



FOSTERING
RESILIENCE AND
RECOVERY:

**Trauma-Informed
Primary Care
Human Resources
Policy Templates**



TRAUMA-INFORMED CARE HUMAN RESOURCES POLICY TEMPLATES

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Adapted from HR Policy Toolkit found at
www.hrcouncil.ca/hr-toolkit/policies-sample-policies.cfm



Code of Conduct Policy

PURPOSE

The agency has a mission to _____. In pursuing the agency's goals, the agency serves all individuals and families who meet agency criteria for inclusion in services. In delivering programs to our population, employees and volunteers work with each other and the public at large. The following Code of Conduct is designed to allow the agency to preserve its long tradition of integrity, safety, collaboration, trust, transparency and creditability with the public.

PHILOSOPHY

The Code of Conduct is designed with the following guiding principles and framework in mind: safety, trustworthiness, transparency, empowerment, mutuality, and collaboration.

RESPONSIBILITY

It is the responsibility of all staff and volunteers to abide by this Code of Conduct.

GUIDELINES

This Code is organized into categories as following:

Service

1. Discrimination or discriminatory language will not be tolerated and is subject to the Discipline policy. Always act with fairness, honesty, integrity and openness; respect the opinions of others and treat all with equality and dignity without regard to gender, race, color, creed, ancestry, place of origin, language, political beliefs, religion, marital status, disability, age, or sexual orientation.
2. Promote and integrate the mission, guiding principles, values and objectives of the agency in all dealings with other staff and the public on behalf of the agency.
3. Provide a positive and valued experience for those receiving service within and outside the agency.
4. Provide service free of abuse of any kind, including physical, psychological, verbal or emotional.
5. Act at all times to preserve an environment of safety and trust.

Accountability

1. Act with honesty and integrity and in accordance with any professional standards and/or governing laws and legislation that have application to the responsibilities you perform for or on behalf of the agency. Agency Human Resource policies apply to all volunteers and employees. Policies are reviewed, through a transparent and inclusive process, every three years or sooner if an issue arises with its interpretation and use.



2. Adhere to the policies and procedures of the agency and support the decisions and directions of the Board and its delegated authority. No favoritism to the Board of Directors, employees, or volunteers will be shown in applying for or in receiving services from the agency.
3. Take responsibility for your actions and decisions. Follow reporting lines to facilitate the effective resolution of problems. Ensure that you do not exceed the authority of your position.

Conflict of Interest

Conflict of interest arises when a person participates in a decision about a matter (including any conflict or arrangement of employment, leasing, sale or provision of goods and services) which may benefit or be seen to benefit that person because of his/her direct or indirect monetary or financial interests affected by or involved in that matter.

1. It is the duty of any person taking part in the operations of the agency to adhere to the Conflict of Interest Policy at all times.
2. In the event that such a matter arises, the employee shall formally disclose the interest and refrain from attempting to persuade or influence other employees participating in the decision.

Confidentiality

1. Respect and maintain the confidentiality of information gained as a volunteer or employee, including, but not limited to, all computer software and files, the agency documents and printouts, and all volunteer, employee membership, donor and support records.
2. Respect and maintain the confidentiality of individual personal information about persons affected by behavioral health concerns gained through your role at the agency, for example, in support groups, meetings or in-service programs.
3. Respect and maintain the confidentiality of sensitive or personal employee information. It is important to provide the same level of respect to employee information and data as patients to avoid internal conflict.

Personal or Sexual Harassment

Sexual harassment is any conduct, comment, gesture or contact of a sexual nature that one would find to be unwanted or unwelcome by any individual, or that might, on reasonable grounds, be perceived by that individual as placing a condition of sexual nature on an employment or career development.

1. No employee or volunteer shall enter into any intimate or otherwise nonprofessional relationship with a service user or shall behave in a manner that is perceived to be sexual in nature.

Personal harassment means any conduct whether verbal or physical that is discriminating in nature, based upon another person's race, color, ancestry, place of origin, political beliefs, religion, marital status, physical or mental disability, sex, age, or sexual orientation. It is discriminatory behavior, directed at an individual, that is unwanted or unwelcome and causes substantial distress in that person and serves no legitimate work-related purpose.

2. The agency has ZERO tolerance with respect to personal and sexual harassment. Personal or sexual harassment in any form is strictly prohibited and may be grounds for termination as a volunteer, or, in the case of an employee, immediate dismissal for just cause without notice or pay in lieu of notice.



Procedures for the Care of those may be vulnerable due to age or disability

In the course of providing services, our volunteers, employees and third-party service providers may come into contact with vulnerable individuals. These individuals are those who may be at risk of harm or harassment because of their age or disability. When this occurs, the following procedures should be followed:

1. Where practical to do so, conduct agency related one-on-one meetings with patient who may be vulnerable in a business-like setting, public location or in an area that is private but visible to others.
2. The agency volunteers, employees, and third-party service providers who seek to initiate personal contact with vulnerable patients outside the agency program, are asked to seek prior approval from the appropriate employee/leadership volunteer, and, in the case of children/youth, from the parent/guardian.

