

**SAFE SANCTUARIES POLICY**  
**FAITH UNITED METHODIST CHURCH**  
**Revised May 2019**



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**FAITH UNITED METHODIST CHURCH  
SAFE SANCTUARIES POLICY  
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**FAITH UNITED METHODIST CHURCH  
SAFE SANCTUARIES POLICY**



**Faith Church Believes in Families and Community**

***Our Lord has placed a high value on children and so do we.***

Jesus said, "Let the little children come to me, and do not hinder them, for the kingdom of God belongs to such as these." Mark 10:14

**The well-being of children, youth and all persons is important at Faith UMC.**

The high value and importance Faith UMC places on all persons is reflected in our vision and core values. Our church strives to provide "Safe Sanctuary" for all God's children. We are continually seeking ways to improve and better implement "Safe Sanctuary" procedures to protect our children, youth and vulnerable adults in order to make our congregation a safe place where everyone may experience the abiding love of God and fellowship within the community of faith. This includes children's check in/out procedures, training and background checks for those working with children, youth and vulnerable adults, restrooms equipped for older children and adults with special needs, sensory manipulatives, resources and partnership assistance availability, and procedures that guide the interaction of adults with children, youth and vulnerable adults.

Our congregation's purpose for establishing these Safe Sanctuary policies and procedures is to demonstrate our absolute and unwavering commitment to the physical safety and spiritual growth of all our children, youth and adults. Safe Sanctuary is a practice of radical hospitality, authenticity and an extravagant welcoming spirit.

Therefore, as a Christian community of faith and a United Methodist congregation, we strive to conduct our ministries in ways that assure the safety and spiritual growth of all persons as well as all of those who serve in our programs and ministries. We will follow reasonable safety measures in the selection and recruitment of workers; we will implement operational procedures in all programs and events; we will educate all of our workers with children, youth, and vulnerable adults regarding the use of all appropriate policies and procedures.

In all of our ministries, this congregation is committed to demonstrating the love of Jesus Christ so that each person 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).

<http://www.gbod.org/leadership-resources/safe-sanctuaries>

**I. PURPOSE**

People were bringing little children to him in order that he might touch them; and the disciples spoke sternly to them. But when Jesus saw this, he was indignant and said to them "Let the little children come to me; do not stop them; for it is to such as these that The kingdom of God belongs. Truly, I tell you, whoever does not receive the kingdom of God as a little child will never enter it. And he took them up in his arms, laid his hands on them, and blessed them." (Mark 10:13-16)

This incident from the ministry of Jesus speaks of the value our Lord placed on children and the example of faith that they provide for the rest of us. As followers of Jesus, we understand that all God's people are inherently valuable members of Christ's community.

Jesus highlighted not only the faith and openness of children, but also their vulnerability. This vulnerability puts children at risk, but it also places them close to God. Their dependence on God may be what Jesus was trying to get his disciples to see as a model for their own faith. This vulnerability and dependence makes the protection and support of the community of faith even more important. Jesus was teaching that, within the community of believers, there must be

protection for each of us in our dependence on God and on each other. As followers of Christ, we resolve to protect children in their vulnerability and also to learn from them as we all grow in the faith.

Our culture appears to be experiencing an increase in the incidence of child abuse and neglect. As much as we do not like to think about abusive and hurtful things happening in the church, it is clear that it is our duty as the Church to guard and protect the children, youth, vulnerable adults, church staff, members, and volunteers who participate in our ministries.

The purpose of the Safe Sanctuaries Policy of the Faith United Methodist Church is:

1. To provide procedures specifically designed to protect children, youth, vulnerable adults, church staff members, and volunteers associated with the activities of the church.
2. To establish appropriate ways of responding to alleged, reported, or suspected incidents of abuse.
3. To be in a compassionate ministry with the affected persons, the alleged victim, the alleged victim's family, the accused, the accused's family, and the church family.

We hereby resolve to put into practice the procedures set forth herein with the intent to:

1. Safeguard the children, youth, and vulnerable adults of our church from abuse and neglect.
2. Respond to all allegations in a fair and compassionate manner.
3. Protect church staff and volunteers from potential false allegations of abuse.
4. Limit the extent of our church's legal risk and liability.
5. Strengthen our faith formation ministries.

**The Safe Sanctuary Group**, which is part of Staff Parish Relations Committee, consists of the following persons: Pastor, Director of Administration and Finance, Spiritual Formation Director, Youth Director and lay members of the congregation. Persons serving on the group will participate in Safe Sanctuary training and background checks. The Safe Sanctuary Group shall develop ways of educating the congregation on abuse, its effects, and Faith United Methodist Church policies on screening, reporting abuse, and best practices that support our congregation's interactions with children, youth and vulnerable persons and desire to maintain a safe environment for all persons to grow in faith.

## **II. FOR THE PURPOSE OF THIS POLICY WE USE THE FOLLOWING DEFINITIONS:**

**Abuse** - The infliction of physical pain or injury or the willful deprivation of services necessary to maintain mental and physical health, by a caregiver or other person .

**Adult** - A person at least 18 years of age and graduated high school and at least 5 years older than those being supervised.

**Caregiver** - An individual who has responsibility for the care of a vulnerable person as a result of a family relationship, or who has assumed that responsibility voluntarily, by contract, or as a result of the ties of friendship.

**Child or Minor** - A person under 18 years of age

**Child abuse** consists of any of the following:

1. Engaging in any sexual activity with a child, as defined under Chapter 2907 of the Ohio Revised Code; or
2. Endangering a child, as defined in Section 2919.22 of the Ohio Revised Code\*\*; or
3. Denying, as a means of punishment, proper or necessary subsistence, education, medical care, or other care necessary to a child for the child's health; or
4. Using restraint procedures on a child that may cause injury or pain; or
5. Administering prescription drugs to a child without the written approval and ongoing supervision of a licensed physician; or
6. Providing alcoholic beverages or controlled substances to a child; or
7. Commissioning any intentional act that results in any injury or death to a child; or
8. Inflicting physical or mental injury that threatens to harm a child's health, welfare, or safety.

\*\*In its present form, this law defines "child endangerment" to include any of the following: (1) abuse; or (2) torture or cruel abuse; or (3) corporal punishment or other physical discipline (e.g., such as spankings) or prolonged cruel restraint, which is excessive under the circumstances, and which could likely physically injure the child; or (4) repeated, uncalled-for discipline which, if continued, would seriously impair the child's mental health or development; or (5) involving the child in any obscene, sexually-oriented, or nudity-oriented activity or conduct.

**EMPF** – Emergency Medical Permission Form

**Emotional Abuse** – The intentional or reckless infliction of emotional or mental anguish, or the use of a physical or chemical restraint, medication or isolation as punishment or as a substitute for treatment or care of any vulnerable person.

**Exploitation** – The expenditure, diminution, or use of the property, assets or resources of a vulnerable person without the express voluntary consent of that person or his or her legally-authorized representative.

**Financial Exploitation** – The use of deception, intimidation, undue influence, force or threat of force to obtain or exert unauthorized control over a vulnerable person's property, with the intent to deprive the vulnerable person of that property.

**Intern** – Paid or unpaid person including but not limited to choral scholars, choral conductors, Artist in Residence

**Neglect** – The failure of a caregiver or other person to provide reasonably adequate food, shelter, clothing, medical services, medication or health care for a vulnerable person.

**Ritual Abuse** – regular intentional physical, sexual, or psychological violations of a vulnerable person to appeal to a higher authority of power

**Staff Person** – Any person employed by the church.

**Volunteer** – A person eighteen (18) years of age or older who assists in conducting activities for vulnerable persons.

**Vulnerable Person**– Any child or youth, as well as any adult whose behavior indicates that he or she is mentally or emotionally incapable of adequately caring for himself or herself and his or her interests without adverse consequences to himself or herself or others, or who, because of physical or mental impairment, is unable to protect himself or herself from abuse, neglect, exploitation, sexual abuse, or emotional abuse by others.

**Safe Sanctuary** - A policy and guidelines developed to protect our vulnerable persons in order to make our congregation a safe place where everyone may experience the abiding love of God and fellowship within the community of faith. This includes children’s check in/out procedures, training and background checks for those working with vulnerable persons, and procedures that guide the interaction of children, youth and adults.

### III. SELECTION AND SCREENING OF CHURCH STAFF AND VOLUNTEERS

Although our Christian concern for children, youth and vulnerable adults leads us to be saddened when any form of child abuse takes place anywhere, our major policy need is to be certain that abuse does not occur within the framework of any Faith United Methodist Church program or ministry. This policy is intended to help our congregation make Faith United Methodist Church a truly safe and caring place.

In an effort to create a safe environment within our church, all church staff members, volunteers, and paid and unpaid interns including but not limited to Artist in Residence and Choral scholars who work either regularly or occasionally, on or beyond the church ground, will be screened and will be trained on Safe Sanctuary practices and procedures and abuse issues.

The procedure for selecting and screening is as follows: The Staff Parish Relations Committee may set additional screening and performance standards for paid staff.

1. Each person being considered to work with any church program, whether as a volunteer or paid staff person, shall complete the application form and submit to a background check with “Protect My Ministry” (or other background check service Faith UMC may purchase). They must also supply Faith UMC with names and contact information for 3 references on the Reference form.
2. In accordance with Ohio State law (Senate Bill #38), applicants for any paid positions (hired after October 29, 1993) must have a background check conducted. For persons who have lived in Ohio for the past five years, an Ohio background check must be conducted. For persons who have not lived in Ohio for the past five years, an FBI background check must be conducted.
3. Before placing the applicant in a position of responsibility, the pastor, church staff member, or lay person responsible for the ministry will review the submitted application and results from the background check to determine if the applicant will be interviewed. Indications that an interview must take place include:
  - a. The person is a newcomer to Faith United Methodist Church and/or to North Canton, Ohio.
  - b. The person wants to work alone.
  - c. The person or background check has indicated that he/she has been charged with a crime against children or youth. (Persons who have been previously convicted or have pleaded guilty or no contest

to a crime against children or youth will not be placed in a position involving access to children or youth.)

- d. Upon checking references, issues are raised which require clarification.

Interviews will follow the interview guidelines provided in the appendix of this policy and be conducted by the pastor, church staff member, the layperson responsible for the ministry, or through the use of a designated person(s).

The results of the interview, especially when sensitive areas have been discussed, should be kept confidential and only disclosed to those persons requiring this information in order to make a decision as to whether the applicant should be accepted as a volunteer.

4. Whether or not an interview is conducted, the pastor, church staff member, or lay person responsible for the ministry will contact the three references provided on the application form. A written record of such contact will be retained with the application form (see appendix of this policy).
5. Before beginning work with either children or youth, each volunteer, staff, or intern will:
  - Sign a statement that he/she has read, has understood, and has agreed to abide by the church's Safe Sanctuaries Policy. (Such statement is a part of the application form.)
  - Successfully complete the online "Child Safety Training" Video and quiz through "Protect My Ministry" (or other background check service Faith UMC may purchase).
  - Complete other training as detailed in section VII: Education of Persons Who Work with Children and Youth.

