

CITY OF CORAL SPRINGS	
ADMINISTRATIVE POLICY MANUAL	
CHAPTER: 06 HUMAN RESOURCES POLICIES	POLICY #: 06.01.02
SECTION: 01 STANDARD OF CONDUCT	
SUBJECT: 02 SEXUAL HARASSMENT	
	OFFICE/DEPARTMENT: PERSONNEL
	EFFECTIVE DATE: 12/15/93
	CITY MANAGER: Tony O'Rourke
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PURPOSE

The City of Coral Springs is committed to providing a work environment that is free of sexual harassment. Actions, words, jokes or comments based on an individual's sex will not be tolerated. Sexual conduct (both overt and subtle) is a form of employee misconduct that is demeaning to another person, undermines the integrity of the employment relationship and is strictly prohibited.

Provisions are hereby established to provide for effective complaint procedures available to all employees for investigations of alleged sexual harassment. Violations of this policy will result in disciplinary actions up to and including termination. Further, it is the City's policy to act affirmatively to dissuade such practices through communication, training, and other appropriate methods to sensitize the employees to sexual harassment issues.

DEFINITION

Sexual Harassment is defined as unwelcome sexual advances, requests for sexual favors and/or other verbal or physical conduct of a sexual nature which creates a hostile or intimidating environment. Sexual harassment does not refer to occasional compliments of a socially acceptable nature or welcome social relationships. Unless the conduct is blatantly offensive, a single incident or remark does not generally create a hostile environment. Sexual harassment includes sexual advances and suggestions where:

1. Submission to such conduct is either an expressed or implied term or condition of employment.
2. Submission to or rejection of such conduct is used as a basis for an employment decision affecting the harassed person.
3. The conduct has the purpose or effect of interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment.

The policy prohibits behavior that is not welcomed by the employee and is personally offensive such as, but not limited to:

1. Sexual flirtations, advances or propositions.
2. Verbal abuse of a sexual nature, sexually related comments and joking, graphic, or degrading comments about an employee's appearance, or the display of sexual objects or pictures.
3. Any uninvited physical contact or touching, such as patting, pinching or intentionally brushing against another's body.

PROVISIONS

1. All levels of supervisors share responsibility for communicating this policy, for recognizing, responding and taking corrective actions, and/or preventing sexual harassment of City employees.
2. Employees who feel they are a victim of sexual harassment have an obligation and a duty to advise the individual instigating the sexual harassment that the conduct or behavior is unwelcome and offensive. If the behavior continues, the employee should immediately report the behavior to their own supervisor or Director of Human Resources. The individual instigating the sexual harassment may not necessarily be another employee, co-worker, or supervisor, but may also be any other person conducting business for or with City employees.

PROCEDURES

1. Employees should report their sexual harassment complaint immediately. The employee has the option of reporting the complaint as follows:
 - a. to their supervisor or department director, or
 - b. to the Director of Human Resources or Human Resources Department designee.
2. If the supervisor or department director is the person accepting the complaint, he or she will notify the Director of Human Resources of the complaint.
3. The Director of Human Resources will begin coordinating and conducting the investigation process in a timely manner. A written statement will be requested of the complainant.
4. The City will provide an administrative response in a timely and reasonable manner (within 30 days, if possible). The response will indicate corrective actions, if any, to the employee filing the complaint and to the individual(s) involved in the sexual harassment.
5. If the employee perceives the situation to be threatening, that employee may request authorization to use accrued

Annual Leave or Leave Without Pay or a job transfer. Approvals will be determined on a case by case basis.

6. Disciplinary and/or corrective actions shall be imposed based upon the severity of confirmed sexual harassment.
7. Confidentiality shall be maintained to the extent allowed by law to the persons involved in any investigation of a complaint. Unnecessary disclosures shall be prohibited.
8. Employees exercising their rights by filing a complaint in good faith will not be retaliated against by the City regardless of the findings of the investigation. However, any employee found to have provided false or misleading information or does not fully cooperate with an investigation when filing a complaint may be subject to disciplinary action.
9. Administrative operating procedures as determined by the Director of Human Resources for this policy shall be applicable.

ADMINISTRATIVE REPEAL

The provisions contained herein shall supersede and replace all prior City Sexual Harassment Policies.

Tony O'Rourke, City Manager

Date

EFFECTIVE DATE: POLICY NUMBER: 06.01.02

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CITY OF CORAL SPRINGS

EMPLOYEE COMPLAINT FORM
(Administrative Policy 06.01.02 "Harassment")

Please read the applicable procedures before completing this form.

Section I.

A. Employee Information

Employee's Name

Department Director

Title

Immediate Supervisor

B. Statement of Complaint (Be specific.)

Date _____ and _____ Time _____ of _____ Incident(s)

Name(s) _____ of _____ Witness(es) _____ or _____ other _____ Knowledgeable _____ Parties _____

Brief Description of Incident (Describe actions of all person(s) involved, including yourself. Attach additional pages if necessary.)

1. Has this incident happened before? ____Yes ____No, If yes, please explain

2. Are there any written notes kept by yourself on this incident? ____Yes ____No If yes, please explain.

3. Have you spoken to the person who instigated the harassment of this incident? ____Yes ____No Please explain.

4. Corrective Action Requested

Employee _____ Signature _____
Date _____ Time AM/PM _____

Section II. Complaint Received by (check one)

_____ Immediate _____ Supervisor:

_____ Name _____ and _____ Title _____
Date/Time _____

_____ Other _____ Supervisory _____ Level: _____
_____ Name _____ and _____ Title _____
Date/Time _____