



CONFIDENTIALITY AGREEMENT

Name: _____
(Please Print)

Affiliation with SHS: _____
(Example: employee, physician, researcher, student, vendor, volunteer)

1. During my association with Sinai Health System (SHS), I will have access to: (a) SHS corporate confidential or proprietary information relating to the organization's functions, employees and persons affiliated with SHS; and/or (b) personal health information relating to SHS patients, as such term is defined under the *Personal Health Information Protection Act, 2004* (PHI).
 2. At all times, I shall respect the privacy and dignity of patients, employees and all persons affiliated with SHS and I shall only collect, use and disclose personal information (including personal health information) as required by the duties of my position and in accordance with the laws of Ontario and Canada.
 3. I shall not inappropriately access, use, copy, modify, remove, or disclose SHS corporate confidential or PHI.
 4. This Agreement does not apply to information I previously and independently developed alone or with others prior to my association with SHS that I can substantiate by written records; nor to information in the public domain.
 5. I shall maintain the secrecy of all User ID(s) and Password(s) that enable me to access SHS and/or Lunenfeld Tanenbaum Research Institute networks and applications and acknowledge that I am responsible for all access and/or actions carried out under them.
 6. I acknowledge that SHS issues policies and procedures that relate to the protection of SHS confidential information and patient information and that compliance with these policies is a requirement of my association with SHS. These policies include, but are *not* limited to:
 - Privacy Policy;
 - Acceptable Use of Information and Information Technology;
 - Privacy Incident Protocol;
 - Other department specific policies and procedures
- I understand that it is my responsibility to familiarize myself with these policies and keep informed of any changes. If I have questions about privacy related policies, including their applicability to me or impact on the performance of my duties, I may contact my supervisor or the Privacy Office.
7. I shall immediately report all privacy breaches involving SHS confidential information and/or patient information to my immediate supervisor and to the SHS Privacy Office.
 8. I understand that SHS will conduct periodic audits to ensure compliance with this Agreement and its privacy policies.
 9. I also understand that should any of these conditions be breached, I may be subject to corrective action, up to and including termination of employment, loss of privileges, termination of contract, or similar action based on my association with SHS. I understand that a privacy breach is an offence under PHIPA and I may be subject to prosecution by provincial authorities if I am found guilty of this offence.
 10. I understand and agree to abide by all of the conditions outlined above. Regardless of changes that may occur to my title, duties, status and/or other terms of my employment or association with SHS, I understand that the terms of this Agreement will continue to apply (including when I no longer have an association with SHS, no matter what the reasons).

Date: _____ Signature: _____ Department: _____

POLICY: CODE OF ETHICS

APPROVED BY BOARD OF DIRECTORS SEPTEMBER 25, 2007

POLICY

Bridgepoint Active Healthcare maintains a Code of Ethics to act as a framework for all patient care, academic, business, governance and organizational actions.

The Code of Ethics provides standards of ethical behaviour for the Bridgepoint Active Healthcare Community – which includes Bridgepoint Hospital, Bridgepoint Foundation, Bridgepoint Collaboratory for Research and Innovation, and Bridgepoint Family Health Team – in order to protect and promote organization-wide integrity and to enhance Bridgepoint Active Healthcare’s ability to achieve its organizational mission.

All Members of the Bridgepoint Community (e.g. employees, volunteers, physicians, dentists, researchers, teachers, students¹, agents² – hereinafter referred to as “Members”) are expected to adhere to this Code.

All Members are expected to sign an Acknowledgement of the Code of Ethics at the commencement of the association with Bridgepoint or at the time this Code is implemented at Bridgepoint.

PROCEDURE

1. All Members will review the Code of Ethics at the commencement of their association with Bridgepoint or at the time this Code is implemented at Bridgepoint.
2. All Members will sign an Acknowledgement of the Code of Ethics at the commencement of the association with Bridgepoint.
3. Any breaches to the Code shall be reported to the Chief Compliance Officer as per the accompanying “Guide to Interpretation and Application of Code of Ethics”.
4. Any person reporting breaches to the Code of Ethics in good faith will be protected from any reprisals due to reporting.

RESPONSIBLE PARTY

Chief Executive Officer

APPROVAL DATE

September 2007.

¹ Student: means “student” as defined in Section A9 of the University of Toronto, Code of Student Conduct. Available at <http://www.utoronto.ca/govcncl/pap/policies/studentc.html>

² Agent: “Agent” means a person empowered to act for or represent Bridgepoint

ACKNOWLEDGEMENT OF CODE OF ETHICS

I acknowledge and certify that I have received and read the Bridgepoint Active Healthcare Code of Ethics and that I understand my obligations to comply with the Code. I agree to comply with the Bridgepoint Active Healthcare Code of Ethics.

