

New Milford United Methodist Church

Safe Sanctuary Policy

PURPOSE

The General Conference of The United Methodist Church, in April 1996, adopted a resolution aimed at reducing the risk of child abuse in the church. The adopted resolution called for all churches to obey Jesus' mandate to welcome children as we would welcome him and to make all churches safe places for children to learn and grow. It affirmed that every local church shall have in place a policy for protecting children and youth. It is an important purpose of the members and staff of New Milford United Methodist Church and the Education Center (the "Church") to provide that safe and secure environment for preschoolers, children, youth and mentally handicapped persons entrusted to our care. We do this to encourage them and their families to grow in their relationship with God and one another. The following policy and procedures are for the protection of our preschoolers, children, youth, employees, volunteers and our entire church family at the Church.

SCOPE

This policy shall apply to all current and future workers, compensated and/or volunteer, who will have the responsibility of supervising, directing, coordinating, teaching and/or assisting the activities of preschoolers, children, youth, and mentally handicapped persons.

DEFINITIONS

For the purpose of this policy the following definitions shall apply:

1. "Children," "youth," and "minors" shall be defined as any individual *under* the age of eighteen (or whose mental capacity is that of a minor).
2. "Adult" shall be defined as any individual at least eighteen years of age.
3. "Worker" shall be defined as any adult who serves as a volunteer and/or paid person given the responsibility of working with or caring for minors.
4. "Child Abuse" shall be defined as physical, emotional, sexual, or ritual abuse or neglect of a minor.
5. "Criminal Background Check" ("CBC") is the procedure used to perform a national check of the background of adult employees and volunteer workers for criminal activity using the online product of Screen Now (Choice Point), or another national criminal records research service recommended by Guide One Insurance (www.GuideOne.com) or other qualified agency.

WHAT IS CHILD ABUSE?

The abuse of children and youth consists of 5 categories: physical, emotional, sexual, ritual abuse, and neglect.

Physical abuse: abuse in which a person deliberately and intentionally causes bodily harm to a child.

Emotional abuse: abuse in which a person exposes a child to spoken and/or unspoken violence or emotional cruelty.

Sexual abuse: abuse in which sexual contact between a child and an adult (or another older and more powerful youth) occurs.

Ritual abuse: abuse in which physical, sexual, or psychological violations of a child are inflicted regularly, intentionally, and in a stylized way by a person or persons responsible for the child's welfare.

Neglect: abuse in which a person endangers a child's health, safety, or welfare through negligence.

WORKER APPLICATION FORMS

All workers involved in activities or programs for minors of the Church will be required to complete Application and Screening Forms providing personal and confidential information necessary to perform security background checks and reference checks on each individual worker. All personal information voluntarily disclosed, the results of all security background and reference checks, or the refusal of any person to participate in a program or activity in lieu of such disclosure requirements, will be maintained in the strictest of confidence.

The Volunteer Application and Screening Form shall include the following attachments: Basic Procedures for Safe Ministry with Children and Youth; Code of Ethics/Covenant Statement; Application Form; Confidential Screening Form; Background Investigation Consent; Worker's Authorization and Release of References; Church Privacy Statement; Incident Checklist; Incident Report Form

WORKER ENLISTMENT PROCEDURE

After an application is received, prior employment and volunteer service and personal references will be checked. It is suggested that, at a minimum, personal references be telephoned and a written memorandum be made of the contents of those telephone conversations, and that prior employment and church service references be contacted in writing.

Any prospective worker that has prior incidents of sexual misconduct or child abuse should not be allowed to serve in any capacity where they would have contact with minors.

Criminal background checks *will* be performed on each worker after the applicant has signed a Background Investigation Consent form, and prior to being enlisted as a worker. After every five years a new criminal background check will again be performed.

Only members of the Confidential Screening Committee of the Church will have access to the criminal background check report. Each applicant will be given a signed copy of the Church Privacy Statement disclosing those officials who serve on the Confidential Screening Committee. Recommendations will be given by the Confidential Screening Committee to the Staff Parish Relations Committee, the Committee on Lay Leadership or other appropriate individual or committee as to the qualification of applicants.

Standard interview questions will be developed and used in personal interviews with applicants, after reviewing the application, checking all references, and receiving a criminal background check report. These interview sheets will be filled out with the results of the interview and kept in a secure, confidential supervisory file, together with the reference checks, the applications and the criminal background check report. A separate supervisory file will be maintained permanently on each employee and worker, whether paid or a volunteer.

At the applicant's request, the Church shall allow the applicant to review his/her criminal history record transcript at the Church, but in no event shall the Church allow the applicant to retain and/or copy of the transcript of his/her criminal background check.

