



## **INTRODUCTION TO SAMPLE PHYSICAL OR MENTAL ABUSE AND SEXUAL ABUSE, SEXUAL MISCONDUCT AND SEXUAL MOLESTATION PREVENTION POLICY**

**The attached physical or mental abuse and sexual abuse, sexual misconduct and sexual molestation (“PROHIBITED CONDUCT”) prevention policy is intended for the exclusive use of Selective Insurance Company of America’s, and its affiliated carriers’, insureds. The policy contains elements that are most often recognized as being components of a comprehensive and effective policy. You may use this policy, modify it or draft your own.**

**Federal, state and local laws/regulations may vary with respect to the elements that comprise prohibited conduct. This sample is only informational. It is not intended to be legal advice or a substitute for competent and independent professional advice from your organization’s personal or corporate attorney. We highly recommend that you consult with that attorney in order to insure that the policy that you ultimately adopt provides you with the broadest protection possible in the jurisdiction(s) in which you operate or otherwise conduct business.**

**You should also consult with your attorney in order to insure that appropriate disclaimers are included in the policy that your organization adopts; so as to preserve your rights in states that recognize the doctrine of “employment—at—will.”**

**Selective Insurance Company of America, on behalf of itself, its subsidiaries, parent and affiliated carriers (“Selective”), explicitly disclaims all warranties, express or implied, including any warranty of merchantability or fitness for a particular propose. Those who utilize this sample policy assume all liability with respect to its use or modification. Selective expressly disclaims any liability for any direct, indirect or consequential damages resulting from your use or modification of this sample policy.**

**If you decide to use the sample policy, make sure you pay attention to the “Reporting Procedure” provision so that it accurately identifies the responsible individuals in your organization and also identifies all state, local and national agencies to which you have a duty to report the actual or threatened physical, mental or sexual abuse and molestation.**

**While the adoption of a written policy is important, it is effective only when it is universally communicated to your employees and volunteers. In order to insure that the policy has been properly communicated, you should institute a protocol that requires these individuals to document in writing that they have received it, read it, have been given adequate training and agree to abide by the policy. Your protocol should include an annual review of the policy coupled with having existing and newly hired staff members sign the acknowledgment on an annual basis. These written acknowledgments should be maintained with your other important business records.**

**Using a written policy in conjunction with thorough screening and background checks of existing and prospective employees and staff members will help your organization reduce the likelihood of physical, mental or sexual abuse and molestation incidents.**

## **PHYSICAL or MENTAL ABUSE AND SEXUAL ABUSE AND SEXUAL MOLESTATION PREVENTION POLICY**

**[Insert name of organization]**: \_\_\_\_\_ does not permit actual or threatened acts of physical or mental abuse, sexual abuse, sexual molestation or sexual misconduct (“prohibited conduct”) to occur in the workplace or at any activity sponsored by or related to it. In order to make this “zero—tolerance” policy clear to all employees, volunteers and staff members, we have adopted mandatory procedures that employees, volunteers, family members, board members, individuals and victims must follow when they reasonably suspect, learn of or witness prohibited conduct.

Abuse or molestation means each, every and all actual, threatened or alleged acts of physical or mental abuse, sexual abuse, sexual molestation or sexual misconduct performed by one person or by two or more persons acting together.

### **Reporting Procedure**

All staff members who learn of, have a reasonable suspicion of prohibited conduct must immediately report it to **[insert title of employee(s) designated as responsible for receiving and initiating an investigation]**: \_\_\_\_\_. If the victim is an adult, abuse or neglect will be reported by this designee to the local or state police and/or Adult Protective Services (APS) Agency. If a child is the victim of abuse or neglect the designee will report it to the local or state police and/or Child Abuse Agency. Appropriate family members of the victim must be notified immediately of suspected child abuse or neglect.

### **Investigation & Follow Up**

We take allegations of prohibited conduct seriously. Once the allegation is reported we will promptly, thoroughly and impartially initiate an investigation to determine whether there is a reasonable basis to believe that the prohibited conduct has occurred and that it was committed by the target(s) of the investigation. The investigation may be undertaken by an internal team comprised of fellow employees or we may hire an independent third party. We will cooperate fully with any investigation conducted by law enforcement or regulatory agencies and we may refer the complaint and the result of our investigation to those agencies. We reserve the right to place the target(s) of the investigation on an involuntary leave of absence or reassigning that person to responsibilities that do not involve personal contact with individuals or students. To the fullest extent possible, but consistent with our legal obligation to report suspected prohibited to appropriate authorities, we will endeavor to keep the identity (ies) of the target(s) and the alleged victim(s) confidential.

If the investigation substantiates the allegation, our policy provides for disciplinary penalties, including but not limited to termination of the target’s relationship with our organization.

### **Retaliation Prohibited**

We prohibit retaliation against anyone, including an employee, volunteer, board member, student or individual, who in good faith reports prohibited conduct. Retaliation against a participant in the investigation is also prohibited.

Anyone who retaliates against someone who has made a good faith allegation of prohibited conduct or intentionally provides false information to that effect will be subject to discipline, up to and including termination.

**ACKNOWLEDGMENT OF RECEIPT OF PHYSICAL or MENTAL ABUSE  
Or SEXUAL ABUSE, SEXUAL MISCONDUCT and MOLESTATION POLICY**

I, \_\_\_\_\_, acknowledge that I have received and read the physical or mental abuse and sexual abuse, sexual misconduct and sexual molestation policy immediately preceding my signature below. I understand that I am bound to follow the policy and understand the consequences in the event that I fail to do so.

Dated: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Print Name of Employee/Volunteer**

**Signature**

Date(s) of Annual Review(s) (employee/volunteer to write date in his/her own handwriting)  
(Add additional sheets if necessary).

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