Employees and Officers: I understand that compliance with this Code is a condition of my employment. I further understand that violation of the Code of Ethics may result in disciplinary action up to and including termination.

Initials: _____

Students: I understand that compliance with this Code is a condition of my clinical training at Bridgepoint Active Healthcare. I further understand that violation of the Bridgepoint Code of Ethics may result in termination of my educational placement at Bridgepoint and notification of the appropriate Dean or Department Chair at my educational institution.

Initials: _____

Trustees: I understand that compliance with this Code is essential to my service on the Board of Trustees at Bridgepoint Active Healthcare.

Initials: _____

Medical and Dental Staff: I understand that compliance with this Code is a condition of my ability to practice my profession at Bridgepoint Active Healthcare. I further understand that violation of the Code of Ethics may result in disciplinary action as provided in the Bylaws of the Medical Staff, up to and including revocation of Privileges.

Initials: _____

Agents: I understand that compliance with this Code is a condition of my continued ability to furnish services to Bridgepoint Active Healthcare. I further understand that violation of the Code of Ethics may result in a termination by Bridgepoint Active Healthcare of any relationship with Bridgepoint Active Healthcare.

Initials: _____

Researchers and Teachers: I understand that compliance with this Code is a condition of my continued ability to carry out teaching or research at Bridgepoint Active Healthcare. I further understand that violation of the Code of Ethics may result in a termination by Bridgepoint Active Healthcare of any relationship with Bridgepoint Active Healthcare.

Initials: _____

Volunteers: I understand that compliance with this Code is a condition of my continued ability to serve as a volunteer at Bridgepoint Active Healthcare. I further understand that violation of the Code of Ethics may result in disciplinary action, up to and including termination of my volunteer role at Bridgepoint Active Healthcare.

Initials: _____

Signature: _____ Date: _____

Print Name: _____ Department: _____

		POLICY No:	AH 445
TITLE:	WORKPLACE VIOLENCE	ORIGINAL ISSUE DATE:	June 2010
CATEGORY:	Administration	REVIEWED / EFFECTIVE DATE	June 2011 March 15, 2013
		REVISION DATE:	
ISSUED BY:	Human Resources		
APPROVED BY:	Director Human Resources		

POLICY

Bridgepoint Health is committed to providing all members of the Bridgepoint Health workforce, with a safe and supportive environment. Bridgepoint further believes in the prevention of violence and promotes a violence-free workplace in which all people respect one another and work together to achieve common goals. Any act of violence committed by or against any member of our workforce or member of the public, is not acceptable conduct and will not be tolerated. Bridgepoint Health is further committed to providing ongoing training on the Workplace Violence program.

For the purposes of this policy, members of the Bridgepoint Health workforce include all employees, Members of the Board of Governors, physicians, volunteers, students and contractors or service providers.

DEFINITION

Workplace violence is:

- (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.

PRINCIPLES

1. Bridgepoint Health will strive to create a workplace environment that is safe from all forms of violence, including domestic violence.
2. If Bridgepoint Health becomes aware that workplace violence, including domestic violence, would likely expose an employee or volunteer to physical injury in the workplace, Bridgepoint Health will take every precaution reasonable in the circumstances for the protection of the employee or volunteer.
3. Bridgepoint Health acknowledges the importance of keeping requests for assistance with a situation of domestic violence in confidence as much as possible, and will not disclose more personal information to other employees or volunteers than is reasonably necessary to protect individuals from physical injury in the workplace.
4. Bridgepoint Health, in accordance with its duties under the *Occupational Health and Safety Act*, will provide information reasonably necessary to employees or volunteers about a person with a history of violent behaviour if:
 - a. The worker can be expected to encounter that person in the course of his or her work; and
 - b. The risk of workplace violence is likely to expose the worker to physical injury.

REPORTING INCIDENTS

Responsibilities

1. If you witness or are a victim of violence in the workplace, you are required to report incident to Security, Human Resources and/or your manager/supervisor immediately. The person receiving the complaint will notify the Director, Human Resources or designate who in turn will be responsible for conducting an investigation and will involve all relevant parties, including law enforcement, as required.

2. Summoning Immediate Assistance

If you feel you are ever in immediate danger of violence in the workplace, you should initiate a Code White by calling Switchboard Emergency at extension 5555. If you feel the situation warrants law enforcement, you can further request the police support through Switchboard Emergency at extension 5555.