In the unfortunate situation where it has been determined that an applicant should not work with children/youth, the church needs to handle such a decision in a confidential manner which is sensitive to that person.

#### **IV. SUPERVISION OF CHILDREN, YOUTH, AND VULNERABLE ADULTS**

##### **Emergency Medical/Permission Forms**

Emergency Medical/Permission Forms (EMPF) need to be completed and updated by the parent and/or guardian each year for all children, youth and adults involved in the programs of the church. This form includes medical treatment information, permission for all activities that do not involve travel or overnight stays, as well as parental/guardian permission for FUMC to post photos on websites, publications, and bulletin boards. A master copy and a portable copy of the forms will be kept in the church office. It is the activity facilitator's responsibility to carry the portable copy of the forms during his/her events. A separate event-specific permission form is required for all events that involve travel or overnight stays. All separate permission forms must be distributed at least 2 weeks before they are due.

##### **Supervision of Classroom Activities**

A concerted effort will be made to provide at least two adults, non-related, non-cohabiting, for all classroom activities involving vulnerable persons. When two adults are not available, a designated person will periodically check the rooms and be aware of the children/youth's whereabouts if they leave the classroom area. While recognizing the important role of youth volunteers in children/youth ministries and in an effort to ensure a safe environment, all activities involving children and youth will be supervised by at least one adult who is eighteen

years of age or older, high school graduate or equivalent. Persons supervising activities must be at least 5 years older than the children or youth they are supervising.

### **Special Rules for Supervision of Specific Activities**

**Child/Youth Advising** – In instances of child/youth conversations where circumstances dictate that conversation will be most effective on a one-on-one basis, church staff may meet individually with a child/youth with the awareness and previous consent of that individual’s parent or legal guardian. Exceptions to consent may be made for emergencies. Conversation should take place in an open and/or visible setting. Volunteers should share conversations with the pastors or staff who supervise the ministry they are involved in and encourage student to speak with staff or pastor.

**Dismissal from Group Events:** In group events, it may be inevitable that one child’s or youth’s transportation from the event arrives after all other children/youths’ transportation has arrived. In those circumstances, a child/youth may unavoidably be in the individual presence of an adult. In the event this circumstance is unavoidable, the adult in charge should exercise best practices for the well-being of vulnerable persons.

Youth are not allowed to leave the church unsupervised during an event without parental permission on file. Parents will be notified of any infractions of this policy.

### **Off-Site, Trip and Retreat Supervision**

- There shall be at least two adults present for all trips, retreats, and other times that children/youth gather at or away from the church building.
- There shall be at least one adult of each gender present at co-ed overnight events. At single gender overnight events, at least one of the two or more adults present will be of the same gender as the children/youth.
- In situations where two adults are not available per room where children/youth are staying overnight, then no adult should stay alone in a specific room with the children/youth. Parents should be made aware of housing accommodations.
- Permission slips including permission for emergency medical care shall be carried by the person in charge of each trip and/or retreat.
  - a. Parent must receive contact info to include:
    - i. start/stop times
    - ii. location of event
    - iii. program content
    - iv. lodging information
    - v. covenant rules expected of their child
  - b. Staff/volunteer/drivers must receive:
    - i. all contact information for parents
    - ii. signed parent/guardian permission/liability form
    - iii. health/emergency information

### **Designated Transportation Provider**

- Drivers must be known to the designated leader of the event.
- Drivers must have a current “Designated Transportation Provider Form” on file as well as a valid state driver’s license, proof of insurance, and be at least 21 years old.
- Drivers must obey all traffic laws and speed limits.
- All passengers including adults must use an individual seat belt while traveling.
- Drivers must transport more than one student at a time
- Students are not permitted to drive as part of youth events, transporting other youth.

- A minimum of one copy of the EMPFs is needed per vehicle in the caravan.
- If a church authorized driver is using the church bus, he/she must be trained by a Trustee or their representative and be familiar with “Guidelines for Van Use” which is available in the church office.

### **Open Door Policy**

Parents/guardians, volunteers, or staff of the church may visit and observe the program at any time.

### **Sign-In/Sign-Out Procedure**

Persons responsible for children, infants through fifth grade, will register their children and indicate the pre-authorized person(s) to whom their children may be signed out for both Sunday School and other children’s activities.

During community ministries such as VBS, Camp Read-A-Lot, Summer Arts Camp, etc, anyone not registered for an event should check in and out with the registration team and/or church office. This includes parents who want to remain in the building during the program but are not volunteering with the event, or other persons who come to the church for other purposes during the hours of the event.

### **Outside Group Use**

Faith Church hosts many outside organizations. Each organization will be asked to complete a Facility Use Agreement. (Ex: VOCl music camp, Emmaus, Safety Town, etc)

### **Record Retention**

All activities involving vulnerable persons should have a written record of the names of participants and supervisors. Records should be kept for at least three years. Church activities/meetings, whether onsite or off-site and any non-church building use involving vulnerable persons, should be on the church calendar. Examples include rehearsals, mentoring, meetings and small groups. Stephen Ministry will maintain records according to Stephen Ministry guidelines.

### **Restroom and Diaper Change Guidelines**

- Diaper changes in open view
- Restroom procedures/Drinking fountains: Children use the restrooms/drinking fountains in the main hallways. Escort children in pairs or small groups and wait outside the door.
- If assistance is needed (especially with young children) ask another volunteer to be present with you.
- Volunteers should use the unisex restroom off the Gathering Area, Parlor, Big Kitchen or Sacristy.

### **Appropriate Forms of Touch**

- *Touching between an adult and a youth, child, or vulnerable adult should only occur in the presence of other adults.*
- Practice appropriate forms of touch. Safe places to touch a vulnerable person are hand, shoulder and upper back. *A side-on hug of the shoulders is preferred. Never against a person’s verbally or non-verbally expressed discomfort, such as crossed arms or stepping back.*
- A person’s preference not to be touched should be respected by all persons and includes adult to vulnerable person, youth to youth and child to child.
- *The adult should respond to the child’s need for comfort and encouragement and not base touching on their own emotional needs.*

## **V. FAITH UMC POLICY ON SOCIAL MEDIA AND TECHNOLOGY**

Given the increased use of technology and social media in the life of the church and its individual members, faith communities have a responsibility to define social media policies that uphold the covenant to create Safe Sanctuaries for vulnerable persons. To this end, following are guidelines for the use of social media, technology and the internet:

- We will protect the privacy and identity of all vulnerable persons in online writings, postings and discussions.
- Volunteers and staff must not post photos or video that identifies vulnerable persons by name, address, or other specific identification on any online site or printed publication without written consent from a parent or legal guardian.
- All social media groups (Facebook, etc.) associated with preschool, children’s or youth ministry areas should be designated as “closed” groups, requiring all those who wish to gain access to be approved by the group’s administrator(s).
- All church-related social media groups (Facebook, etc.) and pages must have at least two administrators. If an administrator is no longer associated with the ministry, that individual’s administrative status must be revoked.
- Photos of vulnerable persons may only be published or posted on social media (Facebook, etc.) after a photo release has been signed by their parent/guardian. It is suggested that all permission slips contain a statement that approval to participate in the event includes approval for photographs to be used in church-related media. Photos used in other mediums, such as church newsletters, websites, blogs, twitter pics, etc., must not include any identifying information of minors without permission.
- Photos may only be posted to the social media (Facebook, etc.) page by page administrators. Adults (staff, volunteers, parents, etc.) should not identify minors in photographs posted online or in print. Individuals (including minors) are welcome to identify (i.e. “tag”) themselves.
- When checking in on Foursquare, Facebook, or any location tagging social media, only “check in” yourself. Never check in minors. Be sensitive to tagging or revealing other participants’ location without their expressed permission. Rather, create a hashtag to facilitate conversation.
- In the case of clergy/professional staff and church member online connections, friend requests, follow requests, circle requests, etc. should be initiated by the church member, especially if the church member is a vulnerable person.
- We will maintain appropriate relational boundaries with minors.
- No adult shall initiate social media (Facebook, etc.) contact with or “friend” a vulnerable person. When accepting the “friend” requests of a vulnerable person, care should be taken to respect the ministry and discipleship work of the local faith community to which they belong. Any conversations on Social Media with vulnerable persons shall occur in open channels, or with multiple parties present in the conversation thread.
- When emailing, texting, tweeting, posting or messaging a vulnerable person, adults should copy another adult (ideally a parent or guardian) on the message, or post it in a public venue (i.e. a Facebook wall as opposed to a private message). This will allow adults to maintain the “two adults present” Safe Sanctuaries standard when using social media. Platforms promising discrete conversations and secrecy (SnapChat, FacebookPoke, etc.) should be avoided.
- For youth, grades 6-12, see attached Youth Communication Policy. The Youth Communication Policy is for staff and regular youth ministry leaders.

In general, Faith UMC views social networking sites (e.g. Facebook, Twitter, and Instagram), personal websites, web Blogs and twitter accounts positively and respects the right of paid/volunteer staff to use them as a medium of self-expression. If a person chooses to identify himself or herself as a paid/volunteer staff at a church sponsored event on such Internet venues, some readers of such websites, blogs or tweets may view the paid/volunteer staff as a representative or spokesperson of the church. In light of this possibility, Faith UMC requires, as a condition of participation in the event, that paid/volunteer staff observe the following guidelines when referring to Faith United Methodist Church, its programs or activities, its participants, and /or paid/volunteer staffs in a blog, on a social networking site, on a website or in a tweet:

1. Paid/volunteer staff must be respectful in all communications related to or referencing Faith UMC, its programs or activities, its participants, and /or paid/volunteer staffs.
2. Paid/volunteer staff must not use obscenities, profanity, or vulgar language.
3. Paid/volunteer staff must not use blogs, personal websites, networking sites or tweets to disparage Faith UMC, its programs or activities, its participants, and/or paid/volunteer staff.

4. Paid/volunteer staff must not use blogs, personal websites, networking sites or tweets to harass, bully, or intimidate participants, or paid/volunteer staff of events sponsored by Faith UMC. Behaviors that constitute harassment and bullying include, but are not limited to, comments that are derogatory with respect to race, religion, gender, sexual orientation, color, disability, sexually suggestive, humiliating, or demeaning comments, and threats to stalk, haze, or physically injure another person.
5. Paid/volunteer staff must not use blogs, personal websites, networking sites or tweets to discuss engaging in conduct that is prohibited by Faith UMC Policies, including, but not limited to, the use of alcohol and illegal drugs, sexual behavior, sexual harassment, and bullying.
6. Paid/volunteer staff should not post pictures on personal social media account, but may share FUMC posts to their personal account.

Any participant found to be in violation of any portion of this policy may be unable to register for future Faith UMC sponsored events. Any paid/volunteer staff found to be in violation of any portion of this policy may be subject to appropriate disciplinary action, up to and including dismissal.

## **VI. SAFE SANCTUARY HOSTS**

In the event one time professionals will be providing leadership in events with vulnerable persons the following guidelines should be incorporated:

- Guest Leaders are defined as persons who are not affiliated with Faith UMC, not attending worship, groups, or other activities. Leaders affiliated with Faith UMC will follow Safe Sanctuary procedures for background checks and training as described in the policy.
- In the event Guest leaders will be needed on a one time basis, ministry leaders will provide trained and background checked Safe Sanctuary hosts to be present with the guest leader.

