees will be considered on an individual basis. If approved to apply, the existing employee will be required to apply and interview for the position. Where applicable, successful candidates are required to provide evidence of good standing in the appropriate regulatory body for their profession, and a *Vulnerable Sector Screening* police record search.

Temporary employees are entitled to the same as permanent employees (with the exception of Health & Dental and LTD & Life Benefits).

i) Criminal Records Search

Employees of PFHT who work directly with patients are required to provide a Vulnerable Sector Screening search obtained from a police service before starting employment with PFHT. Conditional offers of employment may be approved by the Human Resource Coordinator or designate where required; however, no employee shall see patients alone until this documentation is provided.

Employees whose job duties allow them spending authority and/or financial accountability is also required to provide a criminal record search.

Documents dated within the preceding six (6) months will be accepted. The cost of this is to be borne by the employee.

A criminal record does not necessarily preclude employment with PFHT. The final decision on such a matter will be made by the Human Resource Coordinator or designate and the Executive Director, in consultation with the FHT/FHO Team

Coordinator. In all cases the candidate's/employee's confidentiality will be maintained. The criminal record search will be retained on the employee's Human Resources file in a sealed envelope.

ii) Full Time Equivalent

Regular hours of work for a full-time employee are 7.5 paid hours per day, which includes a 30 minute paid lunch, for a 37.5 hour paid work week. The following chart shows regular hours for employees.

Full Time Equivalent (FTE)	Regular hours of work per week
0.1	3.75
0.2	7.5
0.3	11.25
0.4	15
0.5	18.75
0.6	22.5
0.7	26.25
0.8	30
0.9	33.75
1.0	37.5

iii) Assessment Period

As you begin your job with PFHT, we will do everything we can to get you off to a good start and to acquaint you with the advantages and the opportunities that you will enjoy as a Team Member with PFHT.

The first nine (9) months are considered an assessment period for all new staff.

During this period, you and PFHT will have an opportunity to get to know one another. We will engage in various assessment processes to evaluate your performance. The assessment processes are designed to identify any areas requiring improvement or any training gaps, and to discuss any feedback received to date.

Termination during the assessment period will be in accordance the minimum provisions of the Ontario *Employment Standards Act, 2000* or your contract of employment, whichever provides you with the greater entitlements.

Departures and Retirements

i) Resignation

If you intend to resign, you are requested to do so in writing to the Human Resource Coordinator or designate. Minimum notice of two (2) weeks for administrative staff and four (4) weeks for management and professional staff is requested. In order to best ensure patient continuity, PFHT encourages longer notice periods where possible.

Any outstanding vacation, eligible statutory holiday pay and lieu time will be included in the final pay cheque. There is no payout value for unused Training & Development, Personal Days, or Sick Time. Similarly, vacation time taken but not yet earned will be recovered accordingly.

iii) Deemed Terminated

PFHT may consider you to have terminated your employment under any of the following circumstances:

- a) You are absent from scheduled work for a period of three (3) or more consecutively scheduled working days without notifying your respective Family Health Team of such absence.
- b) You fail to return to work upon termination of an authorized leave of absence without being granted an extension.
- c) You utilize a leave of absence for purposes other than that for which leave was granted. (E.g. leave requested to provide care to ill family member actually used to “try out” another job.)

iv) Retirement

PFHT does not have a mandatory retirement policy. Employees who plan to retire are asked to provide as much notice as possible, at a minimum respecting the resignation notice requirements, noted in Section i) above

Hours of Work and Compensation

i) Hours of Work

Employee hours of work will be specified in the employment contract as well as the master schedule in the IMS. Schedules, starting times, hours, etc. may be modified as needed to accommodate the needs of the professional and the individual Family Practice, keeping the needs of the patients at the forefront. PFHT must be notified of such change to ensure the IMS system remains accurate.

During scheduled work hours in a family practice in which a patient fails to keep an appointment, professional staff will undertake necessary paperwork, professional development activities, PFHT committee or project work. Employees may elect to exercise their flexibility and take this time off.

All hours of work and time taken are required to be logged in the Information Management System (IMS) by the last day of the two week pay period.

As the recording of time is done on an honour system, regular audits will be completed, or done when concerns/complaints are received. If unaccounted variances are discovered, the Human Resource Coordinator or designate will meet with the employee involved to seek clarification which may result in discipline up to and including termination depending upon the magnitude of the unaccounted variances.

Flextime

Employees are encouraged to maintain a regular work schedule that meets the needs of patients. When necessary to maintain work/life balance and/or patient access, and if acceptable to the requirements of the PFHT location, employees may flex their regular schedule. For example, an employee may require a day off during the second week of the pay period. The employee may adjust the hours worked during the other days of the pay period so that their total hours worked in that pay period equals their required hours worked. Flex time must be recorded in the Information Management System (IMS) and a **must never exceed 37.5 hours pro-rated to your FTE**. All flex time must be expended prior to the issuance of a ROE as well as by the end of each calendar year.

Hours may also be flexed to reflect the regular operating hours of the practice. For example the office is closed Wednesday afternoons; the employee may adjust their daily hours on other days and take Wednesday afternoon off.

The ability to utilize flextime may be suspended on an individual basis should the privilege of flextime be deemed to be abused.

ii) Absence

If you are going to be absent from work, you are required to notify your office, giving as much notice as possible. Employees who work in primary care settings should notify the appropriate person at their work location and ensure a plan is in place for notifying patients. All PFHT employees are required to record their attendance in the Information Management system.

iii) Compensation

Employees of PFHT are paid in accordance with the MOHLTC approved salary ranges. PFHT has a bi-weekly payroll system with direct deposit. Payday is on alternate Thursdays for payment up to the previous Friday. Details regarding your hours worked MUST be logged in the IMS prior to processing of the payroll, or payment will not be received until the following pay period. Changes to your banking information should be provided to Human Resources at least one week in advance of the next pay date. It is good practice to ensure you receive a pay in a new account before closing the old one.

iv) Personnel Records

It is important that your personnel record contain accurate information. It is your responsibility to notify PFHT promptly if there is any change in your family status, name, telephone number, address, bank information or educational achievements. Employees have a right to review their personnel file. Requests to do so should be forwarded to the Human Resource Coordinator or designate in writing and access will be given within ten days. Personnel files will not be removed from the administrative office.

Benefits

i) Mandatory Benefits

Legislation requires employee participation in the following benefits: CPP, and EI and EHT. Employee contributions to CPP and EI are deducted from your bi-weekly pay. Your pay stub will also reflect mandatory income tax deductions in accordance with Canada Revenue Agency guidelines and your direction.

HOOPP Pension Plan

PFHT is a registered employer with the Healthcare of Ontario Pension Plan. All full time employees must join HOOPP and begin making contributions as of the date of hire. Exceptions include employees currently receiving a HOOPP pension or employees who were employed prior to the start date in the Plan (April 2014) and waived their right to join HOOPP. Employees that have previously waived participation can join the plan at any subsequent date.

For part-time employees (and other non-full-time employees) Enrolment in HOOPP is optional on the first day they start work at PFHT. Enrolment is not mandatory for part-time employees, it is up to the employee to decide if they want to join HOOPP or not. Part-time employees who do not enroll immediately may join HOOPP on any subsequent date.

Part-time employees include part-time, contract, temporary, casual and all other employees not classified as full-time by their employer. It is mandatory for the employer to offer HOOPP to their part-time and non-full time staff.

ii) Discretionary Benefits

Each employee is given an in lieu of benefit allowance, this amount varies dependent upon participation in HOOPP and is based upon each individual's gross salary. This allowance can be used towards the Group RSP Program, purchase of Health and Dental benefits, as well as Long Term disability coverage (must work more than 20 hours per week to qualify). Any monies not used from the benefit allowance will be paid to the employee so they may purchase their own benefits. The specifics of your in lieu benefit will be discussed and detailed in your individual employment contract.