Implementation

Strict observance of the Code is fundamental to the activity and reputation of the agency. It is essential that all volunteers, employees, and any other third-party service provider in face-to-face contact without patients adhere to this Code. They will certify this by signing a Declaration that they have read and will abide by this Code. The Human Resources Manual gives further details of this and other policies and procedures of the agency. Management has the responsibility of ensuring compliance with all Codes and Policies of the agency.

Code of Conduct Declaration

I, _____ (Employee or Volunteer Name), have read, understand and agree to abide by the Code of Conduct of the agency and I understand that such adherence is a condition of my employment or volunteer work. I understand that a violation of the Code of Conduct may be grounds for termination as a volunteer or in the case of an employee immediate dismissal for just cause without notice or pay in lieu of notice.

Signed this _____ day of _____, 20_____

(Volunteer/Employee Signature)



Confidentiality Policy

PURPOSE

The Confidentiality policy defines and describes the management of confidential information for all employees and volunteers.

PHILOSOPHY

As part of creating a trauma-informed organization, trust is an essential component to the work that we do. The Confidentiality policy is a key component to the foundation of building that trust.

RESPONSIBILITY

It is the responsibility of all employees and volunteers to maintain confidentiality according to this policy.

GUIDELINES

1. All employees and volunteers shall keep confidential and shall not without the express written consent of the agency, disclose to any person or organization any donor, financial or business information of the agency, which an employee may have acquired during the course of employment. This extends throughout the tenure employment or any time after termination.
2. All employees and volunteers shall keep confidential and shall not, without the written consent of the service user on the established Release of Information Form, disclose to any person or organization any behavioral health, medical or other information of the service user, which an employee or volunteer may have acquired during the course of employment. This extends throughout the tenure employment or any time after termination.
3. All employees and volunteers shall abide by all federal and state laws pertaining to confidentiality of service user information and records, to include, but not limited to HIPAA.



Conflict Resolution Policy

PURPOSE

The agency is committed to sustaining a positive, safe work environment in which employees work constructively and efficiently together. The conflict resolution policy and process has been established as a foundation for ensuring that the work environment remains positive and safe. The conflict resolution policy is intended to:

1. Provide the opportunity to resolve a conflict or complaint quickly, fairly and without reprisal.
2. Improve communication and understanding between employees and between employees and their supervisors.
3. Ensure confidence and transparency in management decisions by providing a mechanism whereby management decisions can be objectively reviewed.
4. Support a positive work environment by allocating supervisors responsibility for preventing and resolving conflicts and complaints.
5. Identify organization policies, procedures, and processes which need to be clarified or modified.

PHILOSOPHY

A safe and secure working environment is a key component to becoming a trauma-informed agency. Conflict is inevitable but can be resolved in safe and positive ways. A trauma-informed agency acknowledges that conflict is a normal part of human interactions and supports conflict resolution processes that honor and respect each individual.

RESPONSIBILITY

It is the responsibility of all employees and volunteers to create a safe and secure work environment. As such, it is the responsibility of all employees and volunteers to resolve conflict in positive and safe ways, as described in this policy.

GUIDELINES

Employees who are experiencing a work-related conflict or have a complaint are encouraged to resolve it through discussions with their supervisor whenever possible. All requests for conflict resolution, complaints and appeals shall be fully investigated and addressed as quickly as possible. Penalty or retaliation against an employee solely on the basis of initiating conflict resolution, making a complaint, or participating in a conflict resolution investigation will not be tolerated and will be subject to disciplinary action.

Informal Conflict Resolution and Complaint Process

1. Employees who experience a work-related conflict or who have a complaint should first attempt to discuss the matter with the person involved in the conflict or complaint. In some situations, i.e. the conflict is with



the employee's direct supervisor, it may be difficult or inappropriate for two individuals to discuss the identified concern. In these cases, the employee may request a meeting with the individual(s) including their supervisors, with the next level of management or a Human Resources representative to discuss the problem.

2. The supervisors, the next level of management or the Human Resources representative will analyze the merit of the conflict resolution request or complaint, and within two (2) working days will meet with the employees to inform them of the proposed plan of action.
3. If any of the employees are not satisfied with the informal resolution of the problem, he or she may proceed informally to the next level of management or proceed with the formal conflict resolution process.

NOTE: Although not required, employees are encouraged to follow the informal approach to conflict resolution prior to making a formal complaint.

Formal Conflict Resolution and Complaint Process

1. Employees who have a complaint or require management intervention in relation to a work-related conflict and wish to initiate the formal conflict resolution process must prepare written documentation, with supporting details, of the conflict situation or complaint and submit it to the supervisor.
2. The supervisor will investigate the merits of the conflict resolution request or complaint (based on pre-approved agency criteria). The supervisor will consult with a Human Resources representative and other relevant individuals, if necessary.
3. Within five (5) working days of receiving the conflict resolution request or complaint, the supervisor will complete the investigation and prepare a written response. The supervisor will forward a copy of the response along with a request that the employee sign and date the copy to confirm they have received the reply and agrees or disagrees with the supervisor's plan of action.
4. If the employee agrees with the recommended plan of action, the supervisor will send a copy of the signed reply to Human Resources for inclusion in the employee's personnel file.
5. If the conflict or complaint has not been resolved to the employee's satisfaction, the supervisor will escalate the complete file, including the conflict resolution request or complain, documentation of relevant factual information, analysis of the information, the conclusion and the recommended resolution, to the next level of management.
6. The next level of management will investigate any relevant issues in the file and any newly discovered evidence or information that may arise during the conflict resolution process. The next level of management will forward a response to the employee either concurring with the previous resolution or proposing an alternate approach to resolution.
7. If the employee agrees with the resolution at this stage, the next level of management will send a copy of the signed reply to Human Resources for inclusion in the employee's personnel file.
8. If the complaint has not been resolved, the employee can request the complaint be investigated by the most senior executive. The decision and recommendations made by the most senior executive will be final.