BASIC PROCEDURE AND CODE OF ETHICS/COVENANT STATEMENT

All workers in all programs for children and youth will at all times observe the Church's Basic Procedures for Safe Ministry with Children and Youth, and all workers must agree to abide by the Church's Code of Ethics.

REPORTING AN INCIDENT OR ACCUSATION OF CHILD ABUSE

Connecticut law requires suspected abuse to be reported to a child abuse hotline when a caregiver has cause to suspect that child abuse or neglect has occurred. These laws focus on situations when the alleged abuser is a family member or other responsible persons (such as a church worker). When the alleged abuser is not a family member or other responsible person, the matter is not reportable to the hotline, but rather is for the criminal justice system. Determining whether or not an incident is reportable requires an investigation, which must be conducted immediately and a decision made virtually immediately and in no event longer than 24 hours after the first report of the incident.

DCF Hotline 800-842-2288

CONCLUSION

In all our ministries with children and youth, this congregation is committed to demonstrating the love of Jesus Christ so that each child will be "...surrounded by steadfast love, ...established in the faith, and confirmed and strengthened in the way that leads to life eternal." (Baptismal Covenant II, United Methodist Hymnal, p 44.)

PROCEDURES

These procedures are to be applied to all workers, paid or volunteer, who will work with the children and youth of the Church.

- All workers must be involved with the church for at least six months before having contact with minors.
- Two adults shall be present at all times during church sponsored programs and events. It is acceptable for there to be “floaters.” For example, it is acceptable to have one Sunday school teacher in a room as long as the door(s) remain open at all times and a “floater” is available. A floater is an individual who has also gone through the application process and moves or floats from room to room at unannounced times and intervals throughout the events.
- Leaders of the youth ministry shall be at least five years older than the oldest youth.
- People under the age of 18 will be allowed to assist adults however they cannot be left alone with youth nor will they count towards the two adult rule.
- The doors to rooms shall remain open at all times. If there is a window in a door which allows sight to the room, then the door may be closed. If there is a half door, the bottom half of the door may be closed while the room is occupied.
- During counseling sessions, the same rule to doors applies as above.
- A full description of what will be involved in a program and who will be supervising an event shall be made available to all parents prior to the event. For ongoing events such as youth groups, a periodic newsletter, email or other update will be sufficient to send to the parents.

In addition, the Church asks that parents do not leave their children unattended on the church grounds. This includes, but is not limited to the outdoor playgrounds and grass areas and Fellowship Hall. Parents should be sure they have identified what adults are in charge of an event and that they are present before leaving their children.

**NEW MILFORD UNITED METHODIST CHURCH
SCREENING FOR CHILDREN AND YOUTH VOLUNTEERS**

Thank you for volunteering to work with the Church to serve our children and youth. Your contribution is important and much appreciated. We ask that everyone who works with our children or youth read and sign the following Code of Ethics/Covenant Statement, and complete the attached Application and Screening Forms.

CODE OF ETHICS/COVENANT STATEMENT

The Book of Resolutions for the United Methodist Church states that we support “methods of education designed to assist every child toward complete fulfillment as an individual person of worth.” Adults who volunteer to work with our church children and youth are in a position of stewardship, and play a key role in fostering spiritual development of both individuals and community. It is, therefore, especially important that those in leadership positions be well qualified to provide the special nurture, care and support that will enable children and youth to develop a positive sense of self and spirit of independence and responsibility.

The relationship between young people and their leaders must be one of mutual respect, if this positive potential is to be realized. There are no more important areas of growth than those of self-worth and the development of a healthy identity as a sexual being. Adults play a key role in assisting children and youth in these areas of growth.

Children and youth can suffer damaging effects when they are abused or neglected, particularly when leaders engage in sexual conduct with young persons in their care. Therefore, it is expected that leaders’ behavior will respect the worth and dignity of each child and youth. To this end, leaders must refrain from any acts of abuse or neglect and from engaging in any sexual, seductive or erotic behavior with children and youth. They may not sexually harass or engage in behavior with children or youth which constitutes neglect or physical, emotional, or ritual abuse.

The Volunteer acknowledges by signing this statement that he or she understands and agrees to comply with this Code of Ethics/Covenant Statement. The Volunteer has read the Basic Procedures for Safe Ministry with Children and Youth and agrees to observe them in working with children and youth. The Volunteer agrees to be bound by the Policies and Procedures for the Prevention of Child Abuse of the Church. In addition, the Volunteer represents that he or she has filled out the attached Application and Screening Forms completely and truthfully, and agrees that in the event that he or she has been arrested for or charged in a court with any crime or offense involving a minor, he or she shall immediately notify the Pastor *and shall suspend his or her activities with children and youth of the Church.*

I have read and understand the above statements of position, expectations and actions.