Each employee will also be provided with an annual (January 1 – December 31) "Cafeteria Style" expense budget of \$2000 pro-rated per FTE and date of hire. Upon submission of receipts to the Human Resource Coordinator or designate the following items will qualify for reimbursement:

- Cell phone – if required for business purposes – maximum of \$600 annually
- Home internet – maximum of \$600 annually
- Education, including course and conference registration

- Travel (either gas reimbursement or mileage), accommodation and meal expense for education events
- Membership fees
- Additional Liability Coverage
- Resource books
- Additional computer and telephone equipment required to fulfill duties

Travel & Parking

Employees who are required by PFHT to use a privately owned vehicle to travel to a location other than their assigned site(s) to perform job functions are reimbursed for mileage at a rate of \$0.52 per kilometer. Travel that is not required by PFHT will require prior approval and can be reimbursed through the discretionary benefit allowance.

Mileage must be calculated so that the employee is not reimbursed for mileage that would normally be required to get from home to the office or from the office to home. Travel between the office and an alternate location is eligible to be reimbursed.

Parking expenses incurred in the course of performing job functions are reimbursed, providing a receipt is submitted. This is considered a taxable benefit.

When traveling for FHT business, the least expensive mode of transportation is to be taken, or if the employee chooses a more expensive form of transportation, only the lesser cost will be reimbursed.

iii) Extended Health Care/Dental Benefits – Long Term Disability Coverage

PFHT has a group benefit plan with the Chambers of Commerce which is optional for those employees who work more than 20 hours per week. Those employees who have spousal coverage can opt out of the Extended Health and Dental and choose the Long Term Disability coverage only. The specific details of the plan are attached as Appendix A. As the plan is 100% employee funded, the employee will be responsible to provide postdated cheques to cover their benefit premiums for the duration of any unpaid absence. If you qualify and choose not to participate you will be required to sign a waiver of benefits. If enrolled you are responsible for the premium of payments during an unpaid absence.

iv) HOOPP Pension Plan

PFHT is a registered HOOPP Employer. The HOOPP pension is a defined benefit pension. This means when a member retires, you are paid a set pension amount every month for your lifetime. This amount is based on a formula that takes into account the member's length of service and the best five consecutive years of annualized earnings. PFHT contributes \$1.26 for every \$1 contributed by you. . If enrolled, you have the option of maintaining your premium during an approved leave and the employer is required to contribute their share.

v) Group RSP

A group RSP plan is available that is 100% employee funded and is completely customized by the employee. This includes selection of the investment of your choice as well as how much to invest. Employees can register for the group RSP at anytime and RSP contributions are remitted as part of the payroll process. The benefit of this is at source tax savings as your gross income is reduced by the amount of your investment and therefore the required tax payable is lessened. The amount of the RSP contribution can be changed at anytime by providing the request in writing to the Human Resource Coordinator or designate prior to the processing of the biweekly payroll.

v) Statutory Holidays

The Peterborough Family Health Team recognizes the following holidays (maximum 82.5 hours):

New Year's Day	January 1st
Family Day	3rd Monday in February
Good Friday	Friday prior to Easter Sunday
Victoria Day	May 24th or Monday preceding May 24th
Canada Day	July 1st
Civic Holiday	1st Monday in August
Labour Day	1st Monday in September
Thanksgiving Day	2nd Monday in October
Christmas Day	December 25th
Boxing Day	December 26th
One (1) "floating day"	Used at employees discretion

PFHT will also recognize any other day proclaimed a holiday by the Government of Canada or Ontario.

a) Employees of PFHT are not permitted nor required to work on recognized holidays.

b) Full Time Employees

When the statutory holiday falls on a regular work day, the employee will be given the day off with pay. When the statutory holiday falls on a date the office is closed; i.e., Saturday or Sunday, or during the employees vacation, the employee can designate another day for the holiday. Annual entitlement must not exceed 82.5 hours or 11 days x 7.5)

d) Employees Working .5 FTE to .9 FTE

When a statutory holiday falls on a regular working day, the part time employee will receive the day off with full pay. When a statutory holiday falls on a non working day the part time employee will be entitled to time off (versus payment)

prorated to their FTE to be taken at an alternate time. Annual entitlement must not exceed 11 days x 7.5 x FTE)

e) Employees Working less than .5 FTE

Employees who work less than .5 FTE will receive an additional 4.23% in lieu of benefits for each hour worked to compensate for statutory holiday pay.

vi) Sick Days

Employees who work a .5 FTE or higher are permitted up to five (5) paid sick days per calendar year (37.5 hours), pro-rated to FTE and can only be applied on days scheduled to work. Sick days can be carried over to the next year, but do not have a cash value upon termination. An employee may be required to provide a note from their medical practitioner following an absence of three days. If there is a cost incurred for the note, the employer will reimburse the employee upon verification. Sick time must be recorded in the IMS.

vii) Personal Days

Employees who work a .5 FTE or higher are entitled up to seven (7) days per year (52.5 hours), pro-rated to FTE, are provided to be used for personal reasons; e.g., for religious holidays or personal/family commitments or sickness where no sick days remain, as well as compassionate time not covered. Personal days can be carried over to the next year, to a maximum of six (6) weeks but do not have a cash value upon termination. Personal days must be recorded in the IMS.

viii) Vacation

Vacation entitlement is earned in accordance with years of continuous service with the Peterborough Family Health Team. Upon hire, employees may be placed at a higher level depending upon previous related experience as well as difficulty recruiting for the position and will require Executive Director approval. Those who commence at a higher step than Step 1 will increase from their initial placement according to the table below.

In the calendar year in which you are hired, your vacation is pro-rated from your start date to December 31st, and then pro-rated to your FTE. Subsequent movement to the next step will occur annually on the anniversary of your hire date until you reach Step 8.

Step 1	Year 1	2 weeks (or 10 days, 75 hours, or 4%) prorated to FTE
Step 2	Year 2	2 weeks + 3 days (or 13 days, 97.5 hours, or 5%) prorated to FTE
Step 3	Year 3	3 weeks (or 15 days, 112.5 hours, or 6%) prorated to FTE
Step 4	Year 4	4 weeks (or 20 days, 150 hours, or 8%) prorated to FTE
Step 5	Year 5	4 weeks + 2 days (or 22 days, 165 hours, or 8.5%) prorated to FTE
Step 6	Year 6	4 weeks +3 days(or 23 days, 172.50 hours or 8.8%) prorated to FTE
Step 7	Year 7	4 weeks + 4 days (or 24 days ,180 hours or 9.2%) prorated to FTE
Step 8	Year 8	5 weeks (or 25 days, 187.5 hours or 10%) prorated to FTE

Vacation must be used by December 31st. A maximum of one week, pro-rated to FTE (5 days/37.5 hours) may be carried forward to use in the next calendar year. In

exceptional circumstances an employee may request in writing to the Human Resource Coordinator or designate permission to carry over additional unused vacation entitlement. Such requests will be based on PFHT operational requirements.

Vacation must be scheduled according to the policies of the practices. Those AHP's that are not integrated with a practice must work in conjunction with their co-workers, when possible to ensure coverage for emergency referrals. To ensure that Peterborough Family Health Team is able to be accountable for our services, access and operating capacity, any vacation request longer than three (3) consecutive weeks must be submitted in writing to the Human Resources Coordinator for approval at least thirty (30) days prior to taking holidays. Vacation requests for longer than three (3) weeks will be considered on an exception basis only. The deciding factor will be our ability to meet our patient needs.

Employees who work less than .5 FTE receive their vacation pay as a percentage of pay and is payable with each hour worked and are only entitled to take the number of scheduled days off as the vacation percentage entitles

Vacation time must be recorded in the IMS.

ix) Training & Development Hours

As part of Peterborough Family Health Team's commitment to ongoing learning, NP's, RD's MHC's, Physician Assistants and Pharmacists who work a .5 or higher FTE are eligible for up to 10 days (pro-rated to FTE) per calendar year (75 hours) for training and development. Training & development time must be logged in the IMS. For those that work less than .5 FTE, requests will be reviewed on an individual basis

PFHT will provide professional development opportunities to administrative staff, Registered Nurses and Registered Practical Nurses as well. The frequency, nature and duration of such activities will be looked at on an individual basis and will be subject to the approval of the Human Resource Coordinator. Employees are encouraged to bring their ideas forward

x) Christmas/New Years

The majority of family practice offices close for additional days during the period between Christmas and New Year's day. Two additional paid days (15 hours) pro-rated to FTE (must be a .5 FTE or greater to qualify) will be given annually to be used during this time period.