Discipline Policy

PURPOSE

The performance discipline policy outlines the philosophy and guidelines to performance management when performance problems are ongoing and/or become serious.

PHILOSOPHY

Discipline will happen in transparent, mutual, collaborative and safe environments. Discipline shall be respectful and equitable. Discipline measures shall be appropriate to the infraction and may include termination of employment.

RESPONSIBILITY

The Director of Human Resources is responsible to provide consultation and guidance to Department Management and Supervisors in performance discipline management. Department Management is responsible to ensure that appropriate action is taken to resolve performance problems. Supervisors are responsible to identify performance problems and make every effort to ensure employees meet organizational needs. Employees are responsible to fulfill job duties and responsibilities.

GUIDELINES

Ongoing and/or serious performance problems may be considered a discipline matter and are managed separately from the regular Performance Management systems. Examples include failure to meet performance standards, chronic absenteeism, refusal to follow direct instructions, and unwelcome touching or other forms of close body contact.

The department manager shall consult with human resources to determine appropriate action for each step of managing discipline.

Action shall depend upon the severity of the problem. The matter shall normally be managed in the step-by-step procedure as outlined below. Problems of a more serious nature may require more immediate corrective action. In those cases, in consultation with human resources and/or the president any step(s) may be circumvented. The following are breaches of the organization's Code of Ethics and/or Guiding Principles requiring immediate corrective action:

- Gross misconduct or insubordination
- Sexual harassment
- Performance of assignment(s) while under the influence of alcohol or mind-altering drugs
- Theft
- Misappropriation of organizational funds



- Abuse of organizational equipment or materials
- Falsification of records
- Misrepresentation of personal information
- Illegal, violent or unsafe actions
- Abusive treatment of patients or co-workers, either physically or mentally
- Failure or inability to project a positive image of the services of the organization
- Revealing highly confidential and damaging information
- Malicious damage to organization's property

Appropriate investigation shall be conducted before any disciplinary action is taken.

An employee may be temporarily suspended with or without pay depending upon the nature of the discipline and investigation required.

STEP 1

The supervisor shall verbally identify the performance problem to the employee and outline the performance expectation.

STEP 2

If the problem has been corrected, the employee shall be advised verbally.

If the problem has not been corrected, the employee shall meet with their supervisor and one other impartial supervisor. This meeting will attempt to identify the problems, find ways to improve the situation and suggest adequate solutions, concluding with a recommended course of action and an appropriate time frame in which the employee will be expected to improve. Details of the meeting will be documented, signed by all parties as a correct representation of points discussed. A copy of the signed document will be given to the employee and placed in the Personnel File.

STEP 3

If the problem has been corrected, a memo shall be provided to the employee, copied to the Personnel File, indicating the performance has been corrected. If the same or related performance problem does not occur during the following 2 years, the memo shall be removed from the Personnel File.

If the problem has not been corrected, or has reoccurred within a 2-year period, a memo shall be presented to the employee, copied to the Personnel File, indicating the performance gap and consequence for non-compliance. The consequence following the meeting and this memo addressing performance problems is normally dismissal.

STEP 4

If the problem has been corrected, a second memo shall be provided to the employee, copied to the Personnel File, indicating the performance gap has been corrected. If the same of related performance problem does not occur during the following 2 years, the memo shall be removed from the Personnel File.

If the problem has not been corrected, the employee shall be dismissed for just cause.



Harassment Policy

PURPOSE

The agency is committed to sustaining a positive, safe work environment in which employees work constructively and efficiently together. The harassment policy and process has been established as a foundation for ensuring that the work environment remains positive and safe.

The intent of this policy is to ensure a climate of understanding, cooperation and mutual respect.

PHILOSOPHY

A safe and secure working environment is a key component to becoming a trauma-informed agency. Harassment is not acceptable and is counterproductive to creating and maintaining that environment.

RESPONSIBILITY

It is the responsibility of all employees and volunteers to create a safe and secure work environment. As such, it is the responsibility of all employees and volunteers to avoid any behavior or language that constitutes harassment, as described in this policy.

GUIDELINES

Bullying and all forms of violence are well-established as having many negative consequences for health and well-being at an individual level, and at a group level bullying behavior creates an organizational culture that supports and encourages violence in a variety of forms. As such, the agency does not tolerate or condone any degree of violence or harassment by anyone associated with the agency. It is the responsibility of all staff, and in particular management, to promote a harassment free, safe and secure environment in the workplace. The agency believes in the prevention of harassment and promotes a harassment-free, safe and secure environment in which all people respect one another and work together to achieve common goals.

