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Workplace Bullying and Harassment Policy Template — British Columbia

British Columbia • Canada

Last updated August 13, 2026 • Free PDF template

Template use notice

This policy is a general drafting resource, not legal advice or a guarantee of compliance. Confirm the governing jurisdiction, replace every square-bracketed field, remove drafting notes, customize workplace-specific hazards and controls, complete every required consultation, assessment, posting and training step, check sector-specific requirements, and obtain qualified legal advice before adoption. Laws may change after August 13, 2026.

Prepared for employer customization and implementation.

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Workplace Bullying and Harassment Policy Template — British Columbia

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Important use notice

This is a rigorous drafting template, not legal advice or a promise of legal immunity. The governing jurisdiction depends on the workplace and undertaking; federally regulated status depends primarily on the undertaking, not simply the employee's physical location. Laws, regulator interpretations and sector-specific rules may change after the last-updated date.

Before an employer issues or relies on this policy, it must:

1. confirm that this is the correct jurisdiction and check all sector-specific requirements;
2. replace every square-bracketed field and delete all drafting notes;
3. complete all legally required consultation, joint development, assessment, posting, availability and training steps;
4. insert workplace-specific hazards, controls, reporting recipients, emergency contacts and support services;
5. reconcile the policy with collective agreements, contracts, privacy, human rights, accessibility, professional, child/vulnerable-person, whistleblower and other applicable rules;
6. obtain qualified jurisdiction-specific legal advice for its operations and workforce; and
7. keep evidence of approval, communication, training, investigation, corrective action and every required review.

Legal requirement identifies a rule expressly reflected in cited occupational health and safety legislation. Regulator-stated expectation or adopted code method identifies official guidance or an approved code method. Enhanced control identifies a stronger administrative practice and is not represented as a statutory rule unless the policy expressly says otherwise.

Quebec is intentionally excluded. Do not use this template for a Quebec workplace.

Workplace Bullying and Harassment Prevention Policy and Procedures

1. Policy identification

Field	Required entry
Employer / locations	[Legal name / locations]
Responsible executive	[Name/title]
Primary recipient	[Name/title/secure channels]
Alternate recipient	[Where employer, owner, supervisor or primary recipient is alleged]
Effective date / annual review date	[Dates]
Worker/supervisor instruction completed	[Date / record location]

2. Statement and scope

[Employer] does not accept or tolerate workplace bullying and harassment. Consistent with Workers Compensation Act s. 21(1)(a) and s. 21(2)(e), it will ensure health and safety, provide necessary information, instruction, training and supervision, take reasonable steps to prevent or minimize bullying and harassment, respond to every report or observation, investigate appropriately, correct substantiated conduct and address risk revealed even where a complaint is not substantiated.

The policy applies to workers, supervisors, managers, owners, directors, contractors, volunteers and third parties. It covers conduct with a work connection at or away from a physical workplace, including client sites, remote work, vehicles, travel, accommodation, training, conferences, employer events and digital or social-media communication.

Under WorkSafeBC policy, bullying and harassment includes inappropriate conduct or comment by a person toward a worker that the person knew or reasonably ought to have known would cause the worker to be humiliated or intimidated. It excludes reasonable action taken by an employer or supervisor relating to management and direction. Section 13 of the Human Rights Code prohibits employment discrimination; harassment connected to a protected characteristic, including sexual harassment, may constitute that discrimination. This policy also prohibits such conduct and disrespectful conduct that may fall short of the statutory OHS test.

Examples include verbal aggression, insults, threats, humiliating initiation, cyber-bullying, malicious rumour, repeated exclusion, work sabotage, offensive or discriminatory images/jokes, unwelcome sexualized comment/contact/advance, stalking, misuse of authority and retaliation. Reasonable good-faith feedback, investigation, scheduling, work allocation, evaluation, discipline or organizational change is not bullying and harassment when performed respectfully; abusive delivery can be prohibited.

3. Duties

The employer will publish the policy statement; prevent/minimize risk; provide reporting routes including an alternate route; maintain response procedures stating how and when investigations occur, their content and roles; provide follow-up, corrective measures and timing; keep records; inform and train workers and supervisors; review annually; and ensure employer representatives do not engage in prohibited conduct.

