FREE POLICY TEMPLATE

Canada Policy Manual • canadapolicymanual.com

Workplace Harassment Prevention Policy Template — Manitoba

Manitoba • 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.

Download free • No account required

Workplace Harassment Prevention Policy Template — Manitoba

Published by: Canada Policy Manual
Jurisdiction: Manitoba
Last updated: August 13, 2026
Document status: Published public template — approved for publication by Canada Policy Manual on August 13, 2026
Canonical page: https://canadapolicymanual.com/free-policies/workplace-harassment-policy/manitoba

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 Harassment Prevention Policy

1. Document control

Field	Required entry
Employer / workplaces	[Legal name / locations]
Consulted party	[Committee / H&S representative / workers; date and record]
Complaint recipient	[Name/title/secure channels]
Alternate independent recipient	[For allegations involving normal channel or senior leadership]
Effective date / annual enhanced review date	[Dates]
Posted at	[Physical and electronic locations]

This written policy was developed in consultation with [applicable party] and will be complied with by [Employer] and every person under its direction. It will be posted conspicuously at each workplace and made accessible to remote workers and workers requiring an alternate format.

2. Rights, commitments and scope

Every worker has a right to work free of harassment. [Employer] will, so far as reasonably practicable, ensure no worker is subjected to harassment and will take corrective action against any person under its direction who harasses a worker. Names and circumstances will remain confidential except as necessary to investigate, take corrective action or comply with law. This policy does not discourage or prevent any other legal right, including a complaint to the Manitoba Human Rights Commission.

The policy applies to workers, supervisors, managers, directors, owners, contractors, volunteers and work-related third parties. It covers the workplace and conduct connected to employment, including remote work, travel, client sites, employer-provided lodging, training, conferences, social functions and digital communications.

3. Definition and examples

For Manitoba workplace-safety purposes, harassment means “(a) objectionable conduct that creates a risk to the health of a worker; or (b) severe conduct that adversely affects a worker's psychological or physical well-being.” Under s. 1.1.1, conduct is objectionable only when it is based on race, creed, religion, colour, sex, sexual orientation, gender-determined characteristics, marital or family status, source of income, political belief/association/activity, disability, physical size or weight, age, nationality, ancestry or place of origin. Conduct is severe when it could reasonably cause a worker to be humiliated or intimidated and is repeated, or when a single occurrence has a lasting, harmful effect on a worker. These are alternative branches of the regulatory definition; protected-ground conduct must not be incorrectly merged with the separate severe-conduct test. The current wording in ss. 1.1 and 1.1.1 of the Workplace Safety and Health Regulation governs.

The internal policy also prohibits sexual harassment; bullying; abusive or threatening language; malicious rumour; degrading jokes, images or gestures; cyber-harassment; stalking; repeated exclusion; work sabotage; hazing; unwanted sexual comment/contact/advance; sexual benefit or reprisal; and poisoned-environment conduct. Intent is not required where a reasonable person would recognize the likely effect.

Reasonable management action concerning assignments, scheduling, assessment, performance, investigation, discipline, attendance, safety or restructuring is not harassment when undertaken lawfully and respectfully. Unreasonable, discriminatory, retaliatory or abusive methods remain prohibited. Ordinary disagreement is not automatically harassment but may require respectful-work intervention.

4. Responsibilities and prevention

The employer provides resources, consults the required workplace party, posts and implements the policy, provides information, instruction, training and supervision under WSH Act s. 4(2)(b), assesses psychological and violence risks, acts on known conduct, investigates, corrects hazards and protects against reprisal. Under WSH Act ss. 2(1)(c) and 2(3), the Act aims to enable workers to work in a psychologically safe workplace—one in which workers' psychological well-being is promoted and active measures are undertaken to prevent negligent, reckless or intentional harm to that well-being. That wording was added by S.M. 2025, c. 26, effective June 3, 2025. Any risk assessment required under the Act or regulations must be made by a competent person under s. 4(2)(d.1). Supervisors model respectful conduct, intervene, receive/escalate reports, protect immediate safety and evidence, implement controls and do not conduct conflicted investigations. Workers refrain from harassment, report experienced or observed conduct, cooperate and preserve privacy.