Harassment is defined as ANY unsolicited or unwelcome interaction, which directly or indirectly affects or threatens to affect a person's job security, prospects of promotions or earnings, working conditions or opportunity to secure a position. Harassment can include such things as verbal or physical abuse, threats, derogatory remarks, jokes, innuendo or taunts about any of the prohibited grounds.



It is the responsibility of all staff, and in particular management, to promote a harassment free, safe and secure environment in the workplace.



Sexual harassment can include pinching, patting, rubbing or leering, dirty jokes, pictures or pornographic materials, comments, suggestions, innuendos, requests or demands of a sexual nature.

Bullying is any offensive, cruel, intimidating or humiliating behavior which includes physical violence or the threat of physical violence. It can be physical or verbal, direct or indirect such as gossip. Bullying is considered harassment in general, unless there is physical contact or a threat of violence, where it is considered violence. Bullying is ill treatment which is not addressed under human rights legislation or criminal codes.

Abuse of Power happens whenever an employee abuses or misuses his/her power and discretion for personal benefit or in benefit of another person. For purposes of this policy, abuse of power includes situations involving a minor, situations that involve a reporting relationship, or any situation that includes an accusation from a patient against an employee or volunteer who is providing a service upon which the patient depends. Incidents that involved an abuse of power are considered of a more serious nature than peer-to-peer situations.

The behavior need not be intentional in order to be considered harassment, but may be offensive and/or intimidating. Such action may engender fear or mistrust, and thereby compromise an individual's dignity or sense of self-worth. Any act of harassment committed by or against any employee, volunteer, child or any other individual is unacceptable conduct and will not be tolerated.

Prevention is always the first line of defense against occurrences of harassment. All employees and volunteers are reminded of their obligation to follow the Code of Conduct and the guiding principles of the agency and to adhere to policies and procedures aimed at ensuring a positive and safe work environment and the highest level of care for patients. Beyond this, there is a duty upon all to prevent harassment by discouraging inappropriate activities and by reporting incidents, as per this policy.

Rights

Everyone has the right to:

- An environment that is free from harassment.
- File a complaint when the environment is not free from harassment.
- Be informed of complaints made against them.
- Obtain an investigation of the complaint without fear of embarrassment or reprisal.
- Have a fair hearing.
- Be kept informed throughout the process and of remedial action taken.
- A fair appeal process for both the respondent and complainant.
- Confidentiality to the degree possible under the circumstances.
- Representation by a third party.
- Contact the state's Human Rights Commission (or appropriate entity) to file a complaint of harassment after the internal process has been completed, but may file during the process if the process is taking longer than allowed by this policy.



Obligations

The people of the agency have the responsibility to ensure the safety and health of all those who come in contact with the agency, whether that contact is as patients, volunteers, employees or suppliers. The agency is obligated legally to take all complaints seriously by:

- Using due diligence, which is the obligation to take reasonable measures to provide appropriate services.
- Being very familiar with the harassment policy and following it closely
- Following the process without bias.
- Documenting all information from the first disclosure to the final resolution.
- Recording only relevant facts – no feelings.
- Signing and dating all documents.
- Using common sense.

The agency is committed to investigating reported incidents of harassment in a prompt, objective, and sensitive manner taking necessary corrective action and providing appropriate support for victims. No individual shall be penalized in any way for making a complaint or giving evidence in a harassment investigation.

The test to determine whether harassment has occurred is two-fold:

1. Whether a person knew or ought to have known that the behavior would be considered unwelcome or offensive by the recipient.
2. The recipient found the behavior offensive.

If an individual(s) believes they are being harassed, they should:

1. Immediately make the individual(s) aware that the behavior is unwelcome and ask him/her to stop.
2. Report the incident in accordance with the Conflict Resolution Policy.
3. The recipient should keep a record of the incidents in question, which may include:
 - a. Name(s) of the individual(s) in question.
 - b. The date, place and time the incident(s) occurred.
 - c. Name(s) of witnesses.
 - d. The event(s) that led up to the incident(s) in question.
 - e. Any particular reason why the event(s) occurred.
 - f. The actual incident that led to a complaint.

Investigation Guidelines:

1. At all times, the emotional and physical safety of the complainant is paramount and this may involve taking steps that are not outlined herein. The confidentiality of the individuals concerned will be maintained. An



investigation into the incident(s) will be undertaken immediately along with any additional steps necessary to resolve the problem. In general, the process is:



2. Within five (5) working days, the complainant and the individual in question will both have individual interviews along with any individuals who may be able to provide additional and relevant information. Once all relevant information has been gathered, it will be reviewed with the appropriate departments to determine whether harassment has taken place.
3. If the investigation reveals the occurrence of harassment or other unacceptable conduct appropriate disciplinary action up to and including termination, in accordance with the Discipline Policy, will be taken and all documents will be placed in the offenders personnel file. The complainant will be advised of the results of the investigation, in accordance with the Conflict Resolution Policy, and no reference to the incident will appear in their work record.
4. If the investigation fail to find fault, all documents will be destroyed and both parties will be notified of the result of the investigation.



Hiring Policy

PURPOSE

The agency is committed to developing a trauma-informed, responsive and educated workforce. As such, it is the policy of the agency to hire staff in a trauma-informed, responsive and educated way.