## **VII. MINISTRY COORDINATORS**

Persons who desire to coordinate ministries involving children, youth and vulnerable adults should follow the steps listed below prior to beginning a ministry involving children, youth, and vulnerable adults.

1. Participate in Safe Sanctuary volunteer training.
2. Contact the Ministry Team Leader and/or the Staff Liaison best connected to the ministry you desire to coordinate to share and discuss your ideas.
3. Participate in annual training for ministry coordinators which includes but is not limited to the following: registration and attendance procedures, annual volunteer training, scheduling, communication, financial procedures, practices of safety and confidentiality in the use of church resources, (e.g. passwords, database use, photo release)

## **VIII. RESPONSE TO INJURIES AND ACCIDENTS**

In order to ensure proper attention was given to an injury or accident, an Accident/Injury report must be completed by the adult supervisor within 24 hours of the incident whenever a vulnerable person is injured. Parents and/or guardians will receive a copy of the Accident/Injury report. (See attached form)

## **IX. RESPONSE TO INCIDENTS OF INDECRETION/VIOLATIONS OF SAFE SANCTUARY PRACTICES**

Procedure for dealing with other serious allegations of safe sanctuary violations:

- Behaviors that hinder our mission of creating a safe and welcoming environment undermine leadership/program, and neglect safety should be taken seriously even when such behavior may not be 'illegal.' Reports should be directed to the pastor, staff relating to that program area and/or the event coordinator.
- A resolution should be sought via direct or mediated conversation when possible, barring a situation with an egregious violation.

- If a resolution between parties is not possible, the pastor, staff relating to the program area and Safe Sanctuary ministry group shall have the authority to proscribe a resolution. This may include a review of an individual's future involvement in ministries with vulnerable populations.
- Documentation of all efforts to communicate and resolve the situation. (See attached form)

In the case of an allegation that involves abuse, neglect or other illegal behavior, procedures for responding to allegations of abuse listed in "Section X - Response to Allegations of Abuse" should be followed.

In addition to the behaviors that are described in section X, there are other behaviors that may be incidents of indiscretion or violations of Safe Sanctuary practices that hinder our mission of creating a safe, welcoming and hospitable environment. Examples of these incidents include a chaperone who continually undermines program objectives or an event planner who neglects training or health and safety concerns, complaints about behavior of volunteers and staff that is not compliant with Safe Sanctuary practices, etc.

When serious concerns arise:

1. The ministry coordinator should invite the person raising the concern to talk directly with the person whose behavior is in question. The ministry coordinator should notify their staff liaison and/or pastoral ministry supervisor of the concern. (Faith UMC Direct Dealing Policy).
2. If the person raising the concern is unwilling or unable to talk directly with that person, the incident involves a minor or vulnerable person, or if the initial conversation is unproductive, then the ministry coordinator and/or staff liaison for that ministry area and pastor shall meet with the persons involved in the situation to seek resolution. Pastoral care should be extended for any victims involved in the incident.
3. Anonymous complaints or evaluations shall be considered unverifiable, and therefore, will have no foundation for being officially addressed.
4. Persons whose behavior hinders the goals of the ministry may face review of their participation in leadership for that behavior.
5. If the person who is observed in indiscretions of the Safe Sanctuary policy is the pastor then the person who is raising the concern may report to the Safe Sanctuary Ministry Group and Staff Parish Relations Committee.
6. The pastor and/or staff person relating to the program area, and/or Safe Sanctuary representative is responsible for carefully documenting all aspects of the incident using the Incident Report Form. The Director of Administration and Finance, who manages Safe Sanctuary folders, should be contacted to see if there is any previous history.
7. The pastor and staff person relating to the program area, and/or Safe Sanctuary representative are responsible for contacting the accused and informing the accused of the nature of the process. The purpose of this meeting is not to interrogate the accused but to discuss the accusation. Any meetings with the accused should include at least two other persons (e.g. pastor, staff, safe sanctuary group member, etc.).
8. If the incident is put under investigation by appropriate civil authorities, the investigation will be monitored by the Safe Sanctuary ministry group, pastor and staff relating to the program until there is an outcome.
9. If there is no civil investigation or once the investigation by civil authorities is completed, the Safe Sanctuary ministry group, pastor and staff relating to the program shall jointly consider the incident to determine whether any further actions are needed.
10. After conducting an investigation involving all parties, the pastor and staff person relating to the program area shall report the findings to the accused and the Safe Sanctuary ministry group. If it is determined that the person has committed an act of abuse, engaged in an illegal activity or a behavior which compromises Safe Sanctuary practices, the final goal of this process is to establish a future covenant with the offender that regulates their behavior at all levels of involvement in the ministries of the church. This covenant shall include both record of what offending actions were committed and solutions about what should be done in the future.
11. If no covenant is established, the accused shall remain suspended from working with youth/children/vulnerable persons until mediation is complete.

12. All documentation relating to the incident will be confidentially filed in secured Safe Sanctuary files maintained by the Director of Administration and Finance. Forms should be filed in an incident folder and with an individual's Safe Sanctuary forms.

## **X. RESPONSE TO ALLEGATIONS OF ABUSE**

As caring Christians, we are committed to protect and to be advocates for vulnerable persons participating in the life of the church. The Church is entrusted to provide an emotionally safe, spiritually grounded, healthful environment for children, youth, and adults in which they are protected from abuse. It is our legal and moral responsibility to report suspected abuse whenever it comes to our attention regardless of where that abuse takes place. We shall report abuse to stop potentially existing abuse and to prevent further abuse. To report abuse is to be a witness to the world of the love and justice of God. Reporting abuse is a form of ministering to the needs of those crying out for help. If abuse occurs, it is our intention to act as an advocate for all affected persons, providing support, information, assistance and intervention. We seek to provide a supportive atmosphere, offering both objectivity and empathy, as we seek to create a climate in which healing can take place.

If abuse is suspected by, observed by or disclosed to a volunteer and/or paid staff member of the church, that person must follow reporting requirements and report the incident immediately to the pastor. If that person is uncomfortable reporting the incident to the pastor, then the alleged abuse should be reported to the staff person who supervises that ministry area.

1. The suspected abuse shall be immediately reported to Children Services or the local law enforcement agency. This is a requirement of the law. (Reference section 2151.421 of The Ohio Revised Code.) Do not attempt an investigation. This should be left to professionals who are familiar with these cases.

**COMPLIANCE WITH THE PROVISIONS OF THIS POLICY IN NO WAY ELIMINATES THE REQUIREMENT THAT CERTAIN EMPLOYEES COMPLY WITH THE MANDATORY REPORTING REQUIREMENTS OF OHIO REVISED CODE SECTION 2151.421.**

*Ohio Revised Code Section 2151.421 requires mandatory reporting of suspected abuse and neglect. It requires employees of day care centers and child care agencies, and "any persons rendering spiritual treatment through prayer in accordance with the tenets of a well-recognized religion" to make reports to child protective services. These reports must be made if the individual knows or suspects that a child faces threat of suffering any physical or mental wound, injury, disability, or condition of a nature that reasonably indicates abuse neglect of the child. In Stark County that report is made by calling 330.455.KIDS. Your name will be kept strictly confidential.*

**IT IS NOT SUFFICIENT FOR THE EMPLOYEE TO MERELY REPORT TO HIS OR HER SUPERVISOR. HE OR SHE MUST REPORT DIRECTLY TO CHILD PROTECTIVE SERVICES AS WELL.**

2. A written report of the basic information shall be kept to ensure on-going ministry to, and advocacy for, victims and others involved. A form for this purpose shall be available in the church office. (See attached form on page 33) This form is to be completed by the person who observed the suspected abuse or to whom the suspected abuse was disclosed.

The report shall be brief and contain only factual information relevant to the situation. It shall be filed in a secure place in order to ensure confidentiality. It shall be written in ink or typed to prevent it from being changed. The church must also file a copy of the report with the bishop's office of the East Ohio Conference, where it will be placed in a secure file.

3. After having reported the suspected abuse to Children Services or the local law enforcement agency, the incident is to be reported immediately to the church insurance company and district superintendent by the pastor(s) or administrative staff of the church. The district superintendent will report the allegation to the bishop's office. Do not try to handle this without professional outside assistance.
4. The pastor(s) will notify the parents. Do not prejudge the situation, but take the allegations seriously and reach out to the victim and the victim's family. Showing care and support help to prevent further hurt. Extend whatever pastoral resources are needed. Remember that the care and safety of the victim is the first priority. Responding in a negative or non-supportive manner to the alleged victim may increase the anger and pain of the victim and the victim's family. Future reconciliation will be more difficult and the possibility of conflict increases. Note: if one or both of the parents or legal guardian is the alleged abuser, contact the proper authorities. Follow their advice about notification of the parents.
5. Once Children Services or the local law enforcement agency has been contacted and the safety of the child or youth member is secured, the pastor(s) will tell the accused that a report has been made. The accused will be treated with dignity and support. If the accused is a volunteer or paid staff of the church, that person shall be relieved temporarily of his or her duties until the investigation is finished. If the accused is a paid staff of the church, arrangements should be made to either maintain or suspend his or her income until the allegations are cleared or substantiated based on recommendations of SPRC and/or the East Ohio Conference Bishop's office.
6. The pastor, district superintendent, or bishop's offices should inform the alleged victim, the alleged victim's family, the accused, and the accused's family of the existence of the process of the East Ohio Conference Communications Department. This committee's mission is to support, guide, and offer options to the alleged victim, the alleged victim's family, the accused, the accused's family, the pastor, and the district superintendent. This committee is appointed by the bishop and may include, but not be limited to, a licensed counselor/social worker with child abuse treatment experience, a licensed psychologist or psychiatrist with child abuse treatment experience, an attorney, a lay person who is a parent and a clergy person.
7. Any contact with the media shall be handled by the pastor, district superintendent, bishop, or their designated representative. Care will be taken to safeguard the privacy and confidentiality of all involved. The spokesperson should generally convey that the matter is under investigation and any comments made prior to the conclusion of the investigation would be premature.

## **XI. EDUCATION OF PERSONS WHO WORK WITH VULNERABLE PERSONS**

At least once a year regularly scheduled training focused on Safe Sanctuary best practices for those working with vulnerable persons will be required. Training must be conducted by persons trained to lead Safe Sanctuary orientations as approved by the Safe Sanctuary ministry group and incorporate consistent use of handouts in all trainings. Attendance at this training or a district/conference sponsored training session shall be required of all persons who will have direct contact with vulnerable persons in the church's ministry. The church will assume the cost of training.

The training should include:

1. Definition and recognition of abuse and the church's policies on reporting abuse.
2. Video on child abuse and neglect from Protect My Ministry or other source as determined by the Safe Sanctuary ministry group.
3. The purposes of the policy as protection for children, youth, and vulnerable persons and for church staff/volunteer workers as well as the ministries of the church.
4. The meaning and importance of confidentiality by staff, volunteer workers, paid and unpaid interns.