At least annually as an enhanced control, and after material change or incident, [Employer] evaluates prior concerns, organizational culture, staffing/workload, power imbalances, public contact, isolated or remote work, digital channels, workforce diversity and third-party behaviour. Controls may include work-design changes, staffing, client conduct terms, access/security measures, role clarity, early conflict resources and supervisor coaching.

Manitoba's separate violence-prevention requirements apply to prescribed workplaces and any other workplace where a required assessment identifies violence risk. Where applicable, [violence policy/program location] forms a companion to this policy. In immediate danger, move to safety, call 911/local emergency services, use [alarm/security procedure], and obtain first aid or medical help.

5. Complaint and report procedure

A worker or witness may report orally or in writing to [recipient] or, if that route is implicated or reasonably perceived as conflicted, [alternate recipient]. A manager who becomes aware of possible harassment must report it and the employer may proceed without a formal complaint. A worker is not required to confront the alleged harasser or first attempt informal resolution.

Provide, if known: the people involved; specific conduct/words; dates, locations and frequency; witnesses; documents/messages/images; impact; steps already taken; and immediate support, safety or accommodation needs. No mandatory form or legal terminology is required. Late, incomplete and anonymous information is assessed on what can fairly be investigated.

Enhanced response standard: acknowledge within 2 business days; promptly assess emergency, reprisal, conflict, accommodation and evidence risks; explain process, privacy limits, representation and external rights; and preserve time-sensitive records. Interim measures may include no-contact directions, reporting/schedule/location changes, remote work, security, paid leave or reassignment. They are non-disciplinary, proportionate, reviewed at least every 30 days and should not disadvantage the reporting worker.

6. Informal resolution and investigation

Coaching, facilitated discussion or mediation may be offered only when voluntary, safe and suitable. Informal resolution is normally unsuitable for violence, severe/repeated conduct, serious sexual or discriminatory harassment, coercion, retaliation or a material power imbalance. A settlement cannot prevent legally required correction or a protected external report.

The employer will investigate every complaint to the degree appropriate in the circumstances. An impartial, competent internal or external investigator receives written terms of reference, identifies each allegation and policy test, notifies parties, permits appropriate representation/support, interviews separately, gathers records, gives the responding person sufficient particulars and an opportunity to respond, gives parties a fair chance to address material conflicting evidence, assesses credibility neutrally and makes findings on the balance of probabilities.

Enhanced target: completion within 90 calendar days, unless documented complexity, availability, parallel process or accommodation requires longer; parties receive monthly status updates. The report records allegations, process, material evidence, findings, reasoning and corrective recommendations. Legal advice and discipline deliberations may be maintained separately.

As the procedure adopted under s. 10.2(2)(c), [Employer] will inform the complainant and alleged harasser of investigation results. Each receives a written closure summary stating substantiated in whole/in part/not substantiated and corrective/preventive steps relevant to them, without unnecessary personal or disciplinary details. Part 10 requires the policy to explain how results will be communicated; this paragraph is [Employer]'s binding procedure, not a claim that Part 10 independently prescribes a written results notice. The full report is not automatically disclosed.

7. Correction, reprisal, privacy and records

Corrective action may include direction, education, coaching, monitoring, apology/restorative work where voluntary, accommodation, work redesign, reassignment, security or contract controls, discipline up to termination, and removal of third-party access. Systemic controls may be required even if individual harassment is not proven. Actions have owners/dates and effectiveness checks at roughly 30, 90 and 180 days.