PHILOSOPHY

According to CHCS (2016), hiring staff suited for trauma-informed work is essential for employing a trauma-informed approach. Our agency is committed to having a trauma-informed educated and responsive workforce, which begins with the hiring process.

RESPONSIBILITY

It is the responsibility of hiring managers, supervisors, and human resources to ensure employment practices conform to personnel policies.

GUIDELINES

Recruitment and Selection

Approval to recruit for vacant or newly created positions will be granted by the executive director. Vacant and newly created positions must first be posted internally for a period of ten (10) calendar days in order for current employees to have the opportunity to apply. The posting shall include:

- Job title
- Essential requirements for education and experience
- Knowledge and skills required
- Key areas of responsibility
- Preferred knowledge and skills, including, but not limited to trauma-informed care experience
- Starting/ending date, where applicable
- Hours of work
- Compensation rate or range
- Closing date of the competition
- Application instructions
- The following statement regarding acknowledgement of applications: “We thank all candidates for their interest, however, only those selected for an interview will be contacted.”



If a suitable applicant cannot be found through the internal process, recruitment can then take place externally, i.e. newspaper ads, and other media forms. External advertising shall include internal posting requirements as well as a brief description of the Association.

When time restraints dictate, positions can be posted internally and externally concurrently.

It is the policy of the agency that:

- All internal applicants who apply in writing for vacancies will receive an interview.
- An employment interview will be conducted before making any offer of employment.
- All candidates participating in an interview will be notified of the results.
- Employment tests may be conducted before making an offer of employment. It is up to the hiring manager to determine if they will require a test for all candidates receiving an interview.
- Hiring managers will use behavioral interviewing, a technique that relies on candidates' past behavior as a predictor of future behavior, to screen for empathy, non-judgment, and collaboration.
- Each interview team will consist of a minimum of three persons, to include a supervisor/hiring manager, a patient of the agency and a staff member in a similar position or level to the vacant position.
- Two reference checks will be conducted before making an offer of employment.

Offer of Employment

Offer letters will be written and include all terms of employment or volunteering including:

- Job title
- Start date
- Term of employment, if applicable
- Rate of pay
- Pay period information
- Job description
- Probationary period
- Requirement for the employee to complete a criminal reference check
- Requirement to complete an oath of confidentiality
- Eligibility for benefits
- Benefits information and
- Any specific conditions which may apply.

The signature of the Human Resources Director, or their designee, will be required on all offer letters. All employees and volunteers of the agency will be sent two copies of the offer letter and shall be requested to sign the letter and oath of confidentiality, and return one copy while retaining the other for their personal files, indicating acceptance



of the terms and conditions of the offer. Upon receipt of written acceptance from the applicant, the agency will respond in writing to all unsuccessful applicants who were interviewed.

Probation

The agency recognizes that new employees will need a period of time to become familiar with the organization and to move toward competency in their position. The first few months of employment represent an opportunity for both the employee and the agency to determine if the original hiring decision was best for all involved.

The purpose of the probationary period is to provide orientation, guidance, on-the-job training, and coaching to the new employee, allowing them the opportunity to learn and fulfill the requirements of their new position. This period is also the final and critical phase of the selection process that will provide the hiring manager the opportunity to evaluate the hiring decision. To do this effectively, the manager will be required to regularly (at least monthly) monitor, measure and review the new employee's level of performance during the probationary period. During this time, the new employee will be evaluating and adjusting to his/her new position and work environment to determine if expectations are being met and assessing his/her overall fit to the organization, its mission, principles and values.

An individual who has been newly hired or promoted shall serve a probationary period of three (3) to six (6) working months as follows:

- Three (3) months: Non-managerial positions/volunteers.
- Six (6) months: Managerial, professional & technical positions and ALL off-site supervised employees.

The probationary period does not include time the individual spent as a volunteer or intern. However, probationary periods may be waived with approval from Human Resources.

It is the policy of the agency that:

- Any employee promoted or transferred to a new position is required to have a probationary period. If the new position does not work out satisfactorily, the employee does not have the option to return to their former position.
- The probationary review must be conducted monthly throughout the probationary period. At the end of the probationary period, the probationary review form must be filled out by the hiring manager, discussed with the employee, signed by both and submitted to Human Resources. If the probationary review form shows a favorable assessment, Human Resources will change the employee's status from probationary period to employee. If the probationary review form does not show a favorable assessment, Human Resources and the hiring manager must decide to either terminate the employment or extend the probationary period for another period, as defined above. Either decision must be put in writing to the employee.



The purpose of the probationary period is to provide orientation, guidance, on-the-job training, and coaching to the new employee, allowing them the opportunity to learn and fulfill the requirements of their new position.