5. The role of one who hears a disclosure
6. Use of report forms including registration, attendance, accident/injury incident, emergency medical and photo release forms.
7. Maintaining a positive learning classroom environment, including appropriate discipline
8. Appropriate behavior for teachers and leaders
9. Common age-level characteristics
10. KultureCity Sensory Inclusive Training

Training Packets should contain the following resources to assist in consistently covering all of the above information in training sessions:

- Best Practices for Safe Sanctuary
- Safe Sanctuary Quick Reference Guide
- Development Through the Lifespan
- Different Ways of Learning
- Caring For All Persons: A Relational Approach to Redirecting Behavior
- Peanut and Tree Nut Allergy Awareness
- What Every Child/Youth Should Experience
- A Pocket Guide to Discipline and A Pocket Guide to Special Needs from Group Publishing

Refer to sample training folder for copies of training resources.

### **Forms and Reports**

Forms for reports and registration are included in the next section of the Safe Sanctuary policy.

Ministry Coordinators and staff can use the templates provided in the policy to create forms personalized for each activity. The templates include the basic questions, waivers and releases which are required to be included. Additional questions that may be helpful for the event can be added. All forms need to be approved by the Safe Sanctuary group prior to distribution.

## **XII. Sex Offender Attendance Policy**

The well-being of all persons is important at Faith UMC. The high value and importance Faith UMC places on all persons is reflected in our vision and core values. Our church strives to provide “Safe Sanctuary” for all God’s children. We are continually seeking ways to improve and better implement “Safe Sanctuary” procedures to protect our children, youth and vulnerable adults in order to make our congregation a safe place where everyone may experience the abiding love of God and fellowship within the community of faith. This includes procedures that guide the interaction of adults with children, youth and vulnerable adults.

Our congregation’s purpose for establishing these Safe Sanctuary policies and procedures is to demonstrate our absolute and unwavering commitment to the physical safety and spiritual growth of all our children, youth and adults. Safe Sanctuary is a practice of radical hospitality, authenticity and an extravagant welcoming spirit.

Therefore, as a Christian community of faith and a United Methodist congregation, we strive to conduct our ministries in ways that assure the safety and spiritual growth of all persons. We will follow reasonable safety measures in the selection and recruitment of staff, interns and volunteers; we will implement operational procedures in all programs and events; we will educate all staff, interns and volunteers who work with children, youth, or vulnerable adults regarding the use of all appropriate policies and procedures.

In all of our ministries, this congregation is committed to demonstrating the love of Jesus Christ so that each person 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).

While Faith United Methodist Church (FUMC) is committed to being a community open to those who are in need, especially in times of serious personal trouble, it is also committed to protecting its members from the misconduct of others. As such, we are committed to creating and maintaining ministries, facilities, and a community in which members, visitors, staff, volunteers, and other participants can enjoy an atmosphere free from all forms of discrimination, harassment, exploitation, or intimidation.

In light of these commitments, we establish the following practices:

- FUMC will cooperate with legal authorities regarding the participation in ministry activities of persons with a history of sexual convictions.
- No person with any sexual offense on their record will be appointed to any leadership position at FUMC.
- All persons known to have been accused or convicted of sex offenses must comply with the terms of this policy.

FUMC will periodically review this policy and ministry enforcement of this policy.

## I. INVESTIGATION AND DISCLOSURE

As a condition of continued service, all staff, employees, volunteers, and interns will submit the Safe Sanctuary application form authorizing FUMC to conduct criminal background investigations according to the previously established three-year renewal schedule. All names shall be cross-referenced against national sex offender registries. This disclosure will also be required of anyone new to a position or employment including staff, interns and volunteers.

FUMC further reserves the right to research all public information databases, including, but not limited to, court records, sex offender registries, department of corrections records, and any other repositories of public information regarding any ministry member, guest, staff member, volunteer, or other participant in any ministry activity.

All persons identified through the foregoing investigation and disclosure, or through other private or public information, to have a conviction related to any sexual offense will be referred to the Safe Sanctuaries Group. Upon receipt of a referral, the Safe Sanctuaries Group will convene to conduct a thorough investigation and provide a report to Staff Parish Relations Committee and consider feedback.

## II. SAFE SANCTUARIES GROUP

A. The Safe Sanctuaries Group, with at least three (3) members present, will be convened on an as-needed basis to address complaints, allegations, concerns or information regarding a sex offender or an alleged sex offender who is currently attending, participating or who wishes to participate in activities at FUMC. The Safe Sanctuaries Group will be familiar with the terms and procedures of both FUMC Sex Offender policy and the Safe Sanctuary policy. Safe Sanctuaries group members must submit to the screening procedures established in the FUMC Safe Sanctuary policy.

1. In the event a complaint, allegations or information involves a member of the Safe Sanctuaries Group, that member will not participate in the proceedings.
2. All Safe Sanctuaries Group deliberations will be strictly confidential. Materials related to Safe Sanctuaries Group investigations will be treated with care and kept in a limited-access secured file.

B. Upon receipt of a referral, the Safe Sanctuaries Group will convene to institute formal proceedings, which shall include, but not be limited to, the following:

1. A meeting between the Pastor, Safe Sanctuary representative, and the person who is the subject of the referral to discuss the complaint, allegation, concern or information received, obtain the referred person's response, and explain the procedure of the Safe Sanctuary Group. The Pastor may immediately impose temporary limitations on the person's activities in the ministry pending any decision by the Safe Sanctuaries Group if the Pastor believes such action is appropriate.

2. The Safe Sanctuaries Group will gather statements, including criminal background information, from the individuals who are the subject of the referral. The Safe Sanctuaries Group may also gather statements from others who may have pertinent information, including relevant, qualified professionals and legal authorities.
  3. The Safe Sanctuaries Group will make determinations and take actions appropriate to resolve the matter.
    - a. If the Safe Sanctuaries Group determines that the referral is unfounded, it will indicate its determination to SPRC, which will deem the matter resolved unless additional information is discovered.
    - b. If the Safe Sanctuaries Group determines that the referral is well-founded, it may take the following actions:
      - i. Contact appropriate legal authorities to determine whether the referred person is permitted to participate in FUMC activities and any additional legal restrictions imposed on them.
      - ii. Require the referred person to execute a *Contingent Participation Agreement* with terms established by the Safe Sanctuaries Group.
      - iii. Recommend that SPRC terminate the referred person's employment or volunteer service (if applicable) and/or recommend that the Pastor terminate the referred person's ministry membership.
      - iv. Take any additional actions determined by the Safe Sanctuaries Group to be appropriate, including, but not limited to:
        - a) A formal reprimand, with defined expectations for changed behavior.
        - b) Recommending/requiring psychological or psychiatric assessment, counseling, and/or treatment.
        - c) Probationary standing, with the terms of the probation clearly defined.
        - d) Exclusion from ministry activities.
        - e) Cooperation with criminal proceedings.
        - f) The drafting of a public statement to be delivered to members of the congregation by SPRC.
      - v. If the Safe Sanctuaries Group determines that the referred person does not have a record of convictions related to any sexual offense, but nonetheless determines that the person may pose a threat to others, it may take any of the actions in this section it deems appropriate.
  4. The Safe Sanctuaries Group may seek the advice of legal counsel or others for advice in performing its functions.
  5. The ministry's governing body or the Safe Sanctuaries Group may, at their discretion, request that the referred person not participate in ministry activities until the matter is resolved.
- C. A confidential written record of the Safe Sanctuaries Group proceedings will be maintained. This record will be available to both parties in any litigation involving conduct by the referred person related to the subject matter of the referral. The record also will be available to any party who can produce a subpoena for its release.
- D. Failure to cooperate fully with a Safe Sanctuaries Group investigation or to fully comply with the Safe Sanctuaries Group's decisions and/or actions will be grounds for exclusion from participation in ministry activities, and/or exclusion from ministry membership.

### III. CONTINGENT PARTICIPATION AGREEMENTS

Upon determining that the referral is well-founded, the Safe Sanctuaries Group will require, in consideration for being permitted to participate in ministry activities, that the referred person execute a *Contingent Participation Agreement*, under terms established by the Safe Sanctuaries Group

The *Contingent Participation Agreement* will detail the conditions under which a referred person will be permitted to participate in ministry activities. These conditions will include a list of ministry activities/areas where the referred person may or may not participate and/or may or may not enter. In addition, any such agreement will include the assignment of a designated covenant partner and the condition that the referred person must comply with the instructions of their designated covenant partner. Violation of these conditions by the referred person may result in their exclusion from future activities.

#### IV. DESIGNATED COVENANT PARTNER TEAM

- A. The designated covenant partner team will be established under the direction of the Safe Sanctuaries Group and headed by the Pastor or by a ministry staff employee appointed by the Pastor as his/her representative(s).
- B. The designated covenant partner team will consist of a sufficient number of members to ensure coverage for all persons subject to their supervision. Designated covenant partner will be familiar with the terms of their charge's *Contingent Participation Agreements* and trained in the provisions of the Safe Sanctuaries Policy and practices of confidentiality and will participate in a yearly review of the Safe Sanctuary Policy and Contingent Participation Agreement.
  - 1. The designated covenant partner team will consist of volunteers from the ministry appointed by the Safe Sanctuaries Group. Members of the Safe Sanctuaries Group may also serve as designated covenant partners.
  - 2. Under no circumstances will a designated covenant partner be assigned to a referred person to whom they are related or with whom they cohabitate.
- C. Designated covenant partners will be in the same room as their referred persons at all times during the referred person's participation in ministry activities or presence in ministry areas.
- D. Designated covenant partners may arrange for their referred persons to be monitored by other designated covenant partners on an as-needed basis, with the prior approval of the Pastor, his/her designated representative or the Safe Sanctuaries Group.
- E. Designated covenant partners will maintain a log of their activities with their assigned referred persons, recording the date, when the referred person arrived, when they departed, and any times when the designated covenant partner and referred person became separated. This log will be submitted to the Director of Administration/Finance or his/her designated representative on a regular basis, not less than monthly.

### **FAITH UNITED METHODIST CHURCH Contingent Participation in Ministry Activities Agreement**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

Name, address, telephone numbers of (2) two emergency contact persons:

1.

2.

In consideration of being permitted to participate in ministry, I, \_\_\_\_\_ agree that my  
*Print First and Last Name*  
continued participation in ministry activities and admission to FUMC property is contingent upon my adherence to the following conditions:

1. I must abide by all policies and procedure of FUMC to protect the health and safety of children, youth, and vulnerable adults.
2. I may not participate in any ministry activity or enter any FUMC area without the presence and knowledge of my designated covenant partner(s) and I must comply with the instructions of my designated covenant partner(s) listed below:

I understand that it is my responsibility to comply with this condition and that failure of my designated covenant partner to monitor my presence will not release me from this condition.

3) I may participate in the following ministry activities:

4) I may not participate in the following ministry activities:

5) I may only be on church property for the purpose of attending the ministry activities identified in Paragraph 3 above unless I have written authorization from the Pastor or the Safe Sanctuaries Group to enter for another purpose.