Signature

Date

NEW MILFORD UNITED METHODIST CHURCH

**APPLICATION WORKERS WITH CHILDREN AND YOUTH:
VOLUNTEERS AND STAFF, PAID AND UNPAID**

Name: _____

Address: _____

Day phone: _____ Evening phone: _____ Cell phone: _____

Occupation: _____ Employer: _____

Current job responsibilities and schedule:

Previous work experience: _____

Special interests, hobbies, and skills: _____

Do you have your own transportation? _____ Do you have a valid driver's license? _____

Do you have liability insurance? (List policy limits and name of carrier) _____

Why would you like to volunteer as a worker with children or youth?

What qualities do you have that would help you work with youth?

Would you be available for periodic volunteer training sessions?

_____ No _____ Yes

Current or most recent employer information:

Company _____

Address _____

Supervisor _____ Tel. # _____

Dates employed _____

List churches/religious organizations you have attended regularly in the last 5 years:

<u>Church & Address</u>	<u>Type of volunteer work</u>	<u>Dates</u>
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List all other volunteer work and employment involving children or youth

<u>Organization</u>	<u>Address</u>	<u>Type of work</u>	<u>Dates</u>
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Two Non-Personal References (Do not list relatives)

1. Name:

Address:

Daytime phone:

Evening phone:

Relationship to reference:

2 Name:

Address:

Daytime phone:

Evening phone:

Relationship to reference:

Signature of Applicant

Date

NEW MILFORD UNITED METHODIST CHURCH

CONFIDENTIAL SCREENING FORM

This form will be reviewed by the Pastor, the Chair of the Confidential Screening Committee, and either the Lay Leader or the Chair of the Staff Parish Relations Committee. *Please answer each question candidly and completely. A "yes" answer will not necessarily disqualify a person from serving as a volunteer.* The form will be kept in a confidential file to protect your privacy.

Name (First, Middle, Last) _____

Address _____

Home Phone _____

Please circle "yes" or "no". If you answer "yes" to any of the following questions, please attach an explanation noting the date, nature and place of the incident involved, where the case was litigated or is pending, and the outcome or present status of the case.

1. Have you ever been convicted of, or pleaded guilty or no contest, to a criminal charge of sexual abuse, child abuse, child molestation, or child neglect, in this state or any other state or country?

Yes / No

2. Have you ever been convicted of, or pleaded guilty or no contest, to any other crime, whether a misdemeanor or a felony (including but not limited to drug-related charges, child abuse, other crimes of violence, theft, or motor vehicle violations)?

Yes / No

3. Are there any criminal proceedings pending against you?

Yes / No

4. Are you the subject of an indicated child abuse or maltreatment report in this state or any other state or country?

Yes / No

5. Have you ever had a lawsuit alleging actual or attempted sexual discrimination, sexual harassment, sexual exploitation or sexual misconduct, physical abuse or child abuse filed against you which resulted in a judgment entered against you, or was settled out of court, or was dismissed because the statute of limitations had expired?

Yes / No

6. Have you ever terminated your employment or service in a volunteer position, or had your employment or authorization to hold a volunteer position terminated, for reasons relating to allegations of actual or attempted sexual discrimination, sexual harassment, sexual exploitation, or sexual misconduct, physical abuse or child abuse?

Yes / No

7. Are you willing to provide transportation for children or youth?

Yes/No

If yes, please answer the following questions:

a. Has your driver's license ever been revoked or suspended?

Yes / No

b. In the past 3 years, have you been convicted of, or pleaded guilty to, any offense involving a moving vehicle violation in this state or any other state?

Yes / No.

c. Do you experience seizures of any kind?

Yes / No. If you answered yes, please indicate whether the seizures are controlled by medication.

d. Do you regularly take any medication that could affect your ability to drive?

Yes / No.

The information contained in this form is true to the best of my knowledge. I recognize my duty to update this information if I become aware that any answer I have given at this time becomes inaccurate in the future while I am working with the children or youth of the New Milford United Methodist Church ("the Church").

I authorize any references or churches listed in this application to respond to any inquiries from the Church regarding my fitness to work with children and youth, and I give my permission for the Church to conduct a background check. I further authorize the Church to question the churches and references I have listed regarding my character. To encourage them to speak freely and in consideration of the receipt and evaluation of this application, I hereby release any individual, church or reference, including record keepers and ministers, from any and all liability and responsibility arising from their actions made in good faith and without malice in response to inquiries from the Church.

To allow the Church to attain its goal of providing a safe environment for all who come to it, I authorize the Church to share information from this application, my references, and former churches on a need to know basis.