Retaliation, intimidation, adverse scheduling, ostracism, threat, evidence interference or a retaliatory complaint because a person reported, participated, supported another or exercised a legal right is prohibited and investigated separately. An allegation that is unsubstantiated is not bad faith. Knowingly fabricating material information may be addressed only through a separate fair process.

Information is disclosed only to investigate, correct, protect safety, obtain advice or meet law. This does not prevent consultation with a representative, adviser, health professional, regulator, police or support person or any protected disclosure. Under WSH Act s. 41.2, a harassment investigation report itself is excluded from the general requested-report disclosure rule; however, on request, the employer must provide the committee, representative or, if neither exists, a worker with a summary of the harassment investigation results that omits the circumstances and all identifying information. Files are access-controlled and kept outside routine personnel files; final discipline may be placed in the proper employment file. Enhanced retention is 7 years after closure for case files and the life of the policy plus 7 years for policy, consultation, training and review records, subject to privacy law and litigation hold.

8. Training, review and other rights

Under the general information, instruction, training and supervision duty in WSH Act s. 4(2)(b)—rather than an express Part 10 training rule—all workers receive orientation and refresher instruction on definitions, examples, reporting routes, investigation, privacy, supports, bystander action and reprisal. Supervisors and recipients receive additional training in intake, immediate response, interim measures, human rights, procedural fairness and record security. Training content, dates, attendance and competency confirmation are retained.

Although Part 10 does not prescribe a universal fixed review interval, [Employer] adopts annual review and immediate review after a legal change, incident, repeated pattern or procedure failure. The committee, representative or workers are consulted on material revisions. This policy does not limit contact with Workplace Safety and Health, the Manitoba Human Rights Commission, police, Workers Compensation Board, a union/arbitrator, privacy regulator or a court/tribunal. The Province's 2025 WSH Act Review Committee report states, as regulator interpretation rather than express Part 10 wording, that Workplace Safety and Health addresses statutory compliance but does not investigate the underlying harassment allegation; the employer remains responsible for that investigation. A reprisal referral to a safety and health officer is ordinarily subject to the six-month limit in WSH Act s. 42.1, so prompt advice is important.

Manitoba authoritative sources

- Workplace Safety and Health Regulation, M.R. 217/2006 — Part 10
- The Workplace Safety and Health Act
- The Workplace Safety and Health Amendment Act, S.M. 2025, c. 26
- Manitoba Workplace Safety and Health Act Review Committee Report (2025)

- The Human Rights Code

Operational schedules and forms

These schedules form part of this Manitoba 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 Manitoba 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]	[ ]	[ ]

Control	Evidence / location	Accountable person	Date complete
Privacy, monitoring, recording, access and retention rules reviewed	[Privacy review]	[ ]	[ ]
Disability, language, literacy, cultural and technology accessibility tested	[Accessibility test]	[ ]	[ ]
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	[ ]

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

Risk factor / scenario	Persons or roles exposed	Existing controls	Evidence control works	Likelihood	Consequence	Residual rating	Additional control, owner, due date
Sexual harassment, gender-based violence or intimate-partner/ family violence	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
Protected-ground harassment, accommodation conflict or hate activity	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]	[ ]
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	[ ]

Control	Entry
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
Manitoba	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 Manitoba training override

- Manitoba: 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	[ ]	[ ]	[ ]	[ ]

Review element	Evidence considered	Finding	Revision/action	Owner/due date
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	[ ]	[ ]	[ ]	[ ]
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	[ ]	[ ]	[ ]	[ ]	[ ]

Record category	Custodian/system	Access roles	Legal basis/purpose	Minimum retention / disposition	Hold or disclosure restriction
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 Manitoba retention preset

Jurisdiction / record	Minimum used in this template
Manitoba 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

This free template is published by Canada Policy Manual. To build and download a complete jurisdiction-specific workplace policy manual, create an account.

Build your complete policy manual

This free template covers one policy. Create an account to build, customize and download a complete jurisdiction-specific Canadian workplace policy manual.

Create your account at canadapolicymanual.com/login