Orientation

The agency recognizes the importance of providing essential information to newly hired persons. The agency will provide all new employees with an orientation session during the first two weeks after the commencement of employment with the Agency. Human Resources will conduct the orientation which will include:

- History, purpose and organization of the agency, including its mission, vision, guiding principles and values.
- Training on Introduction to Trauma and Trauma-Informed Care.
- Review relevant policy and procedure manuals along with pertinent details of the work area (i.e. wash-rooms, parking, etc.) for the program area with the new employee.
- Review Human Resources policy and procedure manual with the new employee.
- Inform the new employee of the performance evaluation.
- Conduct orientation of administrative and financial procedures in the agency.
- Ensure the employee receives a copy of the Occupational Health and Safety Policies and Procedures and the Fire and Safety Policy and Procedure.
- Ensure the employee receives a copy of the Code of Conduct, Conflict Resolution, Harassment and Appeals Policies.
- Provide a copy of the Employee Handbook to the employee.
- Answer questions as needed.

The hiring manager will conduct an orientation, as well, which will include:

- Briefing the new employee on their role and how it fits into the organization.
- Providing guidance on behavioral expectations as it relates to creating and maintaining a safe and secure environment.
- Introducing new employee to their colleagues.
- Orienting the new employee to their work space, including the layout, available facilities and emergency procedures.
- Providing the new employee with a list of required reading and training for their position to be completed within the first 30 days.
- Answer questions as needed.



Occupational Health and Safety Policy

PURPOSE

The agency is committed to providing a safe work environment and recognizes that there are several health and safety issues that need to be addressed in order to maintain that environment.

PHILOSOPHY

A safe and secure working environment is a key component to being a trauma-informed agency.

RESPONSIBILITY

It is the responsibility of all employees to ensure a safe and healthy work environment, as described in this policy.

GUIDELINES

Maintaining a safe work environment requires the continuous cooperation of all employees and volunteers. It is required that all employees and volunteers recognize that it is their duty to comply with all health and safety rules, regulations and guidelines and in performing all tasks in a safe and health manner. All persons are also required to refrain from any unsafe practices or hazardous actions and to exercise due care and diligence. No person shall carry out any action, practice or process, which may jeopardize the health and safety of others. Any unsafe conditions, materials or equipment and all accidents and injuries must be reported.

Alcohol and Drug Abuse Policy

The agency acknowledges that alcohol and/or drug abuse/addiction is a serious medical, social, public health and employment problem, which can be treated by existing medical and therapeutic methods. The agency encourages early treatment and rehabilitation as vital to the ongoing viability of the employment relationship.

- Sub-standard performance due to alcoholism or drug dependency will not be tolerated. Persons participating in an alcoholism or drug abuse treatment program will be expected to meet existing job performance standards and established work rules. Temporary modifications to work assignments to support an individual through a treatment program can be made, including but not limited to changes to the hours of work, removal of certain tasks, or other arrangements that might be indicated and agreed to. These modifications must be documented and signed by management and the employee, including the length of time of the modification.
- Employees and volunteers are prohibited from working while their ability is impaired by the effects of alcohol or drugs. Any individual reporting for duty while their ability to work is affected by alcohol, drugs or other substances will not be permitted to remain on the premises and may be subject to disciplinary action.
- Any individual drinking alcohol or participating in other drug activities on the premises without permission will be subject to disciplinary action.



- Persons with alcohol or drug abuse problems shall be referred to the Employee Assistance Program (EAP). Volunteers will be permitted to access EAP on an individual basis. Referrals to EAP may be mandatory in certain situations. The confidential nature of medical records of individuals with substance abuse problems will be strictly preserved.

Environmental Sensitivities

- Smoking is not permitted on the agency's premises or sites except in the designated areas. It is the expectation that any areas utilized as designated smoking areas (official or casual) will be kept free of all debris resulting from this use.
- Wearing scents, such as perfume, after-shave, cologne, hair spray, body lotions, etc., is discouraged due to the increasing sensitivities and allergies of our patients, members and staff. Please respect the health of others and refrain from wearing scents while involved with the agency's programs and services.
- The agency will make every effort to use scent free cleaning products where possible.

Workplace Violence

Every person has the right to an environment that is free from violence, and threat of violence, and to file a complaint when the environment is not free from violence. Prevention of workplace violence is the most important part of any plan to ensure a violent-free environment. At its core, it involves awareness by management, employees and volunteers on the potential of violence and steps that can be taken to lessen the possibilities. It is the responsibility of all employees and volunteers to be aware of and adhere to the Code of Conduct policy and Conflict Resolution Policy. It is the responsibility of every supervisor and manager to be aware of programs offered by the agency to assist with prevention of workplace violence, to include, the Employee Assistance Program, the first line of support and intervention when an employee is distressed or in crisis, and the flexible work arrangement program to assist with work-life balance issues.

All incidents and alleged incidents of workplace violence, no matter of what magnitude or whom it may involve, must be treated seriously and handled in a manner which includes immediate reporting to the supervisor/manager and, when required, the police. Whatever the cause or whoever the perpetrator, workplace violence is not to be accepted or tolerated. Sanctions will include immediate termination for perpetrators and possible criminal charges if applicable.

Workplace violence includes acts of physical violence, abuse (verbal or physical), bullying, intimidation, or other threatening behavior that occurs in the workplace. For the purposes of this policy, workplace includes ANY location in which employees and/or volunteers are engaged in agency business activities necessary to perform their assignments. This includes, but is not limited to, agency buildings, employee/volunteer parking lots, employee/volunteer organized social events, field locations, patients' homes, and during business related travel.