If the practice does not close, the two days may be scheduled during the period of December 23rd – December 31st in collaboration with the practice/office environment. Any additional time taken during this period can utilize available vacation or lieu time.

xi) Recognition of Service

As part of Peterborough Family Health Team recognition of employee's commitment to the organization, employees who have five (5) or more years of service and are a .5FTE or greater will receive 7.5 hours to celebrate your birthday off with pay. This extra time MUST be scheduled within four weeks, before or after the date that the birthday falls.

Leaves and Other Work Absences

i) Leaves of Absence

You may make a written request for a leave of absence, without pay, stating your reasons for such leave to the Human Resource Coordinator or designate. The impact of the leave on the affected practice(s) and/or PFHT will be taken into account when considering your request. When applying for leave, you must indicate the proposed date of departure and return. The request should be submitted a minimum of two (2) months prior to the intended start date. The final decision on any leave of absence will rest with the Executive Director.

Any leaves of absence will be subject to the following:

- a) Service-related benefits (e.g. vacation, personal leave) will not be interrupted if the leave is for less than one (1) month. In special circumstances, this may be extended with approval of the Executive Director.
- b) If the leave is in excess of one (1) month, there will be no accumulation of vacation credits during the period of the leave.
- c) In the case of maternity, adoption and parental leaves of absences, all benefits will continue to accumulate, provided the employee pays their contribution toward such benefits.
- d) You will not be paid for recognized holidays falling within the period of the leave of absence.
- e) The employee will be responsible to provide postdated cheques to cover their benefit premiums for the duration of the absence
- f) All time banks will be pro-rated accordingly
- g) Absences beyond an approved period of time may be considered as termination of employment.

Pregnancy Leave

- a) Pregnancy leave will be granted to female employees in accordance with the provisions of the *Employment Standards Act*.
- b) You must give written notification at least two weeks in advance of the date of commencement of such leave.
- c) You must confirm your intention to return to work four (4) weeks in advance thereof. You will be reinstated to your former position unless the position has been discontinued in which case a job comparable in both salary and responsibility will be offered. Please note that reinstatement to your former position does not necessarily mean returning to the same practice or location.
- d) The employee will be responsible to provide postdated cheques to cover their benefit premiums for the duration of the absence.
- e) All time banks will be pro-rated accordingly

Parental/Adoption Leave

- a) A parent is defined as “a person with whom a child is placed for adoption and/or a person who is in a relationship of some permanence with a parent of a child who intends to treat the child as his/her own”.
- b) If you have become a parent, and have been employed for at least thirteen (13) weeks immediately preceding becoming a parent, you are entitled to parental leave.
- c) Parental leave must begin no later than fifty-two (52) weeks after the day the child comes into the custody of the parent for the first time.
- d) The parental leave of a female employee who takes pregnancy leave must begin when the pregnancy leave ends unless the child has not yet come into the custody of the parent for the first time. If the parental leave is being taken by a female employee who has also taken a maternity leave, parental leave can be granted for a maximum of thirty-five (35) weeks. If the parental leave is being taken by an employee who has not taken a maternity leave, parental leave can be granted for a maximum of thirty seven (37) weeks.
- e) The employee will be responsible to provide postdated cheques to cover their benefit premiums for the duration of the absence
- f) All time banks will be pro-rated accordingly

Medical Leave

Should an employee be required to take a medical leave for personal illness or personal injury and is approved by Revenue Canada for Sick Leave, PFHT will provide supplemental benefits to the employee.

The following criteria must be met to be eligible for SUB Benefits:

- 1. The SUB Plan is available to all employees who have successfully completed their probationary period.
- 2. The plan will supplement EI benefits for periods of unemployment caused by personal illness or injury.
- 3. Verification that the employee has applied and is in receipt of EI benefits will be made prior to the SUB payment.
- 4. The SUB is payable at 95% of the employee’s normal weekly earnings while the employee is serving the two-week EI waiting period.
- 5. The bi-weekly SUB payment, plus the gross amount of EI benefit from this employment will not exceed 95% of the employee’s normal weekly earnings.
- 6. All time banks will be pro-rated accordingly

Compassionate Leave

Compassionate leave will be granted for the purpose of mourning the death of a member of the employee’s family (consisting of spouse, common-law spouse, children, mother, father, grandparents, siblings, in-laws). The employee may request compassionate leave and shall be granted up to a maximum of three (3) consecutive calendar days, without loss of pay. These days of leave will normally be confined to the

period from the date of death up to and including the date of the funeral. In some circumstances, an employee may wish to use of Personal Leave Days to supplement their compassionate leave. PFHT understands that not all employees may be ready to return to work after 3 days of mourning, especially for those whose position heavily involves dealing with others struggles. In these instances the employee is encouraged to contact the Human Resources Coordinator to explore what options may be available at that time.

Pay for compassionate leave shall be based on time lost from regularly scheduled hours that would otherwise have been worked. Compassionate leave is not granted when an employee is on another leave of absence, sick, on vacation.

Compassionate leave of absence for other relatives and other circumstances will be considered on a case-by-case basis.

Jury Duty

If you are required to serve on a jury on days you are scheduled to work, you will be paid the difference between your basic salary and the jury duty fee paid by the court. To receive this payment, you must ensure that Peterborough Family Health Team receives a letter from the Court stating the days that you were required to attend.

Court Service

If, on days you were scheduled to work, you are called in for court service (not jury duty) under summons or subpoena to act as a witness, you will be paid the difference between your basic salary and the fee paid by the court. To receive this payment, you must ensure that PFHT receives a letter from the court stating the days that you were required to attend. No allowance of pay will be made to you if you are summoned to court as a result of an alleged infraction of the law on your part.

Voting on Election Day

If your schedule interferes with your ability to vote in a federal, provincial or municipal election, as specified by legislation, appropriate time off, without loss of pay, will be provided.

Family Medical Leave

An employee may take an unpaid leave of up to 8 weeks (in a 26 week period) to provide care or support for a family member or other person who considers the employee to be like a family member when a qualified medical practitioner has issued a certificate indicating that the family member or other person has a serious medical condition with a significant risk of death occurring within a period of 26 weeks. Employees may be eligible for Employment Insurance benefits during this unpaid leave. All rights and benefits will continue while on Family Medical Leave.

Job Sharing

Job sharing is defined as the voluntary sharing of a permanent position in a structured manner and involves the permanent employee and a term employee who works the remainder of hours not covered by the permanent employee. A job sharing arrangement allows permanent full-time employees to work less than full time hours in their positions while maintaining permanent status. PFHT supports work-life balance for employees and will enable flexibility in work hours for eligible employees where operationally feasible. Only the permanent full-time incumbent of a position can initiate a request to establish a job share arrangement to reduce the hours of work. Approval of the job share request resides with PFHT and will be looked at on an individual basis.

ii) Unexpected Office Closures

On occasions where the worksite is closed unexpectedly; for example, due to severe weather, employees will be compensated for their regularly scheduled hours for that day. In all circumstances personal safety is the first priority.

For scheduled practice closures; for example, over the Christmas season, employees may schedule vacation, personal leave days, or make other arrangements to make up the hours.

Employee Wellness

i) Safety

PFHT is committed to a culture of safety where everyone shares the goal of making our workplace(s) safe and healthy. Such matters are governed by the OHSA and its regulations.

We all share the responsibility for occupational health and safety. The concept of an internal responsibility system is based on the principle that the workplace parties themselves are in the best position to identify health and safety problems and to develop solutions.

All employees are required to familiarize themselves with the Occupational Health and Safety Policies of their worksite and to work in a safe and responsible manner. No employee should engage in activities they believe to be dangerous to themselves or others. Such concerns should immediately be brought to the attention of the Human Resource Coordinator or designate.

Employees are particularly encouraged to familiarize themselves with the Health and Safety Policy on Violence in the Workplace as well as the Harassment Policy and Program. These policies are found in Appendix B and Appendix C respectively.

The Peterborough Family Health Team is committed to a work environment free of discrimination, harassment, abuse, violence or bullying of any kind. PFHT will not tolerate any form of physical, sexual, emotional, verbal, psychological abuse. Recent changes to the Occupational Health and Safety Act mandate that employers have a policy on Workplace Violence. It is absolutely critical that any incident of violence be reported immediately and documented as soon as possible following the incident.

