



FREE POLICY TEMPLATE

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Workplace Harassment Prevention Policy Template — Nunavut

Nunavut • Canada

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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.

Jurisdiction notice

The official Nunavut consolidation pages warn that their consolidations are not up to date. The master discloses the remaining R-041-2025 verification limitation; obtain the Gazette text before employer adoption.

Prepared for employer customization and implementation.

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Jurisdiction-specific currency warning: The official Nunavut consolidation pages warn that their consolidations are not up to date. The master discloses the remaining R-041-2025 verification limitation; obtain the Gazette text before employer adoption.

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. Policy record

Field	Required entry
Employer / work sites	[Legal name / sites]
Consulted party	[Committee / representative / workers; record/date]
Primary / alternate recipients	[Secure details]
Languages / accessible formats	[English/French/Inuktitut/other as operationally required]
Effective / enhanced annual review dates	[Dates]
Ready-access locations	[Locations/formats]
Mining operation applicability review	[Yes/no and separate legal review]

This written policy was developed and implemented in consultation with [committee/representative/workers] and is readily available to every worker in a language/format they can understand. A mine operator must separately confirm Nunavut mine-safety legislation; the WSCC Code supports best practice but the statutory route differs.

2. Commitment, scope and definition

Every worker is entitled to work free of harassment. [Employer] will make every reasonable effort to prevent it, correct any individual who harasses, investigate fairly, inform parties of results and preserve other legal rights.

It applies to workers, supervisors, managers, owners, directors, contractors, volunteers and work-related third parties and covers physical/remote work, travel, camps/employer lodging, community/client sites, vehicles, training, events and digital communication.

Under Nunavut OHS Regulations s. 34, harassment is a course of vexatious comment or conduct at a work site known or ought reasonably to be known to be unwelcome and constituting a threat at the work site to worker health or safety. It requires repetition or a single serious occurrence with a lasting harmful effect. Reasonable management/direction is excluded.

This policy also prohibits discriminatory, sexual and personal harassment described in the WSCC Code, including inappropriate conduct that harms well-being, is known/ought to humiliate/intimidate, or threatens health/safety. Examples include threats, abuse, degrading or discriminatory comments/displays, malicious gossip, hazing, stalking, cyber-harassment, exclusion, sabotage, unwanted sexual comment/contact/advance, sexual coercion/benefit and retaliation.

3. Duties and culturally safe prevention

The employer consults, implements/makes available, trains, acts on known risk, investigates, corrects and prevents reprisal. Supervisors model respect, receive/escalate reports, protect safety/evidence, apply interim controls and avoid conflicted investigations. Workers refrain, report experienced/observed conduct, cooperate and respect privacy.

At annual enhanced review and after incident/change, [Employer] considers Inuit societal values and culturally safe process without stereotyping; language/interpretation; small-community and family relationships; remote/camp work; housing/transport dependence; travel/weather/connectivity; public/client interaction; power imbalance; young/new workers; prior concerns and third-party risk. Controls include independent southern or regional reporting where needed, conflict screening beyond immediate supervisors, interpreters bound by confidentiality, alternative communication channels, staffing/check-ins, role clarity, client/contract rules, safe housing/transport and access/security. Separately, at a work site where a violent situation has occurred or could reasonably be expected to occur, OHS Regulations R-003-2016 s. 35 requires the employer to develop and implement a written policy to deal with potential violence, after consultation with the Committee or representative or, if neither is available, the workers, and to make it readily available. The s. 35 policy is conditional and is not labelled a “prevention plan” in the Regulation. It must be reviewed and, where necessary, revised at least every 3 years and whenever there is a change of circumstances that could affect the health or safety of workers. [Potential-violence policy, if required] satisfies that companion duty.

Immediate danger: move to safety, call local emergency/RCMP services, use [site/community emergency procedure] and obtain first aid/medical help. Delayed connectivity will never be treated as delayed good-faith reporting.

4. Complaint and initial response

Report orally or in writing to [recipient] or [alternate independent recipient] if the normal route is involved/conflicted. Reports may be in the worker's preferred available language and through an authorized representative/interpreter. A witness may report; supervisors must escalate. No confrontation, form or prior informal step is required.

Provide names, conduct/words, dates/locations/frequency, witnesses, records, impact and immediate needs if known. Anonymous, incomplete or delayed reports are assessed fairly. Enhanced target: acknowledge within 2 business days where connectivity permits, otherwise at the earliest practicable opportunity. Screen safety/violence, reprisal, conflict (including community/family relationships), language, disability/accommodation and evidence risks; explain process/privacy/representation/external rights; preserve records; and offer culturally appropriate support.