Bullying is any offensive, cruel, intimidating or humiliating behavior that includes physical violence or the threat of physical violence. It can be physical or verbal, direct or indirect such as gossip. Bullying is considered harassment in general, unless there is physical contact or a threat of violence, where it is considered violence.



A number of different actions in the work environment can trigger or cause workplace violence. It may even be the result of non-work related situations such as family crises, alcohol or drug abuse, financial pressures, or legal difficulties. Workplace violence can be inflicted by an abusive employee, volunteer, supervisor, manager, co-worker, patient, family member or even a stranger. However, there is no sure way to predict human behavior, and while there may be warning signs, there is no specific profile of a potentially dangerous individual. The best prevention comes from identifying any problems early and dealing with them.

Expectations of ALL Employees and Volunteers:

- Being familiar with all applicable policies, procedures and programs affecting violence in the workplace.
- Reporting any threats, physical or verbal, and/or any disruptive behavior of any individual to the appropriate supervisor/manager.
- Taking all threats seriously.
- Being familiar with any local procedures for dealing with workplace threats and emergencies.
- If you witness an act of workplace violence in progress or if an individual becomes violent and your safety is at risk, leave the area immediately and call 911 or the emergency medical service number in your area.
- First aid and/or medical attention shall be provided as required through a designated First Aid Attendant, local medical care facility or the individual's attending physician.
- Inform your supervisor/manager and/or as applicable, a member of the agency's safety team or committee, of any incident that you have witnessed.

Expectations of Supervisors and Managers:

- Informing employees and volunteers of applicable policies, procedures and programs affecting violence in the workplace.
- Ensuring that employees and volunteers know specific procedures for dealing with workplace threats and emergencies, and how to contact police, fire, and other safety and security officials.
- Ensuring that employees and volunteers with special needs are aware of emergency evaluation procedures and have assistance (as necessary) regarding emergency evacuation situations.
- Responding to potential threats, escalating situations and incidents of violence by utilizing proper resources from the following: first aid providers, local law enforcement and medical services, human resources staff, and as applicable, the agency's safety team or committee.
- Ensuring that all incidents of violence in the workplace are documented as outlined by agency procedure using the applicable form.
- In consultation with Human Resources, determining whether sufficient evidence exists to justify taking disciplinary action or discharging the employee/volunteer once the investigation of any misconduct is complete.
- Taking all threats seriously.



Performance Management Policy

PURPOSE

The agency is committed to developing a trauma-informed, responsive and educated workforce. As such, it is the policy of the agency to evaluate the performance of each employee for the following purposes:

- To identify the areas of strength in performance for employees with the hope to develop peer mentoring opportunities.
- To identify the areas requiring improvement in performance.
- To identify training opportunities that may assist the employee's professional development.
- To establish the employee's eligibility for a merit pay increase.
- To establish goals and a work plan for the coming year.

PHILOSOPHY

Having trauma-informed, educated and responsive staff is a key component to a trauma-informed agency. All performance management activities will be delivered in a transparent, collaborative, trust-building, mutual and safe environment.

RESPONSIBILITY

It is the responsibility of all employees to participate in the performance management process annually, as described in this policy.

GUIDELINES

Employees Responsibilities:

1. Fill out the self-appraisal form and submit it to their supervisor one week before the assigned performance appraisal meeting.
2. Fill out the supervisor-appraisal form and submit it to their supervisor's supervisor one week before the assigned performance appraisal meeting.
3. Attend the performance appraisal meeting.
4. Review the final draft of the performance appraisal
5. Document in writing any objections to the performance appraisal and send to the supervisor within one week of the performance appraisal meeting.



Supervisors Responsibilities:

1. Schedule the private, confidential performance appraisal meeting with at least two weeks' notice to the employee.
2. Fill out the employee-appraisal form and bring it to the performance appraisal meeting including a plan of action for any item marked as unsatisfactory.
3. Discuss both the self-appraisal and employee-appraisal forms with the employee and document any changes to be made to the final draft. Provide the employee with the final draft of their appraisal within 24 hours of the performance appraisal meeting.
4. Once the final draft and any written objections are received, forward all documents to executive director and human resource director for final review and decision on merit increase.



Professional Development Policy

PURPOSE

The agency is committed to developing a trauma-informed, responsive and educated workforce in order to deliver effective, efficient, respectful, and person-centered services. As such, it is the policy of the agency to provide staff training and provide opportunities for additional professional development with specific focus on trauma-informed competencies.

PHILOSOPHY

Having trauma-informed, educated and responsive staff is a key component to a trauma-informed agency. A comprehensive professional development policy acknowledges that every employee is critically important to the implementation of trauma-informed care and ensures that each staff member is equipped to advance trauma-informed approaches throughout the agency.

RESPONSIBILITY

It is the responsibility of the QI/Training Director to ensure that all staff and volunteers adhere to this policy.

GUIDELINES

Training and Development Plan

In alignment with the agency values of innovation and excellence, continuous learning of employees is encouraged. A training and development plan and budget is established annually. All staff and volunteers are required to adhere to the training and development plan. Required annual training for staff and volunteers include, but are not limited to:

- Trauma-Informed Care Values.
- Trauma-Specific Strategies and Services.
- Cultural Competence Training.
- Staff Roles in Developing a Safe and Secure Work Environment.
- Trauma-Informed Supervision.
- Patient-Centered Care and Prioritizing the Voice of Lived Experience.