These policies apply to all employees of PFHT and extend to all professional relationships, including employee/patient relationships, while the employee is representing the Peterborough Family Health Team.

ii) Accidents

If you have an accident or sustain an injury during normal working hours or while on Peterborough Family Health Team business, you must report it to the Human Resource Coordinator or designate immediately. Health professionals working in the practices will first report any accident to the appropriate staff person at their work location.

iii) Illness

The Peterborough Family Health Team promotes healthy lifestyle, illness prevention and chronic disease management among its employees. Employees may be required to provide medical documentation when illness results in frequent or prolonged absences, or requires health-related workplace accommodations.

Problematic Substance Use/Addictions

PFHT supports the recovery of employees with problematic substance use or addictions issues. There will be no penalty for seeking diagnosis and treatment for alcoholism, drug use, or any other addiction. An employee whose job performance is negatively impacted by problematic substance use or addiction may be required to seek treatment in order to continue employment or return to employment following a medical leave. Refusal to accept, or failure to follow a recommended medical treatment plan will be addressed as it affects work performance.

Chronic Disorders

PFHT recognizes that chronic disorders of a physical, mental, or emotional nature can have a debilitating effect on an employee's ability to do their job. An employee, whose job performance is negatively impacted by a chronic disorder, may be required to seek treatment in order to continue employment or return to employment following a medical leave. Refusal to accept, or failure to follow a recommended medical treatment plan will be addressed as it affects work performance.

Employees with physical, mental or emotional disabilities have the right to request workplace accommodation under the Ontario Human Rights Code. Workplace accommodation is a cooperative process and may require detailed medical documentation. Requests for workplace accommodation should be discussed with, and subsequently submitted in writing to the Human Resource Coordinator or designate. PFHT will endeavour to support individuals in their recovery process through appropriate workplace accommodations.

A Functional Abilities Form completed by the treating physician will be required for any employee returning to work from an extended leave due to any absence related to their physical and/or mental health. This is to ensure all employees returning to work are able and ready to do so in a way that does not impede their health or the services we provide.

Policies and Responsibilities

i) **Privacy/Confidentiality/Conflict of Interest**

Employees of PFHT are required to work with confidential data related to financial matters, family practices, employees and patients. It is essential that each employee hold all information in strictest confidence, whether such information is obtained directly or indirectly. Employees of PFHT are governed by the Personal Health Information Protection Act (2004) and must ensure their familiarity with and compliance with the regulations and requirements of that legislation. Registered health professionals are also governed by their professional colleges. All employees are required to sign the Privacy policies upon hire. Breaches of confidentiality will not be tolerated and could result in loss of employment with PFHT. FHO's may have their own Privacy, Confidentiality and/or Conflict of Interest policy, and if does, it is deemed to supersede the above.

ii) **Professional Standing/Liability Coverage**

If applicable, employees of the Peterborough Family Health Team are required to submit to the Human Resource Coordinator or designate confirmation of registration with the appropriate professional college/association on an annual basis. Liability coverage will be provided by PFHT. Employees may be required by their professional body to carry additional insurance and if this is the case, the cost will be borne by the employee. A copy will be kept in the employee's Human Resources file.

iii) **Information Technology**

Information technology is an essential tool in any efficient and effective workplace. PFHT encourages maximum utilization of technology to support patient care, communications and business processes.

All automated equipment provided to employees remains the property of the Peterborough Family Health Team and/or the primary care practice and is to be used as required for business purposes. PFHT recognizes that automated equipment may, from time to time, be used for non-business purposes. Employees are required to ensure that any non-business usage be conducted with respect for the employer and coworkers. Such use shall be restricted to breaks and lunch periods. Employees are reminded that the PFHT/Practice has the authority to inspect any communications conducted on PFHT/Practice equipment and no records or activity should be considered confidential.

Misuse of automated equipment includes but is not restricted to:

- distribution of inappropriate material
- viewing of pornography or sexually suggestive materials
- internet purchases

- excessive time spent on internet searches or non-business related sites, social networking sites, chat rooms, etc.
- unauthorized or excessive telephone usage

Staff using equipment belonging to the Peterborough Family Health Team; for example, laptop computers, cell phones, audiovisual equipment, etc. are reminded of their responsibility to ensure security precautions are in place, properly maintain such equipment; follow the appropriate procedures for obtaining, using and returning it; and immediately report any loss or damage.

Employees using PFHT cell phones may be responsible for non business related charges. Employees are expected to use care and judgment to avoid excessive roaming charges in isolated areas or out of country.

Teams may have their own Information Technology and or Security policy, and if does, it is deemed to supersede the above.

iv) Performance Management

Performance reviews provide a formal opportunity to communicate feedback regarding performance and corporate expectations. Performance reviews also provide employees a formal opportunity to discuss their successes through the year, and to communicate their desires around future career goals and objectives.

The PFHT philosophy of collaborative care and the emphasis that PFHT has on team work supports the utilization of a multiple input rating process as a comprehensive method of assessing our employees' performance and ongoing professional development needs. For a full explanation of the 360 Degree Review and Development process please see Appendix F.

v) Resolution of Concerns

It is expected that day-to-day problems or issues will be resolved at your practice site. The FHT/FHO Team Coordinator at each site is the local support for problem solving at the site. Where resolution cannot occur within your practice site, the Director of Clinical Programs and the Human Resource Coordinator or designate and/or the Executive Director may be required to assist in coming to a resolution. Please see Appendix G for our full *Resolution of Concerns procedure*.

vi) Discipline

The Peterborough Family Health Team reserves the right to discipline or discharge employees in accordance with good management practice. PFHT adheres to the principles of progressive discipline. Depending on the severity, consequence and frequency of a disciplinary matter, the following process will be followed.

1. verbal warning

2. written reprimand
3. suspension or termination

In extreme circumstances, the first and second steps may be waived. Examples of unacceptable behaviour include, but are not limited to: theft, insubordination, dishonesty, intoxication, falsification of records including the IMS, improper conduct, disclosure of confidential information about the Family Health Team, its staff or its patients, repeated absenteeism or lateness and consistently being unavailable for work.

vii) Absence from Practice

The work of the PFHT demands that employees work to achieve the broad objectives of primary care reform. This necessarily involves participation in learning opportunities and engagement in the strategic priorities set out by the Board of Directors.

Employees are expected to attend PFHT meetings for purposes of information sharing and updates on organizational matters. This may include participation in planning or advisory committees related to such matters as Human Resources policies or Occupational Health and Safety. Opportunities to participate in meetings and activities help to build individual and team strengths and support the HR values of collaboration and professionalism and respect.

Where it is reasonable to do so, PFHT will facilitate participation via internet, conference calling or other electronic means to reduce the need for travel time. Absences from the practice will normally be planned well in advance and cause minimum disruption.

Where an employee's attendance at the practice is considered to be problematic and efforts to resolve the issue at the practice level have been unsuccessful, the Human Resource Coordinator or designate may need to intervene. The structure of the PFHT demands good communication and joint problem solving strategies. In some instances the Resolution of Concerns Policy may be helpful.

viii) Scent Free Workplace

Medical evidence clearly shows that scented products are harmful to the health of sensitive individuals. Due to health concerns' arising from exposure to scented products PFHT acknowledges its responsibility in providing a healthy environment for its employees, service providers, patients and guests

The use of scented products will not be allowed within our facilities at any time. In order to achieve this facility becoming a Scent Free Workplace the following items must be considered and refrained from use, this list is not exhaustive and may be changed accordingly:

- Perfume
- Cologne
- Air fresheners
- Candles
- Pot-pourri
- Scented body lotions
- Highly scented flowers
- Highly scented hair products

APPENDIX A

CHAMBER BENEFIT SUMMARY

EMPLOYEE LIFE INSURANCE (Option: 1X)

One Times Annual Earnings

Note: Life benefit capped at \$25,000 (additional insurance can be purchased)

ACCIDENTAL DEATH & DISMEMBERMENT (Option: 1X)

One Times Annual Earnings

Note: AD&D benefit capped at \$25,000

LONG TERM DISABILITY (Option: L3)

Benefits from the 121st day of disability up to age 65. "Disability" means employees are unable to perform all regular duties of their own job during the first 24 months, then unable to perform any gainful job they could become qualified to do.