Supervisors must not bully or harass; apply the policy; act on observed/known conduct; receive reports without judgment; escalate; protect immediate safety and evidence; cooperate; and prevent retaliation. Workers must not engage in bullying/harassment; report conduct they experience or observe; apply these procedures; complete instruction and cooperate. Deliberate witness interference or retaliation violates the policy.

4. Prevention

At annual review and after a material incident/change, [Employer] evaluates culture, public/client contact, isolated work, young/new/vulnerable workers, power imbalance, remote/digital channels, work organization, prior reports and third-party risk. Controls may include role/workload clarity, respectful-leadership expectations, client conduct notices, contract clauses, moderation/access controls, physical security, check-ins, staffing, de-escalation and early conflict support.

Improper activity by a worker is addressed under OHS Regulation ss. 4.24–4.26 and the bullying-and-harassment duties. Violence by a person other than a worker is addressed under the distinct violence-prevention requirements in ss. 4.27–4.31 and [violence program location], including risk assessment, procedures/policies/instruction and warning duties where applicable. Threats and family violence presenting physical-injury risk must be routed to those controls as well as this policy. In immediate danger, move to safety, call 911/local emergency services, use [security procedure] and seek medical/first aid assistance.

5. Reporting

Report promptly, orally or in writing, to [primary recipient]. If the allegation concerns the employer, owner, supervisor, primary recipient or anyone who could influence the process, report to [alternate independent recipient]. A report may be made by an affected worker or witness, through a representative where appropriate. A written form is helpful but not mandatory.

Include, if available: what occurred; exact words/actions; dates, times and locations; people involved/witnesses; related emails/messages/images/records; impact; steps already taken; and safety/accommodation/support needs. A late, incomplete or anonymous report is assessed, not automatically rejected. Supervisors must transmit reports the same day or as soon as practicable.

6. Employer response and interim measures

Enhanced control: acknowledge within 2 business days. The recipient screens emergency/violence, conflict, reprisal, accommodation, privacy and evidence risks; explains the process and limits on confidentiality; preserves records; and decides interim measures. No-contact directions, reporting/schedule changes, paid leave, security, remote work or temporary reassignment must be neutral, proportionate and reviewed at least every 30 days. The affected worker should not bear an adverse change unless requested or necessary for safety.

The employer may address low-level conduct through coaching or voluntary facilitated resolution only if doing so is safe, fair and consistent with its duty to investigate/respond. A worker need not confront the person. Serious, repeated, sexual, discriminatory, violent, retaliatory or power-imbalanced matters ordinarily require formal investigation.

7. Investigation procedure

The responsible executive appoints an impartial person with appropriate knowledge and experience, external where independence, complexity or credibility requires it. Written terms of reference identify allegations, policy/legal tests, scope, decision-maker, deliverable, privacy and target schedule.

The investigator will notify parties of allegations; explain representation/support options; interview separately; collect relevant records; give the respondent a meaningful opportunity to answer; test significant conflicting evidence fairly; assess credibility by reliable neutral factors; and make findings on the balance of probabilities. An investigation need not replicate a court hearing, but must be even-handed and sufficiently thorough for the circumstances. Retaliation allegations are included or investigated separately. Enhanced target: 90 calendar days, with written reasons and monthly status updates if longer.

The report records the mandate, allegations, process, relevant facts, credibility reasoning, findings and risk/corrective recommendations. The employer keeps investigation and follow-up records securely. Parties receive a closure summary stating whether the complaint was substantiated in whole/in part/not substantiated and the corrective or preventive action relevant to them, subject to privacy and employment law. The full report and specific discipline are not automatically disclosed.

8. Correction, follow-up and consequences

Actions may include direction, education, coaching, facilitated repair, apology where voluntary, monitoring, work or policy redesign, accommodation, security/access controls, reassignment, discipline up to termination, contract remedies or exclusion of a third party. The employer assigns owners/deadlines and checks effectiveness at roughly 30, 90 and 180 days. Broader hazard controls may be implemented without disclosing identities.

An allegation not proven on the available evidence is not false or malicious. Knowingly fabricating material evidence may be addressed only after separate fair review. Good-faith reporting, participation, support-seeking and use of statutory rights are protected from reprisal.