If you are out of the building, (e.g. parking lot or health discipline visits, you can call 911.

Panic buttons for emergency use are located throughout the Bridgepoint campus.

3. Managers are responsible for providing a safe and supportive work environment. Upon learning that an act of violence has occurred or is about to occur, managers must take prompt, corrective action, in consultation with Human Resources. This policy applies whether or not a formal complaint is made.

Procedure

The procedure of the investigation will be in compliance with our Workplace Harassment and Abuse Policy AH440.

CORRECTIVE ACTION

No employee or any other individual affiliated with Bridgepoint Health shall subject any other person to workplace violence or allow or create conditions that support workplace violence. Any employee that subjects another employee, client or other person to workplace violence may be subject to disciplinary action up to and including termination. Other persons may be removed from the workplace.

RETALIATION

Retaliation in any form against any person involved in a complaint, or in an investigation of a complaint, is in itself a violation of this policy and will result in disciplinary action up to and including termination.

CONFIDENTIALITY AND SUPPORT

All complaints received pursuant to this policy will be considered confidential to the extent possible. The identities of the complainant and the defendant and any witnesses will be kept as confidential as possible, except where disclosure is necessary to aid in the investigation, to take disciplinary action or as required by law. The parties to the complaint are also expected to maintain confidentiality at all times.

It is understood that being involved in an incident can be stressful and emotionally upsetting. Bridgepoint Health sponsors a confidential Employee Assistance Program that can be readily accessed for counselling.

TRAINING

Bridgepoint Health is committed to providing ongoing training on the Workplace Violence program and will include:

- Measures and procedures to control risks identified in the required violence risk assessment
- Measures and procedures for summoning immediate assistance when workplace violence occurs, or is likely to occur
- Measures and procedures for workers to report incidents of workplace violence
- The process Bridgepoint will use to investigate and deal with incidents and complaints of workplace violence

REFERENCES

Previous policy: Bridgepoint Health, Administrative Policies and Procedures, 11.014:
Workplace Relations Effective July 2006

Occupational Health & Safety Act, R.S.O 1990, c. 0.1

RESPONSIBLE PARTY

Director, Human Resources

APPROVAL DATE

JUNE 2010

REVIEW DATE

June 2011

March 15, 2013

October 2013 – currently under review

Print Name

Signature

Date

		POLICY No:	AH 440
TITLE:	WORKPLACE RELATIONS	ORIGINAL ISSUE DATE:	January 2005
CATEGORY:	Human Resources	REVIEWED / EFFECTIVE DATE	June 2011
		REVISION DATE:	March 15, 2013
ISSUED BY:	Human Resources		
APPROVED BY:	Director Human Resources		

POLICY

Bridgepoint Health is committed to providing a work environment that is free from discrimination and/or harassment as outlined in the Ontario Human Rights Code and where the dignity and worth of every person is respected.

Bridgepoint Health will not tolerate or condone discrimination and/or harassment by any member of the community and views such action as extremely serious misconduct. Violations of this policy may result in disciplinary action, up to and including termination. For the purposes of this policy, members of the Bridgepoint Health community includes all employees, Members of the Board of Governors, physicians, volunteers, students and contractors or service providers.

For guidance with issues of employee harassment involving clients and families, refer to Human Resources Policy AH 130, *Conflicts with Clients, Visitors and Volunteers*.

Definition of Harassment

Harassment is considered to have taken place if a person knows or ought reasonably to have known that his / her behaviour was unwelcome.

Harassment is any unwelcome action that offends, humiliates, insults or degrades a person or creates a hostile or intimidating work environment.

Harassment based on any of the following, is prohibited: race, disability, ancestry, sex, place of origin, sexual orientation, colour, marital status, ethnic origin, family status, citizenship, age, creed, record of offences (source, the Ontario Human Rights Code).

Inappropriate Behaviour

Behaviour, which may constitute harassment, includes but is not limited to, the following;

- physical or verbal abuse

- derogatory or inappropriate jokes or teasing
- insults or taunting
- slurs
- inappropriate physical contact
- suggestive looks (leering or staring) or suggestive gestures
- display or circulation of any inappropriate written materials or pictures
- unwelcome and unsolicited advances
- sexual solicitations or advances
- threats regarding employment conditions in response to rejection of sexual solicitation or advances, for example, threats pertaining to hiring, promotion, transfer, performance appraisal, training and compensation.

Recourse to the Ontario Human Rights Commission

Notwithstanding this policy, employees who believe they have been subject to discriminatory behaviour or harassment, maintain their right to file a complaint with the Ontario Human Rights Commission.