DEPENDENTS LIFE INSURANCE

Spouse: \$10,000 Each Child: \$5,000

EXTENDED HEALTH (Option: E84)

70% coverage of prescription drugs listed on the ASSURE National Formulary,

50% coverage of prescription drugs NOT listed on the ASSURE National Formulary

100% coverage of all other eligible benefits

Prescription drug benefits are paid using the ASSURE drug card system and have a \$50,000 / person /calendar year maximum.

DENTAL (Option: D8)

\$25 / \$50 calendar year deductible

80% coverage of Basic services

80% coverage of Endodontic and Periodontal procedures

Benefit Maximum of \$1,500 per person per calendar year

A more detailed benefit booklet is available upon request. The EHC and Dental rates are set rates based upon single or family coverage and the LTD/Life rates fluctuate based upon age and income.

APPENDIX B

Policy: Violence in the Workplace

Approved by: Board of Directors

Date Approved: June 15, 2010

Date Revised:

A. INTRODUCTION

The Peterborough d Family Health Team is committed to building and preserving a safe working environment. Actions of violence in the workplace will not be tolerated against the Team's workers.

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

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

B. SCOPE OF VIOLENCE POLICY AND PROGRAM

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

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

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

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

C. DEFINITIONS

Workplace Violence

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

Violence can be classified into four categories:

- The perpetrator who has no relationship to the workplace, i.e., burglary by stranger
- The perpetrator who is a patient or visitor or other third party affiliated with the Family Health Team who becomes violent towards a worker
- The perpetrator who is a current or former worker or other individual performing work at the workplace
- The perpetrator who has an intimate relationship with a worker e.g., domestic violence.

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

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

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

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

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

Workplace

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

Examples of possible "workplaces" for the Family Health Team's workers:

- Multi-site office environment
- Family Health Team-sponsored conference or training site
- Worker-accompanied patient transport
- Patient residences or community settings

Management/Physician

Managers/Physicians who control or direct the business of their practice and/or the Family Health Team

Supervisor

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

Complainant

The worker who reports a violent or potentially violent incident

Respondent

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

D. ROLES AND RESPONSIBILITIES

Supervisors and Management

The Family Health Team supervisors and management must ensure, as much as reasonably practical, that workers are not subjected to violence in the workplace.

Management/supervisors will take corrective action with anyone under their direction who subjects workers to violence.

Supervisors and management will ensure all workers are aware of the risks of violence in the workplace. Management/supervisors will ensure that workers are properly trained and equipped to protect themselves.

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

Workers

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

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

- comply with this Violence Policy and Program and refrain from any acts of violence
- work together in a professional manner and resolve issues in a non-violent manner.

Workers are to bring issues to their physician supervisor, if they cannot be mutually resolved

- Report to their immediate supervisor or Human Resources any incidents of violence or potential risk of violence they may experience or witness. This includes issues in the worker's non-work life that may impact on the worker's or other workers' safety, such as domestic violence
- Attend training and information sessions provided by the Family Health Team to reduce violence or risks of violence
- Co-operate with police, Family Health Team investigators or other authorities as required during any investigation related to violence.

The Officer in Charge of the Violence Prevention Program will

- ensure that the procedures in the Violence Policy and Program are implemented
- review all reports submitted regarding workplace violence and other incident reports as appropriate pertaining to incidents of workplace violence that result in personal injury or threat of personal injury, property damage, or police involvement and make recommendations for corrective measures to minimize recurrence of incidents
- in conjunction with the Health and Safety Representative (“H/S Rep.”) or workers (where the H/S Rep does not exist), respond to concerns related to workplace violence and communicate these to management/physician
- review violence policies and procedures annually to ensure that this Violence Policy and Program and procedures are current and relevant
- conduct a workplace violence risk reassessment as necessary and provide recommendations to management/physician to reduce or eliminate the risk of violence.

E. WORKERS’ RIGHT TO REFUSE UNSAFE WORK

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

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

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

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

F. REPORTING PROCEDURES

1. In situations where the violent act or threatened violent act is serious, workers should call 911 immediately. In sites where panic buttons are installed they should be used.
2. Workers **must** report all threats and attempted or actual violence, to their immediate supervisor/physician or to the FHT/FHO Team Coordinator (Officer in Charge of Prevention Program).

3. The supervisor/physician or FHT/FHO Team Coordinator will take immediate action to resolve any situation that involves violent behaviour and to ensure the safety of workers.
4. The supervisor/physician or FHT/FHO Team Coordinator will ensure the Complainant and any other workers receive first aid or medical aid as required.
5. If the Respondent is a patient, the supervisor or FHT/FHO Team Coordinator will notify the patient's attending physician.
6. The Complainant must complete the Violent Incident Reporting Form which records important details of the incident including the date and time of the incident, the nature of the violence, and names of people who may have witnessed the incident.
7. If the Complainant refuses to complete or sign the Violent Incident Reporting Form, the supervisor/physician or FHT/FHO Team Coordinator will complete the form to the best of their ability.
8. The failure of the Complainant to complete the Violent Incident Report Form will not preclude the Family Health Team from investigating or dealing with the alleged violent incident; however, it may restrict the Family Health Team's range of possible actions in this regard. Due diligence is required.
9. The supervisor/physician or FHT/FHO Team Coordinator will report all incidents of violence (including situations where there is a reasonable expectation that the threat may become violent) to the Human Resources Manager as soon as possible.
10. Incidents that constitute criminal acts will be referred to the local police department or other appropriate policing agency.

G. Notification of Workers at Risk

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

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

Incident Reporting Requirements

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

- The FHT/FHO Team Coordinator
- a Director from the Ministry of Labour **if an inspector from the Ministry requires notification.**

INVESTIGATING VIOLENT INCIDENTS

1. Physician/FHT/FHO Team Coordinator and or Human Resources will appoint an internal or external person to investigate all reported incidents of actual or threatened violence.
2. The Complainant and the Respondent will be advised of the investigation.
3. The investigation will be conducted in a fair, efficient and prompt manner. The exact conduct of the investigation will depend on the nature and seriousness of the allegation. Management/physician has the discretion to determine the appropriate investigation procedures in the circumstances. Generally, the investigation will consist of the following:
 - a. Interviews will be conducted of the Complainant, the Respondent, and any witnesses.
 - b. The investigation will involve:
 - obtaining all pertinent information from the Complainant
 - informing the Respondent of the details of the complaint, and getting her or his response
 - interviewing any witnesses
 - deciding whether, on a balance of probabilities, the violent incident or threat of violence did take place
 - recommending appropriate remedies, penalties, or other actions.
4. The Complainant and the Respondent may be separated during an investigation, if necessary and if reasonably possible.
5. If the Respondent is a patient, the investigation will also focus on the possible cause of the abusive behaviour and the level of responsibility of the abusive patient, including the patient's cognitive ability to understand his/her actions.
6. All documents related to a complaint or incident of workplace violence, including the written complaint, witness statements, investigation notes and reports, and documents related to the complaint, will be maintained by the investigator separate from personnel files.
7. The investigator shall determine whether there is:

- a. Sufficient evidence to substantiate that workplace violence has occurred and/or that this Violence Policy and Program was contravened; or
 - b. Insufficient evidence to substantiate that the workplace violence has occurred and/or that this Violence Policy and Program was contravened
8. The investigator will complete a Violent Incident Follow Up Form.
 9. All Violent Incident Reports and Violent Incident Follow Up Forms will be sent to the Officer in Charge of the Violence Prevention Program for review. Certain information may be withheld to protect the confidentiality of workers and other parties, as deemed appropriate by management/physician.
 10. The Officer will review current procedures, and any recommendations to revise the Violence Prevention Program will be forwarded to Human Resources.

