

## **CARRIER:**

United States Liability Insurance Company

## **Developmentally Disabled — Nonprofit Social Services Supplemental Application**

DEVELOPMENTAL PROGRAMS, SHELTERED VOCATIONAL WORKSHOPS AND GROUP HOMES

1. Does the organization screen students for history of violence, aggression or sexual-related offenses?   yes   Nc   Nc   Are all bathroom facilities equipped with grab bars, non-slip surfaces and water temperature control devices?   yes   Nc   Nc   Nc   Nc   Nc   Nc   Nc   N		LEGI MENTALI NOGIO MIO, GINEETEN	EB VOOM INCHAE VVOI INCHAEL	37 HAD GIAGOI FIGHIEG			
Set the real swimming pool on-premises?     Yes   No.   No	1.	Does the organization screen students for history of violence, aggression or sexual-related offenses?				☐ Yes	☐ No
4. Does the organization have a formal evacuation plan in place, as well as clearly marked and illuminated exits?   Yes   No. Abuse and Molestation Coverage   Yes   No. Abuse and Molestation Concerns   Yes   No. Abuse and Molestation Concerns   Yes   Yes   No. Abuse and Molestation Concerns   Yes   Yes   No. Abuse and Molestation Program for employees/volunteers that includes a review of the organization's sexual abuse policy?   Yes   No. Abuse and Yes   Yes   Yes   No. Abuse and Yes   Yes	2.	2. Are all bathroom facilities equipped with grab bars, non-slip surfaces and water temperature control devices?				☐ Yes	☐ No
So Are services provided to any minors (persons under the age of 18 or 19 per provincial/territorial law)?    Abruse and Molestation Coverage	3.	Is there a swimming pool on-	premises?			☐ Yes	☐ No
Abuse and Molestation Coverage 6. Occurrence limit:	4.	Does the organization have a	a formal evacuation plan	in place, as well as clearly marke	ed and illuminated exits?	☐ Yes	☐ No
6. Occurrence limit:	5.	Are services provided to any	minors (persons under t	he age of 18 or 19 per provincial/	territorial law)?	☐ Yes	☐ No
7. Is there any off-site one-on-one interaction between staff and youth?  8. Are background checks, including sex-related and child abuse claims, required on all employees and volunteers?  9. Is there a formal pricetation program for employees/volunteers that includes a review of the organization's sexual abuse policy?  9. Is there a formal procedure in place to monitor and document interactions between employees/volunteers and clients?  9. Yes   No. Sheltered Vocational Workshop  11. Describe the services provided by this organization. Check all that apply:    Basic life skills   Cooking   Janitorial services   Laundry services   Light assembly   Woodworking   Office work   Packaging   Resident   Sewing   Woodworking   Woodworking   Woodworking   Office work   Packaging   Resident   Sewing   Sewing   Woodworking   Woodworking   Woodworking   Office work   Packaging   Resident   Sewing   Sewing   Woodworking   Woodworking   Packaging   Resident   Sewing   Resident   Sewing   Woodworking   Yes   No.	Abı	use and Molestation Coveraç	ge				
8. Are background checks, including sex-related and child abuse claims, required on all employees and volunteers?   Yes   No   No   No   No   No   No   No   N	6.	Occurrence limit:	Aggregate I	imit:			
9. Is there a formal orientation program for employees/volunteers that includes a review of the organization's sexual abuse policy?    Yes   No.   No.	7.	Is there any off-site one-on-one interaction between staff and youth?				Yes	☐ No
sexual abuse policy?	8.	Are background checks, including sex-related and child abuse claims, required on all employees and volunteers?				☐ Yes	☐ No
Sheltered Vocational Workshop  11. Describe the services provided by this organization. Check all that apply:    Basic life skills   Cooking   Janitorial services   Laundry services   Light assembly   Office work   Packaging   Resident   Sewing   Woodworking   Other (please describe):    12. Number of students enrolled in the day program:   13. Are all participants or a paren/legal guardian required to sign a waiver of liability/release of liability as a condition of participation?   Yes   No condition of participation of participation?   Yes   No condition of participation of participations associated with products for the transportation industry (train, automobile, truck or aircraft)?   Yes   No condition of participation of participation?   Yes   No condition of participation of participation?   Yes   No condition of participation of participation of participation of participation?   Yes   No condition of participation parti	9.					☐ Yes	□ No
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15. Are procedures in place to assure a proper teacher-to-student ratio?   Yes   No. 16. Do operations include woodworking or the use of power equipment or chemicals (except for cleaning chemicals)?   Yes   No. 16. Do operations include woodworking or the use of power equipment or chemicals (except for cleaning chemicals)?   Yes   No. 17. Number of beds at each facility:		condition of participation?				☐ Yes	☐ No
16. Do operations include woodworking or the use of power equipment or chemicals (except for cleaning chemicals)?  Residential Group Home or Overnight Workshop  17. Number of beds at each facility:  18. Are multi-sex (co-ed) occupancies permitted?  19. Does the organization provide 24/7 supervision by on-site staff?  20. Is cooking allowed in areas other than a shared or communal kitchen area?  21. Is smoking allowed inside or within 10 feet (3 metres) of the building?  22. Are there any adoptions or foster care services provided?  23. Are services provided to residents with a violent history?  24. Does the management of the facility have at least three years' prior experience managing a group home for the mildly handicapped?  25. Are smoke detectors in every living area and bedroom of the residence?  26. Are there more than eight beds at any one residential facility?  27. Does the organization provide medical treatment, detoxification or nursing services?  28. Does the organization provide services to residents with moderate, severe or profound intellectual disabilities, diagnosed mental disease or illness, or the inability to ambulate and live independently?  28. In "Yes", do all residential buildings meet the following criteria: no more than one story, less than 20 years old, 100% sprinklered and equipped with panic doors on all exits?  29. Does the organization operate a senior living facility?  20. Does the applicant own, operate or control any other properties?	14.	. Are there any operations associated with products for the transportation industry (train, automobile, truck or aircraft)?				☐ Yes	☐ No
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