- a) I am limited to 15 minutes on church property before and after the church activity that I attend.
- b) I may only enter the church through the doors to the gathering area by the office.
- c) I must check in with my designated covenant partner by the office as soon as I enter the church building.
- d) I may not be in Faith Friends Learning Center (FFLC) areas of church property when FFLC is operating and during ½ hour period before FFLC opens and ½ hour period after it closes.
- e) While in the church, I may not enter the following areas of the church except as necessary to attend the ministry activities identified in Paragraph 3 above. (Access to the following areas may also be expressly limited if deemed necessary or appropriate.
  - i. Any area of the church property where children or youth are gathered for activities that primarily involve children or youth.
  - ii. Any restroom that is accessible to more than one person at a time.
  - iii. The church basement.

6) I agree to indemnify, defend, and hold FUMC harmless for any liability which may result or arise from my participation in ministry activities or presence on FUMC property.

7) I understand that I am not eligible for any employment and may not be eligible for certain volunteer positions at FUMC.

8) I understand that my identity, information about my record, the terms of this agreement, and the reasons for the decision to require this agreement may be disclosed to ministry staff and members. I hereby consent to such disclosure and waive any and all right to take legal action against FUMC, its employees, and members, for such disclosure authorized by this agreement. I voluntarily release FUMC, the members of the Safe Sanctuaries Group, and any person

or entity listed on this form from any liability involving the communication of information relating to my background or qualifications.

I have reviewed this document and agree to abide by its provisions. I agree that if I violate the conditions of this agreement, FUMC may take action against me, including, but not limited to: contacting relevant legal authorities, denying me access to FUMC property, and denying me the ability to participate in ministry functions.

I understand that this agreement will be reviewed periodically and will remain in force until such time as FUMC deems it appropriate to modify it. I agree that FUMC may modify the terms of this agreement at its sole discretion.

I further understand that FUMC will rely on the accuracy of the information I provide. Accordingly, I affirm that the information I have provided is true and correct to the best of my knowledge. I further authorize FUMC to conduct additional background investigations of me at its discretion.

\_\_\_\_\_  
Signature Date

\_\_\_\_\_  
Printed Name Date

\_\_\_\_\_  
Pastor Date

\_\_\_\_\_  
Witness Date

\_\_\_\_\_  
Safe Sanctuaries Group Representative Date

\_\_\_\_\_  
Designated Covenant Partner Date

**Faith United Methodist Church Agreement for Covenant Partners of \_\_\_\_\_, a Registered Sex Offender (RSO)**

I, \_\_\_\_\_ was trained on \_\_\_\_\_  
*Print First and Last Name Date*

as a covenant partner for \_\_\_\_\_, a registered sex offender who has signed the FUMC Safe Sanctuaries (SS) Agreement for Ministry Involvement for RSOs.

I have read the policy for ministry including RSOs. \_\_\_\_\_  
*Date and Initials*

I understand, value, and willingly accept the responsibilities for being an RSO covenant partner in accordance with the Safe Sanctuary policy, the agreement signed by \_\_\_\_\_ and the RSO Covenant partner training.  
*Print First and Last Name*

I will participate as needed in continued training for RSO Covenant partners for the purpose of reviewing the Safe Sanctuary policy and updates to the RSO agreements. I agree to meet at least once a year for review of Safe Sanctuary policies and RSO policies. I value serving as a covenant partner for how it allows \_\_\_\_\_ to grow in their faith journey and for how it helps provide a safe place for all people to grow in their faith journey.  
*Print First and Last Name*

\_\_\_\_\_  
*Signature Date*

## Faith Church Believes in Families and Community

*Our Lord has placed a high value on children and so do we.*

Jesus said, “Let the little children come to me, and do not hinder them, for the kingdom of God belongs to such as these.” Mark 10:14



### **The well-being of children, youth and all persons is important at Faith UMC.**

The high value and importance Faith UMC places on all persons is reflected in our vision and core values. Our church strives to provide “Safe Sanctuary” for all God’s children. We are continually seeking ways to improve and better implement “Safe Sanctuary” procedures to protect our children, youth and vulnerable adults in order to make our congregation a safe place where everyone may experience the abiding love of God and fellowship within the community of faith. This includes children’s check in/out procedures, training and background checks for those working with children, youth and vulnerable adults, restrooms equipped for older children and adults with special needs, sensory manipulatives, resources and partnership assistance availability, and procedures that guide the interaction of adults with children, youth and vulnerable adults.

Our congregation’s purpose for establishing these Safe Sanctuary policies and procedures is to demonstrate our absolute and unwavering commitment to the physical safety and spiritual growth of all our children, youth and adults. Safe Sanctuary is a practice of radical hospitality, authenticity and an extravagant welcoming spirit.

Therefore, as a Christian community of faith and a United Methodist congregation, we strive to conduct our ministries in ways that assure the safety and spiritual growth of all persons as well as all of those who serve in our programs and ministries. We will follow reasonable safety measures in the selection and recruitment of workers; we will implement operational procedures in all programs and events; we will educate all of our workers with children, youth, vulnerable adults regarding the use of all appropriate policies and procedures.

In all of our ministries, this congregation is committed to demonstrating the love of Jesus Christ so that each person 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).

<http://www.gbod.org/leadership-resources/safe-sanctuaries>

### **VISION OF FAITH UMC**

*Faith United Methodist Church seeks to be a dynamic, growing community that gathers around Christ in Word and Worship to pray, learn, care, share and serve together.*

### **FAITH UMC CORE VALUES**

*Open Hearts, Open Minds, Open Doors—The People of the United Methodist Church*

#### **WORSHIP**

*Faith UMC believes worshipping God is central to our being.*

#### **GROWTH**

*Faith UMC believes inquiring minds and spirited dialogue foster our journey of faith.*

#### **LAY EMPOWERMENT**

*Faith UMC believes the initiative of its members and friends is vital for the building up of the Kingdom.*

#### **AUTHENTICITY**

*Faith UMC believes we are called to accept and genuinely care for one another.*

#### **WELCOME**

*Faith UMC believes there is a place here for everyone to safely share deepest hopes, hurts, insights, and dreams.*

#### **OUTREACH**

*Faith UMC believes we are called to extend Christ’s love to the community and the world to meet physical and spiritual needs.*

### **FAITH UMC MOTTO: “JOURNEY INTO FAITH – LEARNING, LOVING, LEADING”**



## Best Practices for Safe Sanctuary

- ❖ Wear your name tag and teal blue Faith UMC volunteer shirt to help identify you as a leader to participants, parents/guardians and other volunteers.
- ❖ Be present 15-30 minutes before activity begins to prepare and welcome guests. Sign in either on the attendance sheet or at designated area for the ministry you are serving in.
- ❖ Make every effort to have 2 non-related/non-cohabitating adults present for all activities. Avoid being alone with a student. Contact program leaders if assistance is needed. Roamers may be used for situations when 2 non-related/non-cohabitating adults aren't present.
- ❖ Ministry Coordinators should record attendance/activity including adults, children and youth present.
- ❖ Permission and emergency medical forms are required for all activities for children/youth participation.
- ❖ **Restroom Procedures/Drinking Fountain:** Kids use the restrooms/drinking fountain in the main hallways. Escort children in pairs or small groups; wait outside the door.
  - If any assistance is needed (especially with young children), ask another volunteer to be present with you.
  - Volunteers should use the Unisex restroom off the Gathering Area, Parlor or Sacristy restroom.
- ❖ **Check-In Procedures:** Parents/Guardians will register/sign in children in the Gathering Area or Family Life Center. Building relationships is an important part of this ministry!
  - Ask if there are special needs, contact info and who will be picking child up and write on sign-in paper.
  - Every child will have a number given to the parent/guardian at registration. Check that the number matches what is on your student roster during dismissal.
- ❖ **Dismissal Procedures:** Parents/Guardians will come to your group to pick up their children. Please remain with children until all children have been dismissed.
  - Ask for the parent/caregiver name, child's name and number, check the name and number on the sign in sheet
  - It is also okay to ask for a photo ID and check to see that matches the name you were given when the child came in the morning.
  - Be sure to send home anything the kids received that day, especially info for families!
  - If you have children in your group that belong to other volunteers, please keep them with you until all other children have been picked up and then walk them to their parent, grandparent, or caregiver.
- ❖ Be aware of any allergies or special circumstances for any students in your group. Specific information will be listed on the student roster in group folder or written by parents on the sign-in sheets.  
For community events: \*Students with allergies will have a **red star** on their name tag.  
\*Students whom do not have a photo release will have a **blue star** on their name tag.
- ❖ Parents/Guardians are entrusting their children to us. It's important to be good stewards of that trust and respect and protect confidential information. We are required by the state of Ohio to report suspicions of abuse and neglect. Refer to the Safe Sanctuary Policy for definitions of abuse and neglect. Please contact Kathy, Pastors Steve and Cara regarding any situations.
- ❖ Be mindful of the age level characteristics and developmental stage of the children you are working with. Use lots of positive reinforcement and encouragement!
- ❖ Practice appropriate forms of touch. 3 safe places to touch a child are hand, shoulder and upper back. Never against a person's verbally or non-verbally expressed discomfort, such as crossed arms or stepping back.
- ❖ Be aware of the location of emergency information. Fire escape and tornado procedures and the location of first aid kits are posted near the door of each room.
- ❖ Be mindful about keeping doors open or utilizing doors with windows when working with children and youth.
- ❖ Keep your eyes on your group. Know how many children are there and count them frequently!
- ❖ If someone gets hurt or you need assistance, contact Kathy, registration table or the church office. Injury/Accident reports will need to be completed and a copy given to parents/guardians.
- ❖ Be aware of your surroundings, keep eyes and ears open and use best practices for the safety of all children, youth, vulnerable persons, volunteers and the ministry of the church as you serve. If you are unsure or uncomfortable about something, contact the leaders in charge.
  - Visitors will be asked to sign in at the office and wear a nametag. This includes church members during large community ministry events. If you notice anyone without a name tag direct them to the church office.
- ❖ We encourage you to share your experience at all of Faith UMC's ministries. If you choose to use social media, follow guidelines described in the Safe Sanctuary policy remembering that you represent Faith UMC.