G. CORRECTIVE ACTION AND DISCIPLINE

Corrective Action where the Respondent is a Worker

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

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

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

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

Corrective Action where the Respondent is a Patient

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

- requiring that the patient be accompanied by family member when visiting the workplace
- issuing verbal or written warnings

- imposing conditions which the patient must agree to abide by to continue receiving care
- contacting the police
- discharging the patient
- issuing a trespass warning letter or trespass order

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

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

- must be documented
- must describe all precautions to be taken by caregivers and recorded in the Care Plan
- must include all medications reviewed by the physician as the patient's condition changes
- must be evaluated for effectiveness on a predetermined periodic basis; those evaluations must be reflected in ongoing documentation
- will include appropriate educational programs, materials and resources for workers to provide help in problem solving and assistance in caring for the abusive patient
- must be revised as needed
- must be red-flagged

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

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

Personnel Files (where Respondent is a Worker)

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

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

Complaints made in Bad Faith

This Violence Policy and Program must never be used to bring fraudulent or malicious complaints against workers or other parties. In the rare event that a complaint is made in bad faith – in other words, the person making it had absolutely no basis and deliberately and maliciously filed the complaint – that person will be subject to the

same remedies as set out above, and a record of the incident will be put in his or her file, if applicable.

I. TARGET ASSISTANCE

Workers who have been the target of violence will be:

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

J. CONFIDENTIALITY

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

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

- necessary to protect the Family Health Team's workers
- necessary to investigate the complaint
- required to take corrective action
- necessary to improve the Family Health Team's Violence Prevention Program
- required by law.

K. ASSURANCE AGAINST RETALIATION

This Violence Policy and Program encourages workers to freely express any concerns about violence or potential violence in the workplace. Complainants must not be penalized nor subjected to any prejudicial treatment as a result of making a complaint in good faith. Witnesses must not be subjected to any negative repercussions as a result of participating in an investigation. Any retaliation by the Respondent or anyone acting on behalf of the Respondent against the Complainant or any witnesses is strictly prohibited and will result in appropriate disciplinary action.

L. TARGET'S LEGAL RIGHTS

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

M. RECORD KEEPING

The documents corresponding to the investigation will be kept on file in a secured location by the FHT/FHO Team Coordinator, for a period of seven years from the date of the incident.

N. ANNUAL REPORTING

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

O. VIOLENCE POLICY AND PROGRAM REVIEW

The Violence Policy and Program will be reviewed as often as necessary, but at least on an annual basis, by the FHT/FHO Team Coordinator.

SCHEDULE A
THE WORK REFUSAL PROCESS

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

APPENDIX C
Violent Incident Reporting Form

Complainant Information	
Name	Job Title
Site/Location	Team
Date of Incident	
Type of incident	<input type="checkbox"/> Physical <input type="checkbox"/> Verbal <input type="checkbox"/> Other
Assailant Information	
<input type="checkbox"/> Worker <input type="checkbox"/> Patient <input type="checkbox"/> Visitor <input type="checkbox"/> Delivery Person	
<input type="checkbox"/> Ex-employee <input type="checkbox"/> Other (please specify)	
Age:	Weight: Height:
Other distinguishing marks: Please fill out the attached Suspect and vehicle identification sheet if assailant is unknown	
Vehicle Description (if any)	
Description of incident. Give a thorough description of the incident (what happened, where it occurred, what led up to the incident, who else was present and what action was taken at the time):	
Location of Incident:	

Weapons or tools used:	
Has the assailant been involved in any previous incidents with workers? If yes, please provide details.	
Did any working conditions contribute to the incident?	
Name of witnesses and relationship to workplace or Complainant (i.e., co-worker, visitor, Complainant's spouse, etc.)	
Investigation conducted? Yes <input type="checkbox"/> No <input type="checkbox"/>	Reported to Physician/FHT/FHO Team Coordinator? Yes <input type="checkbox"/> No <input type="checkbox"/>
Name of Investigators involved:	Name of Physician/FHT/FHO Team Coordinator:

Please provide any other information you think is relevant:

Signature of Person Completing Report

Name of Person Completing Report

Date

APPENDIX D

Policy: Harassment Policy & Program

Approved by: Board of Directors

Date Approved: June 15, 2010

Date Revised:

A. INTRODUCTION

It is the policy of the Family Health Team (the “FHT”) to build and preserve a positive working environment for all its workers.

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

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

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

B. SCOPE OF HARASSMENT POLICY AND PROGRAM

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

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

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

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

C. DEFINITIONS

Workplace Harassment

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

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

The definition includes, but is not limited to:

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

Harassment includes Sexual Harassment, such as:

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

Harassment **does not** include:

- reasonable action or conduct by an employer, co-ordinator or supervisor that is part of the normal job function even if there are unpleasant consequences for the worker, e.g.,
- changes in work assignments or scheduling
- job assessment and evaluation
- workplace inspections
- implementation of dress codes
- disciplinary action
- differences of opinion or minor disagreements between co-workers
- consensual banter or relationships

- two or more workers bantering back and forth is not harassment if everyone involved is in agreement. But if any worker feels uncomfortable with this behaviour, and the behaviour continues even after that person has expressed their discomfort, or if the other worker(s) involved should have known the person was uncomfortable, then the behaviour does constitute harassment.
- Workers flirting with each other, or becoming involved in a romantic or sexual relationship, as long as the relationship is consensual. If one of the workers changes her or his mind, and the other person persists in trying to continue the relationship, this is harassment.

Workplace

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

Examples of possible “workplaces” for the FHT’s workers:

- Multi-site office environment
- FHT-sponsored conference or training site
- Patient residences or community settings

Management/Physician/Coordinators

Management/Coordinators and/or Physician who control or direct the business of the FHT

Supervisor

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

Complainant

The worker who reports harassment

Respondent

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

D. ROLES AND RESPONSIBILITIES

Supervisors and Management/Coordinators

The FHT supervisors and management/coordinators and/or physicians must ensure, as much as reasonably practical, that no workers are subjected to harassment in the workplace.

Management/coordinators and/or physician will take corrective action with anyone under their direction who subjects workers to harassment.

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

Workers

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

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

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

E. REPORTING PROCEDURES

Speak Up

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

Informal Complaint

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

Formal Complaints

If the informal route for resolving a harassing situation does not succeed or is not appropriate, the FHT supports its workers in filing a formal complaint on the FHT's Harassment Reporting Form. If the Respondent is a patient, the primary physician should also be contacted.

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

F. INVESTIGATING INCIDENTS OF HARASSMENT

The Manager/FHT/FHO Team Coordinator and/or Human Resources will appoint an internal or external person to investigate all reported incidents of harassment.

The Complainant and the Respondent will be advised of the investigation.

The investigation will be conducted in a fair, efficient and prompt manner. The exact conduct of the investigation will depend on the nature and seriousness of the allegations. Management and/or Physician has the discretion to determine the appropriate investigation procedures. Generally, the investigation will consist of the following:

- a. Interviews will be conducted of the Complainant, the Respondent, and any witnesses.
- b. The investigation will involve:
 - getting all pertinent information from the Complainant
 - informing the Respondent of the details of the complaint, and getting her or his response
 - interviewing any witnesses
 - deciding whether, on a balance of probabilities, harassment did take place
 - recommending appropriate remedies, penalties, or other action.

The Manager/FHT/FHO Team Coordinator and/or Human Resources may separate the Complainant and the Respondent during an investigation, if necessary and if reasonably possible.

If the Respondent is a patient, the investigation will also focus on the possible cause of the abusive behaviour and the level of responsibility of the abusive patient, including the patient's cognitive ability to understand his/her actions.

All documents related to a complaint or incident of workplace harassment, including the written complaint, witness statements, investigation notes and reports, and documents related to the Complainant, will be maintained by the investigator separate from personnel files.

The investigator shall determine whether there is:

- a. Sufficient evidence to substantiate that workplace harassment has occurred and/or that this Harassment Policy and Program was contravened; or
- b. Insufficient evidence to substantiate that the workplace harassment has occurred and/or that this Harassment Policy and Program was contravened.

The investigator will complete a Harassment Follow Up Form.

G. CORRECTIVE ACTION AND DISCIPLINE

Corrective Action where the Respondent is a Worker

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

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

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

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

Corrective action where Respondent is a patient

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

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

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

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

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

Personnel Files (where Respondent is a Worker)

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

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

Complaints made in Bad Faith

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

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

H. CONFIDENTIALITY

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

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

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

I. ASSURANCE AGAINST RETALIATION

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

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

J. TARGET'S LEGAL RIGHTS

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

K. RECORD KEEPING

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

L. HARASSMENT POLICY AND PROGRAM REVIEW

This Harassment Policy and Program will be reviewed as often as necessary, but at least on an annual basis by the FHT/FHO Team Coordinator and Lead Physicians.