9. Privacy, records, training and review

Information is limited to those who need it for safety, investigation, decision, correction, advice or law. Participants may speak to a representative, support person, health professional, regulator or legal adviser and make legally protected reports. Case records are kept separate from routine personnel files with role-based access. Enhanced retention: policy/annual review/training records for the life of the policy plus 7 years; case files for 7 years after closure, subject to a longer litigation hold or shorter legally required privacy disposition.

Workers and supervisors receive instruction on recognizing, responding to and reporting bullying/harassment, the alternate channel, investigation process, privacy, bystander action and reprisal. Supervisors and recipients receive additional intake, interim-measure and procedural-fairness training. The employer reviews this policy and procedures at least annually and after an incident, legal change or identified deficiency; review input and decisions are documented.

Regulatory watch-list, not current law: WorkSafeBC published proposed OHS Regulation Part 4.1 amendments for consultation closing at 4:30 p.m. on Friday, October 9, 2026. They are not incorporated into this policy unless and until legally enacted. The policy owner will check the final disposition and revise this policy if required.

This policy does not limit contact with WorkSafeBC, the BC Human Rights Tribunal, police, a union, workers' compensation, a privacy regulator or a court/tribunal, or any lawful refusal/grievance/complaint.

British Columbia authoritative sources

- WorkSafeBC OHS Policy P2-21-2 — Employer duties regarding bullying and harassment
- WorkSafeBC OHS Policy P2-22-1 — Worker duties regarding bullying and harassment
- WorkSafeBC OHS Policy P2-23-2 — Supervisor duties regarding bullying and harassment
- Workers Compensation Act — Part 2, Division 4 duties
- OHS Regulation, Part 4 — General Conditions
- WorkSafeBC consultation — proposed new Part 4.1 on harassment and violence
- WorkSafeBC — Bullying and harassment
- British Columbia Human Rights Code

Operational schedules and forms

These schedules form part of this British Columbia policy unless governing law requires a different process. They have been separated and specialized for this jurisdiction. A jurisdiction-specific rule overrides a generic target. Do not issue blank schedules as if they were completed controls.

Mandatory British Columbia schedule preset

Insert this policy's express consultation, posting/availability, investigation, notice, training, review and companion-violence rules; never replace them with generic 90-day, annual or 7-year enhanced defaults.

Schedule A — Pre-issue implementation certificate

The accountable officer and implementation lead must initial each item and attach evidence.

Control	Evidence / location	Accountable person	Date complete
Correct jurisdiction and employment regime confirmed	[Legal analysis]	[ ]	[ ]
Sector-specific OHS, employment, professional and reporting rules checked	[Memo/checklist]	[ ]	[ ]
Required consultation or joint development with the workplace party identified in this policy completed	[Minutes/signatures/decision record]	[ ]	[ ]
Workplace-specific harassment and, where applicable, violence assessment completed	[Schedule B]	[ ]	[ ]
Primary and genuinely independent alternate recipients appointed, trained and conflict-screened	[Appointment/training]	[ ]	[ ]
Emergency, security, domestic/family violence, first-aid and support procedures linked	[Links]	[ ]	[ ]
Collective agreements and representation rights reconciled	[Labour-relations review]	[ ]	[ ]
Privacy, monitoring, recording, access and retention rules reviewed	[Privacy review]	[ ]	[ ]
Disability, language, literacy, cultural and technology accessibility tested	[Accessibility test]	[ ]	[ ]

Control	Evidence / location	Accountable person	Date complete
Third-party contracts, visitor/client rules and multi-employer coordination updated	[Clauses/protocol]	[ ]	[ ]
Policy signed, dated, posted/made available and version-controlled	[Copy/screenshots]	[ ]	[ ]
Workers and role-holders trained; competency checked	[Schedule I]	[ ]	[ ]
Case system, evidence preservation, privilege protocol and reporting calendar live	[System test]	[ ]	[ ]
Review triggers and statutory reports entered in compliance calendar	[Calendar record]	[ ]	[ ]

Certification: We have not treated publication as implementation. Based on the attached evidence, the selected policy is customized, consulted on, communicated, trained and operational at the workplaces listed.
Senior officer: [Name/signature/date]
Implementation lead: [Name/signature/date]
Required workplace party acknowledgement: [Name/role/signature/date; acknowledgement is not a waiver of disagreement]

Schedule B — Workplace harassment and violence hazard assessment

Complete separately for each materially different workplace, work group or remote/camp setting. A check mark alone is not an assessment; document evidence, people consulted and control effectiveness.