Workshops, Conferences and Training

Additionally, an annual budget is established to pay for staff development, workshops, conferences and other training opportunities for staff that relate to increasing staff knowledge, abilities and behaviors related to trauma-informed care.



Staff wishing to attend a workshop, conference or training opportunity will submit a written request to their direct supervisor including dates, costs, and goal of attendance. The supervisor will consult with their direct line manager and human resources prior to registration in order to ensure that adequate funds are available and that all staff have an opportunity for staff development.

Tuition Reimbursement

Employees enrolled on their own time in a course related to their professional responsibilities may apply for full or partial reimbursement of course costs. Application must be made in writing to the supervisor before the beginning of the course. Reimbursement, if approved, will be made upon proof of successful completion of the course. Each request will be judged on its own merit and will be subject to availability of funds.



Rewards and Recognition Policy

PURPOSE

The reward and recognition policy outlines the philosophy and guidelines to reward and recognition when performance meets or exceeds expectations. It emphasizes that dedicated staff are key to building a safe and supportive workplace environment and should be recognized for their efforts. Additionally, the policy underscores that the agency prioritizes a work environment that is mutual and collaborative and values each staff member's contributions.

PHILOSOPHY

Rewards and recognition will be implemented in a transparent, mutual, collaborative and safe environment. Rewards and recognition shall be respectful and equitable.

RESPONSIBILITY

It is the responsibility of all employees to participate in the reward and recognition plan as described in this policy.

GUIDELINES

The agency has established an Employee Rewards and Recognition Program, applicable to virtually any situation, and flexible enough to take individual preferences into account. The process will be transparent and eligibility criteria will be clearly explained to all staff. Specifically, the Employee Rewards and Recognition Program has been designed to:

- Foster a spirit of “one for all and all for one”.
- Reinforce organizational values, behaviors and operating principles.
- Support the Total Rewards Employment Model.
- Recognize outstanding contribution by individuals and by teams.

This plan applies to all staff (permanent, part-time, contract, etc.)

The objectives of the Employee Reward and Recognition Program are:

- To foster a “thank you” culture overall that recognizes employees’ day-to-day mutual and collaborative actions.
- To tangibly reward employees in a small way (i.e. on a very small budget) on a close to real-time basis.
- To highlight the behaviors the organization would like to see emulated by other employees.
- To reassure employees that while management appreciates employees’ ongoing commitment to the goals of the organization, they especially value when employees go above and beyond expectations.



Recognition

Recognition simply involves saying thank you, either verbally or in writing (by email or with a thank you card). In keeping with the trauma-informed culture of the agency and in response to employees' preferences, individual recognition is done privately and team recognition is done publicly. Should "A" wish to publicly thank "B," "C," and "D" at a staff meeting, "A" must advise the meeting chair of their intentions ahead of time. For either public or private recognition, should "A" wish to purchase one or more thank you card(s) or other rewards, they will be reimbursed from petty cash, as per the Purchasing Guidelines.

Reward

A reward can be any gift, within established guidelines, that staff would most appreciate. Reimbursement details for reward gifts are outlined in the agency's Purchasing Guidelines. When "A" would like to thank "B" with a reward, "A" must nominate "B" according to the "Nomination Process" below and using the "Reward Nomination Email Template" below. As with recognition, rewards are to be presented privately if there is a single recipient, but can be presented publicly if there are two or more recipients.

Nomination Process

1. "A" would like to reward "B" for significant efforts. "A" must determine if anyone else was involved. If so, "A" must ensure that all people involved in the project are included in the reward. "A" discusses the desire to nominate with the appropriate manager.
2. "A" determines the type of reward and the monetary value and emails the "Reward Nomination" to their functional manager, "C," ensuring all steps have been completed.
3. "C" presents the nomination to the management team for approval.
4. If due diligence is met (fits the scope for reward and/or recognition, within budget, nomination approved), "C" informs "A" of the approval of the nomination via a response to the nomination email. If nomination is not approved, "C" will respond to the email nomination with the reason the nomination was not approved.
5. If approved, "A" obtains the reward and presents it privately.
6. "A" ensures that the reward nomination email string is printed and given to the HR Director for the personnel file of the rewarded employee(s).
7. "A" gets reimbursed as per Purchasing Guidelines.



A reward can be any gift, within established guidelines, that staff would most appreciate. Reimbursement details for reward gifts are outlined in the agency's Purchasing Guidelines.



Reward Nomination Email Template

Subject: Reward Nomination

Dear "C",

I would like to recognize and reward _____ for _____
Recipient(s) (Describe the behavior exhibited by the Recipients)

I recommend a reward of _____ I estimate the cost to be _____.
(Examples: a book, plant, flowers, team lunch, etc.)

I would like to present this reward _____.
(Privately to the individual upon approval, publicly to a team at the next staff meeting, other, etc.)

I have consulted with the appropriate manager(s) and have ensured that everyone involved has been considered for recognition/reward and that they agree to the method of presentation.

Email signature of nominator