APPENDIX E
CONFIDENTIALITY AND CONFLICT OF INTEREST AGREEMENT

TO: Peterborough Family Health Team (“PFHT” or “Employer”)

I, the undersigned employee, in consideration of my employment with PFHT, and of the compensation paid in respect of my employment, agree as follows:

1. Confidentiality

I acknowledge that confidential information about PFHT, the business associates, Patients, suppliers, or employees should not be divulged to anyone other than persons who are authorized to receive such information. No disclosure under any circumstances other than in the normal course of business should be made without first asking appropriate management personnel. This basic policy of caution and discretion in handling of confidential information extends to both external and internal disclosure.

I acknowledge that confidential information obtained as a result of employment with PFHT is not to be used for the purpose of furthering any private interest, or as a means of making personal gains. Use or disclosure of such information can result in civil or criminal penalties, both for the individuals involved and for PFHT.

I agree that, in the course of any job within PFHT, I may become aware of personal and confidential information. In particular, I may obtain information about Patients’ financial and other sensitive information. It is imperative that I take all measures appropriate to ensure the confidentiality of Patients’ private and confidential information and records, including ensuring that all Patients’ records and information is appropriately safeguarded from any unauthorized access or disclosure, including compliance with any applicable privacy legislation.

I acknowledge that breach of confidentiality regarding any information or records relating to PFHT Patients may result in immediate termination of employment for cause. PFHT depends on the maturity and loyalty of each employee to keep private any such information.

I acknowledge that, confidential information includes, but is not limited to, the following examples:

- The names of Patients, suppliers or independent contractors or prospective Patients,
- Any information, including but not limited to medical and financial information relating to our Patients,
- Compensation data,

- Financial information,
- Marketing strategies,
- Pending projects and proposals,
- Proprietary production processes,
- Personnel/Payroll records, and
- Confidential conversations between any persons associated with PFHT.

2. Conflict of Interest

I acknowledge that PFHT employees are expected to be independent in respect of their actions, decisions and judgments respecting all PFHT business practices. In this regard, I acknowledge that I am expected not to have any relationships, activities, or personal financial interests that might possibly impair or affect my judgment or influence my decisions concerning PFHT business.

I acknowledge that due to the nature of the services provided by PFHT, PFHT Patients frequently form personal relationships with employees. It is of the utmost importance that I act diligently to ensure that the Patients' interests are protected at all times. Even the appearance that a Patient has been taken advantage of can be disastrous to both the Employer and the employee.

I agree that, during the term of my employment, for the protection of PFHT, the employees and the Patients, I am required to adhere to the directives set out herein.

I acknowledge that this Agreement is not limited to the relationships between Patients and employees. It also encompasses relationships with other entities such as suppliers, funders etc.

I agree that, during the term of my employment, I am expected to act in a mature and responsible way at all times and to use common sense and good judgment. To avoid any possible confusion, some examples of obvious unacceptable conduct are, but are not limited to, those forms of conduct as noted below.

- Engaging in any business or transaction or have a financial or other personal interest which is incompatible with the discharge of my official duties;
- Placing myself in a position to derive any direct or indirect benefit or interest from any Employer contacts where I can influence decisions;
- Engaging in any outside employment, work or business undertaking that interferes with the performance of my duties as a PFHT employee;
- Engaging in any outside employment, work or business undertaking in which I have an advantage derived from my employment with PFHT;
- Demanding, accepting, offering, or agreeing to accept from a person who has dealings with PFHT, a direct or indirect commission, reward, advantage or benefit

- of any kind, whether to be received by me, by a member of my family, or by a third party whom I wish to benefit;
- Benefiting or causing friends or relatives to benefit from the use of information acquired during the course of my official duties and which is not generally available to the public;
 - Using or permitting the use of PFHT property for any kind for personal convenience or profit or for any activities not associated with the discharge of my official duties;
 - Disclosing any information concerning financial matters, plans, changes in service delivery, and prospective Patients; and/or

3. Gifts and Gratuities

I acknowledge that I must never accept monetary gifts of any denomination or value from Patients, their family, relatives or friends for the performance of my duties. In all other instances, I acknowledge that I must explain politely to Patients, family and friends that I apologize but that it is against the policy of the Employer to accept monetary gifts for the care services provided.

If the Patient, relative or friend is insistent upon offering a monetary gift I agree to be polite, but firmly direct the individual to the Human Resource Coordinator or designate who will explain the policy. It is appropriate, however, to acknowledge that the gesture is much appreciated.

I acknowledge that the same principle will apply to bequests made in Patients' wills. If I have prior knowledge of a Patient's intention to make a bequest, I should attempt to dissuade the Patient from doing so and bring this to the attention of the Human Resource Coordinator or designate. Such instances must be recorded in the Patient's Plan of Care.

I acknowledge that should it transpire that I am bequeathed a sum of money or a specific gift from the estate of a Patient, I should report it immediately to the Human Resource Coordinator or designate. If necessary, legal advice will be obtained on my behalf and where relevant any records that were previously made of the Patient being asked not to make such a bequest I must provide as mitigating evidence.

4. Patient Wills

I acknowledge that a Patient seeking advice about making a will, or changing an existing will, should be encouraged to do so by contacting a Solicitor or the Citizen's Advice Bureau. The Patient's key employee may offer to assist the Patient in this respect, if necessary referring them matter back to the Human Resource Coordinator or designate for guidance.

I acknowledge that **Under NO CIRCUMSTANCES** am I to become party to or be involved in the making of Patients' wills. This includes helping the Patient draw up a will or act as a witness or Executor to the estate. If requested to do so by a Patient, I should politely, but firmly explain that it is contrary to PFHT's policy to become involved in the personal affairs of Patients to this extent and to do so could lead to disciplinary action up to and including termination of my employment for cause.

I acknowledge that should I discover that I have been appointed as Executor without my prior knowledge, that I have the right to disengage myself. In the event that this should happen I must report it to my Human Resource Coordinator or designate immediately for advice and appropriate action will be taken.

I acknowledge that if I have any questions concerning any of the unacceptable activities listed above or are in doubt about any particular situation, that I will not hesitate to speak to the Human Resource Coordinator or designate for clarification or guidance.

I agree that, during the term of my employment, violation of this policy will lead to discipline up to and including termination of my employment for cause.

APPENDIX F**Performance Management
360 Degree Feedback and Self-Evaluation Procedure****Purpose:**

Professional feedback and development is an ongoing process. The purpose of the feedback review is:

- to provide a forum to recognize the individual contributions of team members
- provide an opportunity to match individual strengths to current and future opportunities
- provide an opportunity to assess and maximize team collaboration and synergies
- to provide team members with a formal opportunity to discuss their successes through the year, and communicate their desires around future career goals and objectives

Benefits of 360 Degree Feedback Reviews:

- The team member is an active participant in the evaluation process
- The team members strengths and areas for improvement are identified
- Ongoing goals and objectives are shared and aligned with the business plan
- Provides a tool to use when considering professional development needs, fit for new opportunities, or need for action
- Provide a variety of perspectives of the professional

Timeframe:

- Informal review and feedback will be sought and provided on an ongoing basis
- Formal reviews will be conducted prior to the end of the probationary period, biennial thereafter.

Components of the Peterborough Family Health Team (PFHT) 360 Degree Feedback & Self-Evaluation:

1. Multi-Reviewer Names Submission Form
2. Feedback Input Form
3. Self-Evaluation Form
4. Individual Evaluation Report
5. 360 Degree Feedback Review Meeting

1. Multi-Reviewer Names Submission Form

Team members will be asked to provide two to four names of individuals that they work closely with and who would best be able to provide an accurate report of their contribution as it relates to their FHT. The list of names should include:

- Min. 1 – Max. 2 Family Health Team members from the site(s) you work at (one should be the admin support person – if available)
- Min. 1 – Max. 2 Physicians from the site(s) you work with
- 1 or 2 Family Health Team members from a site that you do not work at, from same discipline if applicable and possible

From the list of names provided by the team member, at least three respondents will be chosen. PFHT may choose an additional one to two names to ensure a well-rounded evaluation. PFHT will monitor to ensure individual reviewers are not being overburdened and you may be asked to select an alternate. The team member will be notified of any additions.