B1. Assessment metadata

Field	Entry
Workplace / positions / activities	[ ]
Assessment date / review trigger	[ ]
Employer assessors	[ ]
Worker-side participants	[ ]
Information reviewed	[Anonymized occurrence data, surveys, inspections, absence/ turnover, exit themes, security records, sector experience]

Field	Entry
Privacy safeguards	[How identities were excluded]

B2. Risk inventory and action plan

Rate likelihood and consequence using the employer's approved risk matrix. Psychological, sexual and discriminatory harm must not be discounted because no physical injury occurred.

Risk factor / scenario	Persons or roles exposed	Existing controls	Evidence control works	Likelihood	Consequence	Residual rating	Additional control, owner, due date
Leadership style, incivility, power imbalance or fear of reporting	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Workload, unclear roles, change, discipline, layoff or labour dispute	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Public, patient, student, client, customer, resident or family interaction	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Lone, remote, mobile, home, camp, travel or employer-lodging work	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Night work, cash/valuables, controlled goods, service refusal or enforcement	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Sexual harassment, gender-based violence or intimate-partner/family violence	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Protected-ground harassment, accommodation conflict or hate activity	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

Risk factor / scenario	Persons or roles exposed	Existing controls	Evidence control works	Likelihood	Consequence	Residual rating	Additional control, owner, due date
Young, new, temporary, migrant, precarious, disabled or otherwise vulnerable workers	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Email, chat, video, monitoring, AI, shared systems or social media	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Third parties, multiple employers, contractors or unclear site control	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Small-community, language, cultural, family/ kinship or conflict-of-interest constraints	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Prior incidents, repeat locations/ persons, weak investigations or unimplemented recommendations	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

B3. Control hierarchy and sign-off

For every high or critical risk, document why elimination is not reasonably practicable before relying only on policy or training. Consider elimination/substitution of the triggering activity; engineering/physical/digital controls; staffing/work-design/administrative controls; training/supervision; and emergency/support measures. Identify residual risk communicated to workers and the minimum necessary threat information.

Approved controls and funding: [ ]
Unresolved joint/consultation issues and governing resolution process: [ ]
Next review date or earlier triggers: [ ]
Signatures/decision record: [ ]

Schedule C — Report / notice of occurrence form

Use of this form is optional unless law requires particular information. Accept oral, accessible-language, representative-assisted and alternative-format reports.

C1. Reporter and people involved

- Reporter name/contact (optional for a witness where law permits anonymous notice): [ ]
- Person allegedly affected / preferred safe contact: [ ]
- Person(s) whose conduct is at issue / role / employer, if known: [ ]
- Witnesses or people with relevant information: [ ]
- Representative, interpreter, support or accommodation requested: [ ]
- Is any normal reporting recipient involved or conflicted? [Yes/no/details]

C2. Occurrence

- Date(s), time(s), physical/virtual location(s) and platform(s): [ ]
- Exact words, actions, displays, messages, gestures, contact or threats, in chronological order: [ ]
- Why the conduct was unwelcome or its health/safety/work impact: [ ]
- Related protected characteristic, sexual conduct, violence or domestic/family violence concern, if the reporter chooses to identify it: [ ]
- Was anyone told the conduct was unwelcome? [Optional; a “no” does not invalidate the report]
- Prior related occurrences/reports and response: [ ]

C3. Evidence, safety and outcome sought

- Emails, chats, images, audio/video, documents, access/security records, notes or other evidence and where preserved: [ ]
- Immediate or continuing danger; weapons; stalking; self-harm; medical/first-aid concern; contact with police/security: [ ]
- Reprisal, evidence-loss, conflict, privacy, housing/transport or immigration/precarity concern: [ ]
- Interim measure, support, accommodation or communication preference requested: [ ]
- Resolution preference, recognizing the employer may still have a duty to investigate/correct: [ ]

Accuracy: I believe the information is true and complete to the best of my knowledge. I understand the employer will share information only as necessary for safety, a fair process, corrective action or law and cannot promise absolute secrecy.
Signature / recorded oral confirmation / date: [ ]
Received by / date/time / channel / case number: [ ]

Schedule D — Recipient intake, safety and conflict checklist

Complete immediately and update whenever risk changes.

