

FORM 552-1 – Sexual Misconduct Procedures, Checklist & Response Plan: Employees



Note: The person disclosing that they have experienced sexual misconduct is the complainant and the person against whom the allegations are made is the respondent.

Complainant's Name:		Work Location:	
Date of Incident:		Location of Incident:	
Phone Number:			

Procedures:

Once a report of sexual misconduct is received, the Principal or Supervisor **must** complete this **Appendix – Sexual Misconduct Procedures, Checklist & Response Plan: Employees** and submit it to the Director of Human Resources

1. Complete other processes, for example if the respondent is a student, complete a Baseline Digital Threat Assessment (BDTA), as advised by the Safe Schools Coordinator.

The District employee who receives the report will act in the following manner:

2. Support the complainant;
3. Provide compassion and understanding. Recognize that the complainant may have difficulty remembering details and may be delayed in coming forward with the allegations. This is normal when a traumatic event has occurred;
4. Listen without judgement;
5. Respect the rights of the complainant to choose the services they feel are appropriate, including their decision to make a report to the police or contact their union representative.
6. Let the complainant, respondent, third party or witnesses know of their right to and responsibility for confidentiality. Advise them that while their information is confidential, the School District is obligated to share it with certain agencies or persons such as the police, MCFD/Delegated Authorized Agencies and parent/guardian (as appropriate) and the respondent.

Administrative Checklist
Immediate Action by Principal or Designate

Actions to take:	Notes/Phone Numbers:	Done:
Receive/gather facts and basic information from the complainant.		☐
Ensure the safety of the complainant and determine if medical attention is required. Contact School Protection Plan to report an injury if applicable.	Call 911 if urgent police and/or medical attention is required	☐
Develop a Response Plan for the complainant. Do not return the complainant or the respondent(s) to work until the Response Plan, including workplace accommodations, have been established for the complainant.		☐
Contact the Director of Human Resources to determine an investigation plan and other supporting processes	School Board Office: 250-398-3800	☐
Advise complainant of the Employee and Family Assistance Program.		☐
Provide a contact number for the police.		☐
Provide the complainant and respondent (when applicable) the relevant areas of the collective agreement, and policies and procedures the District will follow. Provide a link or hard copy.		☐
Provide your contact information and establish meeting times (in person and by telephone) to ensure up to date communication and information with the complainant.		☐

Response Plan

Knowledge of this response plan should be determined on a “need-to-know” basis ensuring protection of privacy for the complainant. Do not return the complainant or the respondent to work until this plan is completed and has been communicated to all persons requiring knowledge of it. This document should be stored in a secure location designated by the Director of Human Resources.

Worksite Action Plan

Attain informed consent from the complainant to share this plan with co-workers or other employees, as deemed necessary and appropriate.	
Modify schedule, if appropriate.	
Alternate work location, if appropriate.	
Consult with police, if necessary.	

Specifics of the Worksite Response Plan:

Date of Plan: _____

Individuals Involved in Developing Response Plan

Supervisor Name:

Complainant Name:

Director of Human Resources or Safe Schools Coordinator Name:

List of other employees or positions that may need to participate in the implementation of this response plan:

Employee	Position

Response Plan Review:

Date:	
Time:	
Location:	