2. Feedback Input Form

The philosophy of collaborative care and the emphasis that PFHT has on teamwork supports the utilization of multiple input rating sources as a comprehensive method of gathering feedback for team members.

The **Feedback Input Form** as well as the online link will be sent out for completion by individuals identified by the team member and human resources as having a sound knowledge of the team member's role, and those who interact frequently on a professional basis.

3. Self-Evaluation

The team member will receive the **Self-Evaluation Form** and has the option of completing the form manually or online. If completed online the completed form is automatically received, however if the manual option is chosen the completed **Self-Evaluation Form** needs to be forwarded to the Human Resource Coordinator or designate. The responses will be incorporated into the **Individual Evaluation Report** and reviewed at the meeting. The team member may use their most recent self-reflection/continuing competence/self-reflection document versus completing the development section.

4. Individual Evaluation Report

The completed **Feedback Input Forms** and **Self-Evaluation** will be returned to PFHT within two and a half weeks of receipt, as clearly outlined in the cover letter. Once received at PFHT the information will be collated into the **Individual Evaluation Report**.

At the formal team member review, the **Individual Evaluation Report** will be available. The team member will not have the opportunity to review the individual feedback forms. A copy of the **Individual Evaluation Report** will become part of the permanent HR file and a copy will be given to the team member.

5. 360 Degree Feedback Review Meeting

The **360 Degree Feedback Review Meeting** will take place between the team member and the Human Resource Coordinator or designate. The feedback provided will take into consideration all of the components described above. The team member may use their most recent self-reflection/continuing competence/self-reflection document versus completing the development section.)

Additional comments to be added during the meeting will be comprised of:

- The Professional Development they have participated in
- Areas of recognition
- Areas for development
- Career goals and objectives

APPENDIX G

Policy:	Resolution of Concerns
Approved by:	Human Resource Manager
Date Approved:	April 25, 2007
Date Revised:	September 6, 2011

POLICY

The Peterborough Family Health Team (PFHT) recognizes that from time to time, areas of concern or conflicts will occur in the workplace between coworkers, Allied Health Professionals or another individual (the respondent). The best outcome is usually a negotiated agreement between the parties. The following procedures set out a process to resolve the concern/conflict through internal mediation.

PROCEDURE

1. Initially, all complainants are encouraged to discuss the concern or complaint directly with the person causing the concern or conflict. Simply bringing the concern to the other party may resolve the issue. The following questions should be used as a guide to resolve the concern/conflict:
 1. What is the issue?
 2. Who has a stake in the issue?
 3. Are there other underlying issues?
 4. What are the unique perspectives of each stakeholder?
 5. What are three potential solutions or action plans?
 6. What resources are needed for the best solution or action plan to work?

2. If the concern/conflict is not resolved during this meeting, the material collected in the above process will constitute the “concern/conflict file” which will be used in the next step of the process.

3. If the parties are unsuccessful in resolving the issues directly, the complainant should discuss his/her concern with the appropriate person listed below, not later than ten (10) days following the incident that gave rise to the concern/conflict:
 - PFHT employees → FHT/FHO Team Coordinator → Director of Clinical Programs;
 - Nurse Practitioner → Collaborating physician → FHT/FHO Team Coordinator → Director of Clinical Programs ;
 - Mental Health Clinician → Collaborating physician → FHT/FHO Team Coordinator → Director of Clinical Programs ;

 - Dietitian → Collaborating physician → FHT/FHO Team Coordinator → Director of Clinical Programs.

4. If resolution is not possible at this level, the complainant may submit the complaint, in writing to the Human Resource Coordinator or designate, PFHT, within ten (10) days of completion of the above process.
5. The Human Resource Coordinator or designate will meet with the complainant within ten (10) days of receipt of the complaint. The HR Coordinator will take notes about the nature of the complainants concerns, the resolution the complainant is seeking and other information needed to investigate the case.
6. The HR Coordinator will point out that the best outcome is usually a negotiated agreement between the parties however if this is not possible, both parties should be prepared to abide by the decision imposed by a third party.
7. The HR Coordinator, or designate, will need to verify evidence provided by the complainant, speak to the other party to the conflict, their supervisor or collaborating physician. The HR Coordinator may meet with the parties separately, or together, to find ways to resolve the differences. Ultimately, if no solution can be negotiated between the parties, the director will respond in writing to the complainant, and recommend a resolution to the conflict.
8. If not satisfied with the decision of the HR Coordinator, or if the HR Coordinator is causing the concern, the employee or Allied Health Professional may appeal the decision to the Executive Director of PFHT.
9. Upon investigating the written appeal, the Director:
 - Will facilitate, mediate and prepare a recommendation as a resolution to the complainant and the respondent.
 - May find the complaint is without merit, frivolous, trivial, vexatious or made in bad faith and may terminate the process giving reasons for the decision to complainant and the respondent.
 - May find the complaint to be of such serious nature that referral to legal counsel may be necessary for review and action.
10. The decision of the Executive Director with the concurrence of legal counsel (if obtained), shall be reviewed by the Board of Directors and that decision shall be final and binding on all parties.

APPENDIX H

Policy: Accessible Customer Service
Approved by: Human Resources **Date Approved:** November 2011

POLICY

The Peterborough Family Health Team (PFHT) is committed to excellence in serving all clients including people with disabilities.

DEFINITIONS

Becoming accessible means developing a plan on how our organization will provide service to clients with disabilities utilizing the principles of independence, dignity, integration and equal opportunity.

GUIDELINES

Assistive devices

We will ensure that our employees are trained and familiar with various assistive devices that may be used by customers with disabilities while accessing our services.

Communication

We will communicate with people with disabilities in ways that take into account their disability.

Service Animals

We welcome people with disabilities and their service animals. Service animals are allowed in to our premises for clients attending for clinician appointments.

Support Persons

A person with a disability who is accompanied by a support person will be allowed to have that person accompany them on our premises. Fees will not be charged for support persons.

Notice of Temporary Disruption

In the event of a planned or unexpected disruption to services or facilities for customers with disabilities, PFHT will notify clients promptly. This clearly posted notice will include information about the reason for the disruption, its anticipated length of time, and a description of alternative arrangements, as feasible. The notice will be placed at the front entrance lobby of the site.

Training for staff

The Peterborough Family Health Team will provide training to employees who deal with the public. All individuals that have dealings with the public will be trained. This training will be provided to staff during their training orientation period effective with their start date with the organization.

Training will include:

- An overview of the Accessibility for Ontarians with Disabilities Act, 2005 and the requirements of the customer services standard.
- PFHT's plan related to the customer service standard.
- How to interact and communicate with people with various types of disabilities.
- How to interact with people with disabilities who use an assistive device or require the assistance of a service animal or support person.
- How to use the equipment/devices that may help with providing services to people with disabilities.
- What to do if a person with a disability is having difficulty in accessing Primary Health Care Services.

Staff will also be trained when changes are made to our plan.

Feedback Process

Clients who wish to provide feedback on the way the Peterborough Family Health Team provides services to people with disabilities can do so through email to info@peterboroughfht.com; in writing to PFHT 185 King Street, Suite 500, Peterborough, Ontario K9J 2R8; by verbal feedback to reception; to their clinician; or by completing a patient feedback form.

All feedback will be directed to the Human Resource Coordinator or designate.. Clients can expect to hear back within 2 business days. Complaints will be addressed according to our organization's regular complaint management procedures.

Modifications to this or other policies

Any policy of the Peterborough Family Health Team that does not respect and promote the dignity and independence of people with disabilities will be modified or removed.

APPENDIX I

Acknowledgements

I, _____ acknowledge that I have read and fully understand the content of the PFHT Employee Handbook and agree to abide by the terms and conditions outlined in this handbook. A copy of this acknowledgement will be placed in my personnel file

By initialling beside the policies listed below I further acknowledge that I have read and have had an opportunity to ask questions with respect to my obligations as an employee of PFHT:

Violence in the Workplace	_____
Harassment Policy & Program	_____
Confidentiality and Conflict of Interest	_____
360 Feedback and Self-Assessment	_____
Resolution of Concerns	_____
Accessible Customer Service	_____

Date: _____

Signature

Witness