1. Jurisdiction and coverage: confirm governing law, workplace, worker status, former-worker rule and any sector-specific or collective-agreement process.
2. Emergency triage: imminent danger; medical/first aid; suicide/self-harm; sexual assault; child/vulnerable-person duty; weapon; stalking; domestic/family violence; police/security; serious-incident reporting; scene/evidence protection.
3. Conflict screen: recipient, investigator, decision-maker, counsel, representative, interpreter, senior leadership, family/community or reporting relationships. Record actual, potential and perceived conflicts and mitigation.
4. Acknowledgement: date due under law; actual date; policy/process/representation/external-right information provided; accessibility/language confirmed.
5. Evidence hold: identify custodians, platforms, auto-delete periods, CCTV/access retention, devices, notes, social media, work records and preservation owner. Preserve proportionately and lawfully; do not conduct overbroad surveillance.
6. Interim measures: risk addressed; party views considered; least prejudicial effective measure; pay/benefits/accommodation maintained; decision-maker/reasons; communication; 30-day review date.
7. Supports: EAP/medical/counselling/sexual-violence/community/culturally safe/union/legal/accommodation contacts offered without requiring a finding.
8. Process route: threshold review, required investigation, possible voluntary resolution, parallel criminal/regulatory/grievance process, privilege decision and statutory reporting.
9. Communications: safe channels, no-contact rules, status-update cadence, media/public-contact control where lawful, and no promise of exact discipline or absolute confidentiality.
10. Case plan: allegations/issues list, investigator/decision-maker, terms of reference, target dates, statutory deadline, review/report recipients and corrective-action owner.

Recipient signature/date: [ ]
Supervisor notification limited to need-to-know: [ ]
Next safety review: [ ]

Schedule E — Investigation terms of reference and mandatory protocol

E1. Appointment and independence

- Case number / appointing authority / governing policy and legislation: [ ]
- Investigator name, qualifications, role-specific legal/investigation training and secure contact: [ ]
- Written conflict declaration and continuing duty to disclose: [ ]
- Parties' input/selection process and any regulator order: [ ]
- Investigator decides facts and policy breach unless law/terms assign otherwise; employer decides discipline/corrective action.
- Legal privilege, if legitimately claimed, must be defined at the outset and not used to conceal a statutory report that must be disclosed.

E2. Allegations and scope

List each allegation separately: who; what; when/where; policy/statutory test; and whether retaliation, systemic failure, violence or protected-ground harassment is included. Scope changes require written reasons and notice sufficient for fairness. The investigator does not decide unrelated performance or credibility issues merely because they arise.

E3. Fair procedure

The investigator will:

1. provide each party a plain-language process explanation, allegations and a meaningful opportunity to participate;
2. arrange disability, trauma, language, cultural, scheduling and technology accommodations without compromising neutrality;
3. permit an appropriate union/other representative or support person, subject to non-interference and confidentiality;
4. interview separately, ask open and testing questions, obtain names/sources, and allow corrections to interview summaries;
5. collect relevant proportionate evidence and maintain an evidence log with source, date, authenticity and access history;
6. give the responding party sufficient particulars and a fair opportunity to answer;
7. put material adverse or contradictory evidence to the affected party before relying on it, while protecting safety and nonessential identity information;
8. assess relevance, reliability, consistency, plausibility, contemporaneous records, motive to misstate and corroboration without relying on myths about trauma, delayed reporting, disability, culture or demeanor;
9. apply the balance of probabilities unless governing law requires otherwise, decide each allegation separately and distinguish “not substantiated” from “false”; and
10. report facts, reasoning and recommendations within the governing deadline or documented enhanced target, with regular status updates.

No participant may secretly record an interview. The investigator may authorize recording with informed agreement, security controls and a retention plan. The employer will not require broad access to personal devices/accounts without lawful necessity and proportionality.