*Please call or text any of the following numbers if you need assistance: **Pastor Cara** 330-224-7107. **Pastor Steve** – 330-224-7337, **Kathy Schmucker** 330-224-6138, **Church Office** 330-499-6040, **Childcare cell** 330-418-1620, **Amy Ferguson** – 330-704-6358*

## Best Practices for Safe Sanctuary ~ Community Ministries

- ❖ Wear your name tag and teal blue volunteer shirt to help identify you as a leader to participants, parents/guardians and other volunteers.
- ❖ Sign in each day and at the table in the coat room. Attend Huddle, Prayer and Announcements in the Sanctuary 30 minutes before opening.
- ❖ Make every effort to have 2 non-related/non-cohabitating adults present. Avoid being alone with a student. Contact program leaders for assistance. Roamers may be used when 2 non-related/non-cohabitating adults aren't present.
- ❖ **Restroom Procedures/Drinking Fountain:** Kids use the restrooms/drinking fountain in the main hall near the library. Escort children in pairs or small groups; wait outside the door.
  - If any assistance is needed (especially with young children), ask another volunteer to be present with you.
  - Volunteers should use the Unisex restroom off the Gathering Area, Parlor or Sacristy restroom.
  - Stay hydrated, especially if it is warm. Water will also be available at snacks and games (during VBS).
- ❖ **Check-In Procedures:** Caregivers will register children in the Gathering Area then bring children to their designated group pew in the sanctuary. Please be in your pew 20 minutes before the start time to greet families and get to know them. Building relationships is an important part of this ministry!
  - Ask who will be picking child up and write this name on dismissal paper found in your folder.
  - Every child will have a number given to the caregiver at registration. You will find this information on the student roster in your folder. Remind the caregivers that the person picking up the child will need to tell you that child's number at dismissal.
- ❖ **Dismissal Procedures:** Parents and caregivers will come to your group to pick up their children in the sanctuary. Please remain there until all children have been dismissed.
  - Ask for the parent/caregiver name, child's name and number, check the name and number on the pink paper and have them initial it.
  - It is also okay to ask for a photo ID and check to see that matches the name you were given when the child came in the morning.
  - Be sure to send home anything the kids received that day, especially info for families!
  - If you have children in your crew that belong to volunteers, please keep them with you until all other children have been picked up and then walk them to their parent, grandparent, or caregiver.
- ❖ Be aware of any allergies or special circumstances for any students in your group. Specific information will be listed on the student roster in your folder.
  - Students with allergies will have a **red star** on their name tag.
  - Students whom do not have a photo release will have a **blue star** on their name tag.
- ❖ Parents/Guardians are entrusting their children to us. It's important to be good stewards of that trust and respect and protect confidential information. We are required by the state of Ohio to report suspicions of abuse and neglect. Refer to the Safe Sanctuary Policy for definitions of abuse and neglect. Please contact Kathy, Pastors Steve and Cara regarding any situations.
- ❖ Be mindful of the age level characteristics and developmental stage of the children you are working with. Use lots of positive reinforcement and encouragement!
- ❖ Practice appropriate forms of touch. 3 safe places to touch a child are hand, shoulder and upper back. Never against a child's verbally or non-verbally expressed discomfort.
- ❖ Be aware of the location of emergency information. Fire escape and tornado procedures and the location of first aid kits are posted near the door of each room.
- ❖ Keep your eyes on your group. Know how many children are there and count them frequently!
- ❖ If someone gets hurt or you need assistance, contact Kathy, registration table or the church office. Injury/Accident reports will need to be completed and a copy given to parents/guardians.
- ❖ Be aware of your surroundings, keep eyes and ears open and use best practices for the safety of all children, youth, vulnerable persons, volunteers and the ministry of the church as you serve. If you are unsure or uncomfortable about something, contact the leaders in charge.
  - Visitors will be asked to sign in at the office and wear a nametag. If you notice anyone without a name tag direct them to the church office.
- ❖ We encourage you to share your experience at all of Faith UMC's ministries. If you choose to use social media, follow guidelines described in the Safe Sanctuary policy remembering that you represent Faith UMC.

Please call or text any of the following numbers if you need assistance: **Pastor Cara** 330-224-7107, **Pastor Steve** – 330-224-7337, **Kathy Schmucker** 330-224-6138, **Church Office** 330-499-6040, **Childcare cell** 330-418-1620, **Amy Ferguson** – 330-704-6358

# FUMC Safe Sanctuaries

## Quick Reference Guide

### **ADULT LEADER POLICY**

- Adults who serve with children, youth or vulnerable adults must complete an application, be trained, and have a completed background check on file with the church office.
- Each classroom/meeting space needs to have two adults present at all times for the safety of both the adults and the children/students.
- Registration Forms with emergency/medical information are available in the church office or from the leader in charge of the event.

### **SUPERVISION OF CLASSROOM ACTIVITIES**

A concerted effort will be made to provide two adults for all classroom activities involving children and youth. When two adults are not available, a designated person will periodically check the rooms and be aware of the children/youth's whereabouts if they leave the classroom area. While recognizing the important role of youth volunteers in children's ministries and in an effort to ensure a safe environment, all activities involving children and youth will be supervised by at least one adult who is nineteen years of age or older. Persons supervising activities must be at least five years older than the children or youth they are supervising.

### **SUPERVISION OF NON-CLASSROOM ACTIVITIES**

At least two adults will be present for all non-classroom activities involving children and youth.

### **OPEN DOOR POLICY**

Parents/guardians, volunteers, or staff of the church may visit and observe the program at any time.

### **Child/Youth Advising**

In instances of child/youth conversations where circumstances dictate that conversation will be most effective on a one-on-one basis, church staff may meet individually with a child/youth with the awareness and previous consent of that individual's parent or legal guardian. Exceptions to consent may be made for emergencies. Conversation should take place in an open and/or visible setting. Volunteers should share conversations with the pastors or staff who supervise the ministry they are involved in and encourage student to speak with staff or pastor.

### **Dismissal from Group Events**

In group events, it may be inevitable that one child's or youth's transportation from the event arrives after all other children/youths' transportation has arrived. In those circumstances, a child/youth may unavoidably be in the individual presence of an adult. In the event this circumstance is unavoidable, the adult in charge should exercise best practices for the well-being of vulnerable persons.

Youth are not allowed to leave the church unsupervised during an event without parental permission on file. Parents will be notified of any infractions of this policy.

### **OFF-SITE TRIP AND RETREAT SUPERVISION**

- There shall be at least two adults present for all trips, retreats, and other times that children/youth gather at or away from the church building.
- There shall be at least one adult of each gender present at co-ed overnight events. At single gender overnight events, at least one of the two or more adults present will be of the same gender as the children/youth.

- In situations where two adults are not available per room where children/youth are staying overnight, then no adult should stay alone in a specific room with the children/youth. Parents should be made aware of housing accommodations.
- Permission slips including permission for emergency medical care shall be carried by the person in charge of each trip and/or retreat.
- Parent must receive contact info to include:
- start/stop times, location of event, program content, lodging information, covenant rules expected of their child
- Staff/volunteer/drivers must receive: all contact information for parents, signed parent/guardian permission/liability form, health/emergency information

### **DRIVING AND TRANSPORTATION**

- Drivers must be known to the designated leader of the event.
- Drivers must have a current “Designated Transportation Provider” form on file as well as a valid state driver’s license, proof of insurance, and be at least 21 years old.
- Drivers must obey all traffic laws and speed limits.
- All passengers including adults must use an individual seat belt while traveling.
- Drivers must transport more than one student at a time
- Students are not permitted to drive as part of youth events, transporting other youth.
- A minimum of one copy of the EMPFs is needed per vehicle in the caravan.
- If a church authorized driver is using the church bus, he/she must be trained by a Trustee and be familiar with “Guidelines for Van Use” which is available in the church office.

### **SOCIAL MEDIA AND TECHNOLOGY**

Given the increased use of technology and social media in the life of the church and its individual members, faith communities have a responsibility to define social media policies that uphold the covenant to create Safe Sanctuaries for vulnerable persons. All persons serving in ministries with children, youth and vulnerable persons should following the guidelines for the use of social media, technology and the internet as stated in Faith UMC’s Safe Sanctuary policy.

### **RESPONSE TO ACCIDENTS, INJURIES, ALLEGATIONS OF ABUSE**

- In order to ensure proper attention was given to an injury or accident, an accident/injury report must be completed by the adult supervisor within 24 hours of the incident whenever a vulnerable person is injured. Parents and/or guardians will receive a copy of the Accident/Injury report.
- If abuse is suspected by, observed by or disclosed to a volunteer and/or paid staff member of the church, that person must follow reporting requirements and report the incident immediately to the pastor. If that person is uncomfortable reporting the incident to the pastor, then the alleged abuse should be reported to the staff person who supervises that ministry area. The person reporting the incident and the pastor or other person consulted shall seek the advice of the church’s attorney to determine if the incident requires reporting under state law.

**Safe Sanctuary Application - FAITH UNITED METHODIST CHURCH**

All four pages of this application are to be completed by all persons (volunteer or compensated) who desire to work/volunteer in ministries serving children, youth and/or vulnerable adults, as well as all staff, paid and unpaid interns, etc serving at Faith UMC. This application form is being used to help the church provide a safe and secure environment for everyone who participates in our programs.

Date: \_\_\_\_\_

Name: \_\_\_\_\_  
Last First Middle

Former Name (if applicable): \_\_\_\_\_  
Last First Middle

Present address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code: \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Cell Phone (\_\_\_\_) \_\_\_\_\_

How long have you lived at the above address? \_\_\_\_\_ E-mail address: \_\_\_\_\_

If less than one year, provide all previous addresses for the past five years.

\_\_\_\_\_  
\_\_\_\_\_

Please indicate the areas you would like to serve at Faith UMC. \_\_\_\_\_

Please indicate the date you would be available to begin. \_\_\_\_\_

What is the minimum length of commitment you can make? \_\_\_\_\_

Why would you like to serve in ministries with children, youth, and vulnerable adults? How are you called to this ministry? \_\_\_\_\_  
\_\_\_\_\_

Have you ever been charged with, convicted of, or pleaded guilty to or no contest to a crime against children or other persons?

\_\_\_\_ Yes (If yes, please explain – attach a separate page, if necessary) \_\_\_\_\_  
\_\_\_\_ No

Have you ever committed any act of child abuse or sexual misconduct against a minor?

\_\_\_\_ Yes (explain on an attached page) \_\_\_\_\_ No

\*\*\*\*\*

**REQUIRED INFORMATION (If 18 and over)**

The information entered below will be SHREDDED after it is entered into a secure website for a background check.

Date of Birth: \_\_\_\_\_ Previous/Maiden Names: \_\_\_\_\_

Social Security Number: \_\_\_\_\_

List any gifts, callings, training, education, or other factors that have prepared you for working with children, youth, and vulnerable adults:

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At Faith UMC, we believe that it is important for volunteers who are nurturing the faith foundation of others to also be nurturing their personal faith development.

How would you describe your desire to grow in your faith; your spiritual practices? \_\_\_\_\_

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I understand that participating in periodic training is important to maintaining a safe environment and a requirement for serving at Faith UMC. YES \_\_\_\_\_ NO \_\_\_\_\_

Our church has an open door policy which means that a parent, volunteer, or church staff member can visit/observe at any time. Are you comfortable with this atmosphere? \_\_\_\_\_

Our church encourages the use of two teachers/leaders for all children/youth activities. Are you comfortable working in teams? \_\_\_\_\_

#### CHURCH HISTORY AND PRIOR EXPERIENCE

How long have you been attending Faith United Methodist Church? \_\_\_\_\_

Name of church of which you are a member: \_\_\_\_\_

List (names and address) of other churches you have attended regularly during the past five years:

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List all previous church work involving children, youth, and/or vulnerable adults (list each church's name and address, type of work performed, and dates):

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List all previous non-church work involving children, youth, vulnerable adults (list each organization's name and address, type of work performed, and dates):

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**FAITH UNITED METHODIST CHURCH  
REFERENCES**

Please list three persons who are familiar with your character, particularly as it relates to supervision of children, youth, and vulnerable persons. Try to include one reference from previous church experience if possible. None of the references may be a relative.