Workplace

1. The workplace is not confined to the offices, buildings and worksites of Bridgepoint Health. It also includes the facility cafeteria, washrooms, locker rooms and any other location where business is conducted.
2. Harassment which occurs outside the workplace, but which may adversely affect employee relationships, may also be interpreted as workplace harassment.

Enquiries

Any persons who feel that they are experiencing inappropriate behaviour are encouraged to contact someone with whom they feel comfortable discussing the matter with. That may be a supervisor, someone in Human Resources or anyone else in a position of authority. The Vice President, Leadership and Organizational Development or designate is the workplace relations officer for the organization. Employees who would like a better understanding of what constitutes harassment or would like to discuss this policy, should contact the workplace relations officer.

Responsibilities

1. Each staff member is responsible to ensure that the prohibited activities, described in this policy, do not occur. Workplace harassment is unpleasant and intimidating. It is essential that all employees take the necessary steps to stop harassment. Employees who witness harassment or who become aware that an individual is being harassed have a responsibility to report the incident immediately to a supervisor or manager or to the Human Resources Department without fear of reprisal

2. Managers are responsible for providing a harassment-free work environment. Upon learning that harassment is occurring, managers must take prompt, corrective action, in consultation with Human Resources. This policy applies whether or not a formal complaint is made.

Confidentiality and Support

All complaints received pursuant to this policy will be considered strictly confidential. The identities of the complainant and the alleged harasser and any witnesses will be kept as confidential as possible, except where disclosure is necessary to aid in the investigation or to take disciplinary action. The parties to the complaint are also expected to maintain confidentiality at all times.

It is understood that being involved in an incident pertaining harassment can be stressful and emotionally upsetting. Bridgepoint Health sponsors a confidential Employee Assistance Program that can be readily accessed for counselling.

PROCEDURE

1. Filing a Complaint of Harassment

- 1.1 An employee who feels that he/she is experiencing harassment in the workplace is encouraged to:
 - if appropriate, make it known to the harasser that the behaviour is offensive and unwelcome
 - keep a written record of dates, times, unacceptable behaviour and witnesses to the incidents, if any.
- 1.2 Employees should make a complaint of harassment immediately to a supervisor or to the Human Resources Department.
- 1.3 The person receiving the complaint will notify the Vice President, Leadership and Organizational Development or designate who in turn will be responsible for the investigation.

2. Time for Filing a Complaint

Any complaint must be filed within a reasonable time from when the last incident occurred. Bridgepoint Health reserves the right to not deal with any complaint that is based on facts that occurred more than six (6) months prior to the filing of the complaint.

3. Investigations

- 3.1 The exact nature of the investigation will depend on the particulars of the allegation. The investigation will be conducted by the Vice President, Leadership and Organizational Development or designate, or an external investigation may be initiated as deemed appropriate by the Vice President, Leadership and Organizational Development or designate. This may involve legal counsel. Investigations will involve gathering all relevant information from

the person who feels harassed, from the alleged harasser, witnesses, if any, and possibly from other relevant individuals.

3.2 The investigation will be conducted in a timely manner. It must be well documented and the resolution implemented as soon as possible

4. Complaint Resolution

After the investigation is completed, the complainant and the alleged harasser will be advised of the decision. If it is determined that an allegation of harassment against an employee is valid, appropriate corrective action will be taken.

5. Corrective Action

Corrective action may include any one or more of the following:

- offering a formal apology
- counselling an employee about appropriate behaviour
- written warning placed in the employee's Human Resource file
- transfer
- change of reporting line
- suspension or discharge
- suspension of privileges or loss of privileges for physicians in accordance with Bridgepoint Health by-laws.

6. Retaliation

Retaliation in any form against any person involved in a complaint, or in an investigation of a complaint, is in itself a violation of this policy and will result in disciplinary action up to and including termination.

7. Unfounded Complaints

When a complaint is found to be vexatious or made in bad faith, disciplinary action may be taken, up to and including discharge of the complainant.

8. Document Security

Investigation documentation is maintained in a controlled, confidential location and separate from the employee files.

REFERENCES

Previous policy: The Riverdale Hospital, Administrative Policies and Procedures, 11.014: *Workplace Relations*. Effective April 1997.

Human Resources Policy AH 130, *Conflicts with Clients, Visitors and Volunteers*

RESPONSIBLE PARTY

Director, Human Resources

APPROVAL DATE

January 2005

REVIEW DATE

June 2011

March 15, 2013

October 2013 – currently under review

Print Name

Signature

Date