E4. Report structure

1. mandate, independence and legal/policy framework;
2. allegations and applicable tests;
3. procedure, participants, accommodation and limitations;
4. evidence considered and not obtained;
5. undisputed/material facts;

6. credibility and reliability analysis tied to evidence;
7. finding and reasons for each allegation;
8. retaliation, systemic risk and immediate safety findings;
9. corrective/preventive recommendations, owners or priorities where within mandate; and
10. appendices/evidence index, with redaction/version controls.

Target date / statutory final date / update cadence: [ ]
Required report copies and outcome notices: [ ]

Schedule F — Investigation quality and credibility worksheet

Do not use numerical scoring as a substitute for reasoning.

Issue	Complainant evidence	Respondent evidence	Other evidence	Reliability/credibility analysis	Finding and reason
Allegation 1	[ ]	[ ]	[ ]	[ ]	[ ]
Allegation 2	[ ]	[ ]	[ ]	[ ]	[ ]
Retaliation	[ ]	[ ]	[ ]	[ ]	[ ]
System/control failure	[ ]	[ ]	[ ]	[ ]	[ ]

Quality checks:

- Were material contradictions put to the person affected?
- Were messages/records assessed in full context and authenticated sufficiently?
- Were trauma, disability, language, culture and power considered without stereotyping?
- Was demeanor given little or no weight unless specifically reliable and explained?
- Was each conclusion tied to evidence and the correct policy/legal definition at the time?
- Were intent and impact treated according to the applicable test?
- Were management-action exclusions examined for reasonableness, good faith and method?
- Were broader internal conduct standards kept distinct from statutory findings?
- Were exculpatory evidence and investigation limitations addressed?

Schedule G — Outcome notice templates

Adapt to the jurisdiction. Never use this template to disclose less than an express statutory outcome requirement.

G1. Notice to complainant / principal / allegedly affected worker

Private and confidential — Case [ ]
We investigated the report received on [date] concerning [brief neutral description]. The investigation was conducted by [role/name where appropriate] under [policy/law]. You had an opportunity to provide information and respond to material issues.

Result for each allegation: [substantiated / substantiated in part / not substantiated / unable to determine, only if policy/law permits, with the specific result description the jurisdiction requires]. [Concise reasons or findings summary required for a meaningful result notice, without unnecessary personal information.]

Corrective or preventive action taken or to be taken that may be disclosed: [specific measures relevant to the result; do not promise or reveal confidential discipline beyond what law requires]. The employer will monitor completion and retaliation. Report any concern to [channel]. Available supports/accommodations are [ ]. This notice does not restrict external legal rights listed in the policy.

G2. Notice to respondent / alleged harasser

Private and confidential — Case [ ]
Result for each allegation: [ ]. Corrective expectations/actions applicable to you: [ ]. Any discipline is communicated in a separate employment letter where appropriate. Retaliation, contact contrary to interim/final directions, and interference are prohibited. Questions about compliance go to [ ]. This notice does not restrict representation or legal rights.

G3. Closure acknowledgement

Control	Entry
Statutory recipients and method/date	[ ]
Full report distribution authority	[ ]
Redactions/minimum-necessary review	[ ]
Corrective action tracker opened	[ ]
Interim measures continued/varied/ended with reasons	[ ]
30/90/180-day follow-ups scheduled	[ ]
Records classified and disposition date/legal hold	[ ]

G4. Fixed reporting and outcome calendar

Jurisdiction / authority	Calendar control
British Columbia	Enter this policy's actual statutory or adopted timing; a blank or the generic 90-day target is not a legal determination.

Schedule H — Corrective action and effectiveness tracker

Finding / hazard	Immediate action	Systemic corrective action	Owner	Due date	Completion evidence	Worker-side consultation required/ completed	Effectiveness measure / 30-90-180 day result	Residual risk / escalation
[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

Corrective action must address both individual conduct and enabling conditions. Possible indicators include repeat reports, affected-area climate, control use, training comprehension, turnover/absence themes, security events and completion audits. Do not measure success by “zero complaints” alone; under-reporting can produce that number.