1. \_\_\_\_\_  
Name Relationship

\_\_\_\_\_

Address

\_\_\_\_\_

Home Phone Cell Phone

2. \_\_\_\_\_  
Name Relationship

\_\_\_\_\_

Address

\_\_\_\_\_

Home Phone Cell Phone

3. \_\_\_\_\_  
Name Relationship

\_\_\_\_\_

Address

\_\_\_\_\_

Home Phone Cell Phone

**FAITH UNITED METHODIST CHURCH  
APPLICANT'S AUTHORIZATION AND RELEASE**

I certify that all the information on this application is truthful and completely accurate. I authorize representatives of Faith United Methodist Church to obtain any information regarding my character and fitness for children and youth work, which will include a background check conducted by the Safe Sanctuary Ministry Group. I will sign any necessary authorizations in order to accomplish that purpose. In consideration of the receipt and evaluation of this application by Faith United Methodist Church, I release any individual, church, youth organization, employer, reference, other person or organization, both collectively and individually, from 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 in this application.

Should my application be accepted, I agree to abide by Faith United Methodist Safe Sanctuaries Policy and abide by all rules and laws. I will live by the understanding that, as a person in authority, it is my responsibility to avoid inappropriate behavior with any children or youth in my care.

I further state that I HAVE CAREFULLY READ THE FOREGOING AUTHORIZATION AND RELEASE AND KNOW THE CONTENTS THEREOF AND I SIGN IT AS MY OWN FREE ACT. This is a legally binding agreement which I have read and understand.

**Photo Release** – I give my permission for Faith United Methodist Church to publish my pictures (without ID) in church related activities for the purposes of promoting/celebrating Faith United Methodist Church and its programs in local newspapers, church newsletter, church bulletin, church website and/or social networks maintained by Faith UMC.

Check One :             Yes             No

Applicant's Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent or Guardian Signature if under age 18 \_\_\_\_\_

Date \_\_\_\_\_

**FAITH UNITED METHODIST CHURCH  
TRANSPORTATION PROVIDER**

**IN ORDER TO BE ACCEPTED AS A DESIGNATED DRIVER, APPLICANT MUST ALSO COMPLETE THE SAFE SANCTUARY  
MINISTRY GROUP BACKGROUND APPLICATION**

Are you at least 21 years old? \_\_\_\_\_ Do you have a valid state driver's license? \_\_\_\_\_

Driver's License #: \_\_\_\_\_ State of Issue: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Insurance Company: \_\_\_\_\_ Policy #: \_\_\_\_\_

Agent's Name: \_\_\_\_\_ Agent's Phone #: \_\_\_\_\_

Agent's Address: \_\_\_\_\_

I, the undersigned, give my authorization to representatives of Faith United Methodist Church to verify the information on this form and release said representative and the organization from any and all liability for damages of whatever kind or nature that may result at any time, because of compliance or any attempts to comply, with this authorization. I waive the right to inspect any information provided about me by any person or organization identified by me in this application. I certify that all the information on this application is truthful and completely accurate and authorize the church to verify this information with the Bureau of Motor Vehicles and other government agencies as deemed necessary. By signing, I agree to abide by safety procedures established by the church as outlined in the Faith United Methodist Church Safe Sanctuaries Policy and abide by all laws.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print the following:

Full name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

In addition to this completed form, we would like to have a copy of your Driver's License and Proof of Insurance.

**FAITH UNITED METHODIST CHURCH  
ACCIDENT/INJURY REPORT**

This form is to be completed by the adult supervisor whenever an injury, accident, etc. occurs. A copy is then to be given to the child's parent/guardian and the pastor. The church must also keep a copy of the completed form.

Name of class or activity: \_\_\_\_\_ Adult supervisor: \_\_\_\_\_

Name of injured child: \_\_\_\_\_ Birthdate of child: \_\_\_\_\_ Age: \_\_\_\_\_

Parents/Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Date and time of incident: \_\_\_\_\_

Description of incident

1. Describe the incident (use back of page if necessary).
2. Where in the facility or elsewhere did the incident occur?
3. What area of the child/youth's body was injured?
4. What was the child/youth doing when the incident happened?
5. How did the incident happen?
6. Give the names of adults supervising the child/youth at the time of the incident.
7. Give the name(s) of any other witnesses to the incident.
8. How did the child/youth respond after the incident?
9. Was first aid given or some other action taken? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes by whom?  
Describe:
10. Who notified the parent and when?

Signature of person completing the form: \_\_\_\_\_

Date: \_\_\_\_\_

**FAITH UNITED METHODIST CHURCH  
INCIDENT REPORT**

This form is to be completed by the pastor, staff, and/or Safe Sanctuary representative regarding a Safe Sanctuary incident. Copies are to be kept in the Safe Sanctuary files maintained by the Director of Administration and Finance. (One copy in the incident folder, one copy with the individuals Safe Sanctuary forms.)

Name of person who received disclosure of incident: \_\_\_\_\_

Name of class or activity where incident occurred: \_\_\_\_\_ Adult Supervisor: \_\_\_\_\_

Name of persons involved in the incident: \_\_\_\_\_

Parents/Legal Guardians if minors: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Date and time of incident: \_\_\_\_\_

Describe the incident. Use back of page if necessary and include responses to the following questions:

1. Description of the incident.
2. Where in the facility or elsewhere did the incident occur?
3. How did the incident happen?
4. Give the names of adults supervising the child/youth/vulnerable persons at the time of the incident.
5. Give the name(s) of any other witnesses to the incident.

When was the incident shared with pastor or staff?

Describe the follow up actions that were taken in response to the incident.

1. Date of meetings with person (s) involved in the incident.
2. Were any existing background checks updated? Were the Safe Sanctuary practices reviewed?
3. How was the person made aware of how the action resulted in a report of a Safe Sanctuary incident?
4. Were parents/guardians of persons involved notified? By whom and when?
5. Who followed up with the person who reported the incident and when?

Signature of person completing the form: \_\_\_\_\_

Date: \_\_\_\_\_

**FAITH UNITED METHODIST CHURCH  
REPORT OF ALLEGED ABUSE**

This form is to be completed by the person who observed the suspected abuse or to whom the suspected abuse was disclosed.

Name of accused: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Name of victim: \_\_\_\_\_ Age: \_\_\_\_\_

Parents/Legal Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Nature of abuse: \_\_\_\_\_  
\_\_\_\_\_

Site/location: \_\_\_\_\_

Date(s) if possible: \_\_\_\_\_ Time(s): \_\_\_\_\_

Date on which this information was given: \_\_\_\_\_

When was Children Services or the local law enforcement agency contacted? \_\_\_\_\_

Who contacted Children Services or the local law enforcement agency? \_\_\_\_\_

Who has received this information? \_\_\_\_\_

Name of person completing this form: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Other factual information which will be helpful:

Place in a secure file in the church office. The church must also file a copy of this form with the bishop's office of the East Ohio Conference where it will be placed in a secure file.

**Faith UMC Children and Youth Emergency Medical Permission Form  
One Form Per Child**

Effective Dates: May \_\_\_\_\_ to August \_\_\_\_\_

Name of Child/Youth \_\_\_\_\_ Grade \_\_\_\_\_

Birthdate: \_\_\_\_\_ Age: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Student's Email and Cell Phone: \_\_\_\_\_

Check here to give FUMC staff permission to use social media or to email/text this student regarding logistics of program activities.

Mother/Guardian's Name(s) \_\_\_\_\_

Address (If different from child's): \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Mother's Email: \_\_\_\_\_

Mother's Preferred Phone Number: \_\_\_\_\_

Father/Guardian's Name(s) \_\_\_\_\_

Address (If different from child's): \_\_\_\_\_ City/State/Zip \_\_\_\_\_

Father's Email: \_\_\_\_\_

Father's Preferred Phone Number: \_\_\_\_\_

How can we contact you while your child is participating in Faith UMC programs?  
\_\_\_\_\_

If it is not possible to reach me, an alternate person to be contacted is:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Names of persons who have permission to pick up your child from Faith UMC events:  
\_\_\_\_\_

Names of any persons **NOT** Authorized to Pick up Child: \_\_\_\_\_

**Known allergies are:** \_\_\_\_\_

**Pertinent health history information:** \_\_\_\_\_  
\_\_\_\_\_

**Please list below any additional helpful information about your child that you would like our program staff to know to support their participation in Faith UMC's Children or Youth programs. Please include any special needs, or other information that will help your student have a great experience at Faith UMC.**  
\_\_\_\_\_  
\_\_\_\_\_

Medications: \_\_\_\_\_

Medical Insurance Company and Policy Number: \_\_\_\_\_

Name of Physician or Clinic/Hospital: \_\_\_\_\_ Phone: \_\_\_\_\_

**PERMISSION TO PARTICIPATE/WAIVER**

My child, named above, has my permission to participate in the Faith UMC Children and Youth programs offered by Faith United Methodist Church that I have checked below. I understand the program and activities and feel my child can participate in these programs. I understand that additional permission forms will need to be signed for my child to participate in overnight or offsite events. In submitting this registration, I hereby waive on behalf of my child, myself, my heirs, executors and assigns, all claims of any nature as a result of or arising out of my child’s participation in Faith UMC’s Children and Youth Ministry activities and do hereby release Faith United Methodist Church, all sponsors, workers, officials, staff and volunteers from any claim whatsoever arising from participation in this event.

\_\_\_ Children’s Sunday School \_\_\_ Wednesday Night Faith Connections (Children) \_\_\_ Children’s Choir

\_\_\_ Friday Night Out(Date Night) \_\_\_ Sewing for Missions \_\_\_ Confirmation

\_\_\_ Refuge Youth Group \_\_\_ Wednesday Youth \_\_\_ Youth Sunday School \_\_\_ Youth or Adult Choir

\_\_\_ Nursery \_\_\_ Faith UMC Childcare during church functions \_\_\_ Other: \_\_\_\_\_

**MEDICAL AUTHORIZATION**

I give my consent for emergency medical treatment by a certified first-aider. In the event that additional treatment is needed, the staff of the Emergency Room of the hospital listed above, or one closest to the event location, has my permission to treat my child/youth.

I do not give my consent for emergency and/or medical treatment of my child. I wish for the following action to be taken: \_\_\_\_\_

**PHOTO RELEASE**

I give my permission for Faith United Methodist Church to publish images of my child in church related activities for the purposes of promoting/celebrating Faith United Methodist Church and its programs in local newspapers, Faith United Methodist Church newsletter, church bulletins, church website, and/or social networks maintained by Faith UMC.

By typing my name below, I confirm I am the parent/guardian for the child listed on this form and that my electronic signature signifies all information contained in this registration is accurate to the best of my knowledge.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**QUESTIONS OR COMMENTS**

Please list below any questions or comments you may have about FAITH’S Children or Youth Programs.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# FAITH UMC EVENT-SPECIFIC PERMISSION FORM

## USE FOR OVERNIGHT EVENTS OR EVENTS HELD OFF CHURCH PROPERTY

(Items in italics to be completed by ministry leaders for each event hosted by the ministry under their oversight).

