



Violence in the Workplace Questionnaire

ONA GEL File #: _____ Grievor Name: _____
Bargaining Unit _____
Grievance #: _____ Employer: _____

Introduction

This questionnaire is meant to be completed by the union representative in consultation with the grievor(s) and the Joint Health & Safety Representative alleging violence in the workplace. Noted below are a number of questions that deal with this grievance. The reason for asking for this information is to assess the best way in which ONA can assist in resolving the issues.

Workplace violence under the *Occupational Health and Safety Act (OHSA)* means:

- (a) *the exercise of physical force by a person against a worker, in a workplace, that causes or could cause physical injury to the worker,*
- (b) *an attempt to exercise physical force against a worker, in a workplace, that could cause physical injury to the worker,*
- (c) *a statement or behaviour that it is reasonable for a worker to interpret as a threat to exercise physical force against the worker, in a workplace, that could cause physical injury to the worker.*

The definition of violence in your collective agreement may differ from the definitions set out in the OHSA.

Psychological violence is not covered under the OHSA but may be grieved if it is covered in your collective agreement.

Should a grievance proceed to arbitration, it is necessary for the Arbitrator to hear about events at the time that the grievance was filed. The Arbitrator will look at all the evidence put forward by ONA and the employer and decide whether violence in the workplace has occurred.

It is up to ONA to convince the arbitrator that violence occurred and the Employer has not taken appropriate steps to deal with the hazard/issue. If the employer cannot provide a credible explanation for its actions/inactions or decisions, an Arbitrator may find that there has been a violation of the collective agreement or the *Occupational Health & Safety Act (OHSA)*. The more direct evidence ONA gathers, the more likely the grievance will be successful. We, therefore, need considerable help in gathering the evidence.

The OHSA now requires employers to assess and reassess risk of violence as often as necessary; to develop a policy and a program; including measures for summoning immediate assistance, reporting and investigating incidents of workplace and ensure that the program also contains measures and procedures to control the risks identified in the assessment. The employer must also provide information and instruction to workers on the policy and program (in workplaces covered by the health care regulation employers must also consult the Joint Health and safety Committee (JHSC)/Health and Safety Representative (HSR) in the development of all of these measures, procedures and training). The OHSA also requires employers and supervisors to take every precaution reasonable in the circumstances for the protection of a worker. Employees have the right to file a complaint to the Ministry of Labour (MOL) in addition to filing a grievance

Questions

Please identify each incident where the Grievor believes she/he has been subject to violence. For each incident, answer the following questions using both sides of the paper if needed:

1. Please describe how each incident occurred in the following ways:

(a) What happened?

(b) Who did or said something that was violent?

(c) When did this take place?

(d) Where did it happen?

(e) Who was present? (Name any witnesses to the incidents of violence.)

(f) What steps did the Employer take to address your complaint regarding violence in the workplace?

(g) Were the Police and/or the Ministry of Labour contacted in cases of violence?

☐ Yes ☐ No

If so, what steps, if any, did the Police or Ministry take in responding to your complaint?

(h) Are you aware if the employer conducted a risk assessment in your unit?

☐ Yes ☐ No

If yes, provide a copy, where available.

Has the employer made any changes in your workplace to protect you from harm?

☐ Yes ☐ No

(i) Did the person who attempted to harm you, harmed you or threatened to harm you have a history of violent behavior?

☐ Yes ☐ No

i) If so, did your employer make you aware of the history of violent behavior of this person and provide you with measures to protect yourself?

☐ Yes ☐ No

ii) Were you ever trained on all of the employer's measures and procedure, i.e., their Workplace Violence program (e.g. Code white training, security procedures, summoning immediate assistance, reporting incidents of violence, investigation procedures, P.I.E.C.E.S. training, etc.)

☐ Yes ☐ No

2. How did the violent incident affect you?

(a) What negative impact has this incident(s) had on your work life?

(b) Have there been any physical and/or mental/psychological impacts on your health as a result of this incident(s)?

☐ Yes ☐ No

Have you sought medical treatment?

☐ Yes ☐ No

Note: At a later stage, you may be asked to sign a consent to release relevant medical information to ONA. ONA will ensure the privacy and confidentiality of this information.

(c) What financial losses were suffered?

Are there other losses (i.e., impact on pension) or disadvantages (i.e. replacing uniforms) experienced by the grievor? Please identify all losses.

(d) Did you file a claim for WSIB?

☐ Yes ☐ No

(e) Did the employer notify the union, MOL, and JHSC/Health & Safety Representative immediately if your injuries were critical as defined in the OHSA. (https://www.e-laws.gov.on.ca/html/regis/english/elaws_regs_900834_e.htm)

☐ Yes ☐ No

(f) If the injury was not critical but resulted in lost time or medical attention did the employer notify the Union and the JHSC/HSR within 4 days containing all information as required in Section 5 of the Health Care regulation (for LTC and Acute care workplaces) or Section 5 of the industrial regulation for all other workplaces?

☐ Yes ☐ No

(g) If the workplace violence incident resulted in an occupational illness did the employer report the illness to the union, JHSC/HSR and MOL within 4 days of being advised that the worker has an occupational illness or that a claim in respect of an occupational illness was has been filed with the WSIB?

☐ Yes ☐ No

3. Have other members been subject to similar incidents of violence?

☐ Yes ☐ No

Describe the Who, When and Where of these incidents.

4. Has the perpetrator of the violence been removed/terminated from this workplace, restrained and or had 24/7 security assigned?

☐ Yes ☐ No

If the perpetrator is a third party (not an employee of the employer), what steps has the Employer taken to address the behaviour of this individual(s)?

5. Does the employer have a violence in the workplace policy and program (written measures and procedure) in place? If so, please attach a copy.

☐ Yes ☐ No

6. Have you filed a complaint under the employer's internal violence policy? If so, please attach a copy of the complaint and report its current status under the internal process.

☐ Yes ☐ No

7. Identify any impact on the Bargaining Unit membership.

Conclusion: Points to bear in mind and for grievor to be aware of:

1. If you are unable to answer any of these questions at this time, we ask that you please gather and obtain the necessary information and forward it to your Grievance Chair/ Bargaining Unit President and LRO immediately.
2. Please attach copies of any and all documents that may relate to your complaint including e-mails, meeting notes, or any other written documentation. Please keep copies of the originals as they may be required for a future arbitration hearing.

3. The member has the right to have a union representative and ONA will assist them when they are going through employer process.