Interim no-contact, reporting/schedule/location change, security, remote work, housing/transport change, paid leave or reassignment must be neutral, proportionate, reviewed every 30 days and should not penalize the complainant.

5. Resolution, investigation and result

Informal or culturally grounded resolution is used only if freely chosen, safe and consistent with law; it is not required and is generally unsuitable for violence, serious sexual/discriminatory conduct, retaliation, coercion or major power imbalance. Elders/community processes are never imposed and do not replace investigation/correction duties.

An impartial competent investigator with conflict and cultural-context screening uses written terms; identifies allegations/tests; notifies parties; arranges qualified confidential interpretation; permits appropriate representation/support; interviews separately; gathers records; provides adequate particulars/response opportunity; lets parties address material conflicts; assesses credibility without cultural or language bias; and makes balance-of-probabilities findings. Enhanced target: 90 calendar days adjusted for travel/weather/interpretation only where necessary, with reasons and monthly updates.

The report records mandate, process, evidence, findings, reasoning and recommendations. The complainant receives a written or orally interpreted result summary and relevant corrective action, without unnecessary personal/disciplinary detail. The WSCC Harassment Code of Practice recommends communicating that summary to the complainant within 10 calendar days after the investigation concludes; this is Code guidance, not a deadline in s. 34. As an enhanced fairness commitment, [Employer] applies the same 10-calendar-day target to a written or orally interpreted result summary for the alleged harasser where that person is its worker. Action may include direction, education, coaching, voluntary restorative measures, accommodation, work/camp/housing/transport/security/contract redesign, reassignment, discipline up to termination and third-party exclusion. Owners/dates and 30/90/180-day follow-up are documented.

6. Privacy, reprisal, records, training and review

Names/circumstances are not disclosed except where necessary to investigate/take corrective action or required by law. Interpreters/support persons sign confidentiality commitments. Small-community knowledge is not consent to disclosure. Protected reporting, support, representation and medical/legal/regulatory consultation remain permitted.

Reprisal, threat, ostracism, adverse work/housing/transport action or evidence/witness interference is prohibited and separately investigated. Unsubstantiated is not bad faith. Files are access-restricted, separately stored and shared through secure channels. Enhanced retention: cases 7 years after closure; policy/consultation/training/review for active life plus 7 years, subject to privacy/legal hold.

Training is linguistically accessible and covers recognition, reporting alternatives, investigation, confidentiality, culturally safe bystander action, supports and reprisal. Supervisors/recipients receive role and conflict-screening training. Annual enhanced review occurs with the applicable workplace party and immediately after law/incident/change/procedure failure.

This policy does not limit contact with WSCC, Nunavut Human Rights Tribunal, police/RCMP, a union/arbitrator, Information and Privacy Commissioner, workers' compensation or court/tribunal.

Nunavut authoritative sources

- Nunavut Occupational Health and Safety Regulations, R-003-2016 — official consolidation page — the page warns that the consolidation is not up to date. R-007-2025 was verified as amending only s. 32(1)(a), not ss. 34–35; R-041-2025 is identified in the Gazette registration record but its amending text was not independently retrievable, so its effect on ss. 34–35 is not represented as verified.
- WSCC Harassment Code of Practice (NWT and Nunavut)
- Nunavut Safety Act — the official page also carries an outstanding-amendments warning; verify the Act's current consolidation before deployment.

Operational schedules and forms

These schedules form part of this Nunavut 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 Nunavut schedule preset

Treat the WSCC 10-day written-summary timing for the complainant as Code guidance, not a regulation deadline; the same target for a worker alleged to have harassed is this template's enhanced fairness control.

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]	[]	[]

Control	Evidence / location	Accountable person	Date complete
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]	[]	[]
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]
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	[]	[]	[]	[]	[]	[]	[]

Risk factor / scenario	Persons or roles exposed	Existing controls	Evidence control works	Likelihood	Consequence	Residual rating	Additional control, owner, due date
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	☐	☐	☐	☐	☐	☐	☐
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
Nunavut — WSCC Code	Communicate the investigator's written summary to the complainant within 10 calendar days after conclusion as recommended due-diligence guidance. The same target for a worker alleged to have harassed is this template's enhanced fairness commitment, not Code or regulation wording.

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

11. 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.

11A. Mandatory Nunavut training override

- Nunavut: 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.

12. 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
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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	☐	☐	☐	☐
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
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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 Nunavut retention preset

Jurisdiction / record	Minimum used in this template
Nunavut 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.

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