Schedule I — Training standard and record

I1. Minimum curriculum

All-person training is workplace-specific and covers:

1. policy commitment, legal/internal definitions and reasonable-management boundary;
2. discriminatory, sexual, gender-based, personal, third-party and virtual harassment examples;
3. violence/domestic-family-violence overlap and emergency assistance;
4. workplace-specific hazards and controls;
5. reporting, alternate/independent channels, anonymous information and evidence preservation;
6. what happens after a report, interim measures, representation, investigation and outcomes;
7. confidentiality limits, lawful support/external reporting and prohibition on reprisal;
8. bystander options that do not require unsafe intervention;
9. accommodation, language, cultural and trauma-informed access; and
10. scenario practice and a documented comprehension check.

Supervisors/recipients receive additional training on duty to act without a formal complaint, emergency triage, domestic violence, conflict screening, intake, no promise of secrecy, neutral interim measures, evidence holds, procedural fairness, outcome communications, corrective action and record/reporting duties. Investigators meet the law-specific qualification rules.

I1A. Mandatory British Columbia training override

- British Columbia: apply this policy's training rule and any general OHS training duties. Treat any curriculum or timing that the policy labels as enhanced as an enhanced control rather than statutory wording.

I2. Record

Learner / role	Course/version and jurisdiction	Date / duration / delivery	Instructor/ qualification	Completion	Competency result / remediation	Next due date
[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]

Schedule J — Policy and program review record

Review element	Evidence considered	Finding	Revision/action	Owner/due date
Legal and regulator change since last review	[ ]	[ ]	[ ]	[ ]
Required consultation/joint development completed	[ ]	[ ]	[ ]	[ ]
Policy available, accessible and correct version posted	[ ]	[ ]	[ ]	[ ]
Recipients independent, trained and adequately resourced	[ ]	[ ]	[ ]	[ ]
Assessment and controls current/effective	[ ]	[ ]	[ ]	[ ]
Occurrence themes, repeat areas, time to acknowledge/close	[ ]	[ ]	[ ]	[ ]
Interim measures fair and reviewed	[ ]	[ ]	[ ]	[ ]
Investigation quality and outcome notices compliant	[ ]	[ ]	[ ]	[ ]

Review element	Evidence considered	Finding	Revision/action	Owner/due date
Corrective actions implemented/effective	[ ]	[ ]	[ ]	[ ]
Reprisal, support and accommodation outcomes	[ ]	[ ]	[ ]	[ ]
Training coverage and comprehension	[ ]	[ ]	[ ]	[ ]
Records, retention, privacy, statutory reporting	[ ]	[ ]	[ ]	[ ]
Remote/virtual, third-party and domestic-violence risks	[ ]	[ ]	[ ]	[ ]

Review trigger / legal deadline: [ ]
Participants and disagreements: [ ]
Approval / communication / retraining dates: [ ]
Next scheduled and event-triggered review rules: [ ]

Schedule K — Case record index and access protocol

Record category	Custodian/system	Access roles	Legal basis/purpose	Minimum retention / disposition	Hold or disclosure restriction
Original report / oral intake confirmation	[ ]	[ ]	[ ]	[Jurisdiction rule/ enhanced period]	[ ]
Safety/conflict/interim decisions	[ ]	[ ]	[ ]	[ ]	[ ]
Evidence and interview records	[ ]	[ ]	[ ]	[ ]	[ ]
Investigator report / versions	[ ]	[ ]	[ ]	[ ]	[ ]
Outcome notices	[ ]	[ ]	[ ]	[ ]	[ ]
Corrective-action evidence	[ ]	[ ]	[ ]	[ ]	[ ]
Training/consultation/ review	[ ]	[ ]	[ ]	[ ]	[ ]
Statutory reports	[ ]	[ ]	[ ]	[ ]	[ ]

Access is not granted merely because a person is a supervisor or executive. Every access/export is need-to-know, logged where practical, securely transmitted and limited to the minimum necessary. A privacy request, grievance, litigation hold, regulator order, police request or legal disclosure is routed to [privacy/legal lead]; no routine deletion occurs while a valid hold applies.

K1. Minimum British Columbia retention preset

Jurisdiction / record	Minimum used in this template
British Columbia case files	Use this jurisdiction's express rule, if any; otherwise use the policy's expressly labelled 7-year enhanced period, adjusted by a documented privacy, limitations and legal-hold analysis.

Do not destroy records merely because a listed minimum expires. Apply the authorized disposition schedule, privacy minimization requirements and any litigation, grievance, regulator, workers' compensation or preservation hold.

Canada Policy Manual

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