Signature

Date

**NEW MILFORD UNITED METHODIST CHURCH
AUTHORIZATION AND RELEASE OF REFERENCES**

The information contained in this screening form is correct to the best of my knowledge. I authorize any references to give you any information, including opinions, which they may have regarding my character and fitness for work with minors or the mentally handicapped. In consideration of the receipt and evaluation of this application by _____ United Methodist Church, I hereby release any individual, church, youth organization, charity, employer, reference, or any other person or organization, including record custodians, both collectively and individually, from any and all liability for damages of whatever kind or nature which may at any time result to me, my heirs, or family, on account of compliance or any attempts to comply with this authorization. I waive any right that I may have to inspect any information provided about me by any person or organization identified by me or my references in this screening form.

I further state that I have carefully read the foregoing release and know the contents thereof; and sign this release as my own free act. This is a legally binding agreement which I have read and understand.

Print Name _____ Date _____

Applicant's Signature _____

Print Witness Name _____ Date _____

Witnesses' Signature _____

NEW MILFORD UNITED METHODIST CHURCH

**THE RESPONSE PLAN:
CHECKLIST FOR RESPONSE TO INCIDENT OR ALLEGATION OF ABUSE
TO BE COMPLETED BY CLERGY/PROFESSIONAL STAFF PERSONS**

In the case of an allegation of child/youth abuse, the volunteer or clergy staff person who observes or to whom the information is given is required by the Church and by the state law to complete the tasks listed below. Date and initial as each step is completed. Note: If allegation is against the Senior Minister, the report should go to the chairperson of the Staff Parish Relations Committee and the District Superintendent.

Date: _____	Initial: _____	1. For clergy and paid professional staff: remove the accused from the situation and suspend the accused from duties involving children/youth.
Date: _____	Initial: _____	For volunteers: Remove the accused from the situation and immediately notify the closest available clergy/professional staff person who will suspend the accused. If the clergy/professional staff person to whom the allegation is reported is not the direct supervisor of the accused, the person reporting will inform the supervisor as soon as possible.
Date: _____	Initial: _____	2. Make written documentation of everything done and said. If the person reporting the allegation is a volunteer, both the volunteer and the clergy/professional staff to whom the volunteer has reported will document the procedures taken.

The procedures after this point will be administered by the Coordinator of the Response team, generally a ministerial staff person.

Date: _____	Initial: _____	3. Immediately notify the parents/guardians of the alleged victim and respond to their questions and concerns.
Date: _____	Initial: _____	4. Determine whether the incident requires immediately notification of state authorities.
Date: _____	Initial: _____	5. Immediately notify the minister in charge.
Date: _____	Initial: _____	6. Make written documentation of persons contacted and action taken to this point.
Date: _____	Initial: _____	7. The clergy/professional staff person will immediately call into action the Response Team to begin the internal and pastoral care process.
Date: _____	Initial: _____	a. notify the insurance carrier of the incident immediately and comply with its investigation, if any;
Date: _____	Initial: _____	b. cooperate with legal and state authorities in their

		investigations, if any;
Date: _____	Initial: _____	c. prepare a written statement and designate a spokesperson to respond to media inquiries;
Date: _____	Initial: _____	d. provide assistance to the alleged victim and his/her family in obtaining counseling or referral to a mental health professional, if needed; determine whether the alleged victim's counseling expenses can be reimbursed by the Church or the insurance carrier;
Date: _____	Initial: _____	e. respond to the needs of the families of the alleged victim and the accused to seek a redemptive solution for all involved;
Date: _____	Initial: _____	f. inform the affected volunteer(s) and paid staff members of the need for confidentiality, and;
Date: _____	Initial: _____	8. Consider and respond to the concerns of other parents.
Date: _____	Initial: _____	9. The director of the affected ministerial area will respond to the pastoral care concerns of persons within the department.
Date: _____	Initial: _____	10. Make written documentation of persons contacted and action taken.

**NEW MILFORD UNITED METHODIST CHURCH
INCIDENT REPORT FORM**

Name of worker observing or receiving disclosure of child abuse _____

Name(s) and Age(s) of Minor(s) _____

Date/place of initial conversation with/report from victim _____

Quote the child's first words verbatim: _____

Briefly describe what happened: _____

Name of person accused of abuse: _____

Relationship of accused to victim: _____

Were there any witnesses? yes no Names: _____

Signatures of witnesses (if possible): _____

Reported to pastor: Date/time: _____ Summary _____

Call to victim's parent/guardian

Date/time: _____ Spoke with: _____

Summary _____

Call to local children and family service agency:

Date/time: _____ Spoke with: _____

Summary _____

Call to local law enforcement agency:

Date/time: _____ Spoke with: _____

Summary _____

Other contacts:

Date/time: _____ Spoke with: _____

Summary _____

Signature of Incident Reporter _____ Date _____