Event: \_\_\_\_\_  
*Location name & address*

Date of Event: \_\_\_\_\_ Time of Event: \_\_\_\_\_  
*Include starting time & time of return*

What to bring:

Names & Phone Numbers of Leaders in Charge:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Return Bottom Portion to Church Group Leader/Event Coordinator.**

---

I give permission for my child, \_\_\_\_\_, to attend

\_\_\_\_\_ with Faith United Methodist Church  
*Name of event*

\_\_\_\_\_ On \_\_\_\_\_  
*Name of church group/ministry date of event*

Telephone #'s where I can be reached while my child is attending this event:

Cell Number: \_\_\_\_\_

Other Number: \_\_\_\_\_

I give permission for my child, \_\_\_\_\_, to be transported

To \_\_\_\_\_ by Safe Sanctuary trained Designated Transportation  
*(Location)*

Provider, either in the church bus or private vehicles.

I have completed and submitted a 20\_\_ – 20\_\_ Faith UMC Medical Release & Registration Form to the church group leader/event coordinator: yes \_\_\_\_\_ no \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

FAITH UNITED METHODIST CHURCH

Request for Administration of Medication for Overnight Events or Special Circumstances

Part 1 To Be Completed By Parent/Guardian:

Name of Child: \_\_\_\_\_ Birthdate of Child: \_\_\_\_\_ Weight: \_\_\_\_\_

Please check all that apply and complete instructions for each medication.

\_\_\_ Prescription Medication    \_\_\_ Nonprescription Medication    \_\_\_ Food Supplement

\_\_\_ Topical Product or Lotion (Example Sunscreen)    \_\_\_ Refrigeration Required    \_\_\_ Modified Diet

Name of Medication: \_\_\_\_\_ Sunscreen \_\_\_\_\_ Exact Dosage: \_\_\_\_\_ Enough to cover exposed skin. \_\_\_\_\_

To be administered at the following times: \_\_\_\_\_ At start of day and before outdoor activities. \_\_\_\_\_

For the following period of time: \_\_\_\_\_

Name of Medication: \_\_\_\_\_ Exact Dosage: \_\_\_\_\_

To be administered at the following times: \_\_\_\_\_

For the following time period: \_\_\_\_\_

Name of Medication: \_\_\_\_\_ Exact Dosage: \_\_\_\_\_

To be administered at the following times: \_\_\_\_\_

For the following time period: \_\_\_\_\_

Parents/Legal Guardians Name: (Please Print) \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Part 2 To Be Completed by a Licensed Physician, Licensed Dentist, Advanced Practice Registered Nurse or Certified Physician's Assistant in the event of any of the following:

1. The medication contains codeine or aspirin.
2. A physician's instruction is needed for a nonprescription medication (e.g. child does not meet minimum age or weight requirements as listed on the label instructions).
3. It is a sample medication without a prescription label.
4. The nonprescription medication is to be given longer than 3 days.
5. The topical product or lotion and the physician's instructions exceed the manufacturer's instructions for use.

Name of medication, vitamin, diet supplement: \_\_\_\_\_

Dosage: \_\_\_\_\_

Possible Side Effects: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Additional Instructions: \_\_\_\_\_

The child named above is under my care and should receive the above medication as written.

Signature of Physician, Dentist, Advanced Practice Registered Nurse or Certified Physician's Assistant:

Print Name and Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Children/Youth Community Ministry  
Registration Form Template**

(VBS, Camp Read-A-Lot, Created By God, Arts Camp,  
Honors Choirs, etc)

**REGISTER ONLINE AT  
WWW.FAITHUMCHURCH.ORG**

**One Form Per Child**

Child's Name \_\_\_\_\_

Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ Grade Entering in Fall \_\_\_\_\_ School: \_\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

Child's Address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

Preferred Phone Number(s): \_\_\_\_\_

How can we contact you while your child is participating in this program? \_\_\_\_\_

If it is not possible to reach me, an alternate person to be contacted is:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Relationship to Child: \_\_\_\_\_

Names of persons picking up child \_\_\_\_\_

Names of any persons **NOT** Authorized to Pick up Child: \_\_\_\_\_

Known allergies are: \_\_\_\_\_

Pertinent health history information: \_\_\_\_\_

Please list below any additional helpful information about your child that you would like our program staff to know to support their participation in Faith's \_\_\_\_\_. Please include any special needs, special friend your child needs to be with or other information that will help to make Faith's \_\_\_\_\_ a great experience for your child. \_\_\_\_\_

Medications: \_\_\_\_\_

Medical Insurance Company and Policy Number: \_\_\_\_\_

Name of Physician or Clinic/Hospital: \_\_\_\_\_ Phone: \_\_\_\_\_

How did you hear about Faith's \_\_\_\_\_: \_\_\_\_\_

Are you currently associated with a church? If so, please list the name of the church.

(OVER)

**PERMISSION TO PARTICIPATE/WAIVER**

My child, named above, has my permission to participate in Faith UMC’s 20\_\_ \_\_\_\_\_ offered by Faith United Methodist Church. I understand the program and activities and feel my child can participate in this program. In submitting this registration, I hereby waive on behalf of my child, myself, my heirs, executors and assigns, all claims of any nature as a result of or arising out of my child’s participation in Faith UMC’s \_\_\_\_\_ activities and do hereby release Faith United Methodist Church, all sponsors, workers, officials, staff and volunteers from any claim whatsoever arising from participation in this event.

**MEDICAL AUTHORIZATION**

I give my consent for emergency medical treatment by a certified first-aider. In the event that additional treatment is needed, the staff of the Emergency Room of the hospital listed above, or one closest to the event location, has my permission to treat my child/youth.

I do not give my consent for emergency and/or medical treatment of my child. I wish for the following action to be taken: \_\_\_\_\_

**PHOTO RELEASE**

I give my permission for Faith United Methodist Church to publish images of my child in church related activities for the purposes of promoting/celebrating Faith United Methodist Church and its programs in local newspapers, Faith United Methodist Church newsletter, church bulletins, church website, and/or social networks maintained by Faith UMC.

**FAITH’S CAMP READ-A-LOT ENROLLMENT COMMITMENT** (Additional questions pertinent to the specific program may be added.)

I will make my child’s regular workshop attendance a priority and will spend time using literacy materials with my child at home each week.

By typing my name below, I confirm I am the parent/guardian for the child listed on this form and that my electronic signature signifies all information contained in this registration is accurate to the best of my knowledge.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**QUESTIONS OR COMMENTS**

Please list below any questions or comments you may have about FAITH’S \_\_\_\_\_..

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Name of event or logo here.**

**Faith’s \_\_\_\_\_ Dates:**

*Faith United Methodist Church – [www.faithumchurch.org](http://www.faithumchurch.org)*

# Faith UMC Recreation Activity Registration Form

(Run 2 Resurrection, Softball League, Cooking Class, etc)

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

How did you hear about Faith UMC's \_\_\_\_\_ ? \_\_\_\_\_

Emergency Contact Name & Number: \_\_\_\_\_

Medical Insurance Policy Name and Number: \_\_\_\_\_

Name & Number of Physician or Clinic/Hospital: \_\_\_\_\_

Allergies or Other Relevant Medical Information: \_\_\_\_\_

**PHOTO RELEASE:** I give my permission for Faith United Methodist Church to publish images of myself and/or my child in church related activities for the purposes of promoting/celebrating Faith United Methodist Church and its programs in local newspapers, Faith United Methodist Church newsletter, church bulletins, church website, and/or social networks maintained by Faith UMC.

**MEDICAL AUTHORIZATION:** I give consent for emergency medical treatment by a certified first-aider. In the event that additional treatment is needed, the staff of the Emergency Room of the hospital listed above, or one closest to the event location, has permission to treat myself or my child/youth, at my expense.

**WAIVER:** In submitting this registration, I hereby waive on behalf of myself, my heirs, executors and assigns, all claims of any nature arising from participation in Faith UMC's \_\_\_\_\_ activities and do hereby release Faith United Methodist Church, all sponsors, workers, officials, staff and volunteers from any claim whatsoever arising from participation in this event.

**ACKNOWLEDGEMENT:** I know that participating in a \_\_\_\_\_ is a potentially hazardous activity and I should not participate unless I am medically able to do so and have properly trained. I assume all risks associated with participating in this activity including, but not limited to: falls, contact with other participants, and sport equipment, the effects of weather, and course/field conditions, and waive any and all claims which I might have based on any of those and other risks typically found in \_\_\_\_\_. I acknowledge all such risks are known and understood and agree to abide by all decisions of any \_\_\_\_\_ official relative to ability to safely participate. I certify as a material condition to being permitted to participate in \_\_\_\_\_ that I am physically fit and sufficiently trained for participation in this activity. I agree to abide by all the rules for participation.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PARENTAL PERMISSION:** My child, named above, has my permission to participate in Faith UMC's \_\_\_\_\_ activities offered by Faith United Methodist Church.

I have completed and submitted a 20\_\_ – 20\_\_ Faith UMC Children/Youth Medical Release Form: yes \_\_\_ no \_\_\_

Parent/Guardian signature if Child Under 18: \_\_\_\_\_

Date: \_\_\_\_\_ Telephone Number: \_\_\_\_\_



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**FAITH UNITED METHODIST CHURCH  
SAFE SANCTUARIES  
INTERVIEW GUIDELINES**

Goals of the interview:

1. Work from and complete the application form and fill in any gaps in the application form.
2. Open opportunities for further discussion on the part of the applicant.
3. Observe how applicant conducts self in the process.
4. Keep a written record of applicant's responses to the interview questions.

In conducting an interview, the interviewer should be aware when "red flags" are raised concerning the applicant. These "flags" are indicators of issues which must be explored further to be assured that all information is collected concerning a prospective employee/volunteer. Some of the "flags" may include:

**Many addresses or churches attended over a short period of time.**

This could indicate that a person is trying to be anonymous. It could also indicate that he/she is/was a college student who moved a lot to maintain low rent.

**Wants to work with only one age group.**

If someone would like to work with only one specific age group, it could indicate that person has targeted that age group for molestation. It could mean that is the age group for which he/she is trained, and experience has shown that he/she does not work well with other ages. Be aware of those who seem overly committed to one age group. For example, someone who simultaneously leads a scout troop, coaches Little League, serves as a Big Brother and now wants to teach Sunday School may be neglecting his/her own age-appropriate peer relationships in order to cultivate potential victims.

**Does not want/need/like close supervision.**

The interview may indicate that the person does not like to be closely supervised. This might raise questions about motivation for applying for this work.

Interviewers need to be able to explore issues as they arise during the interview and depart from the set of prepared questions to do so. It is helpful, therefore, if interviewers prepare ahead of time for the interview by:

1. Reading the application
2. Noting areas for exploration

Sample Interview Questions:

1. Why are you interested in being associated with our church?
2. How would you describe yourself?
3. When you heard about this position, what appealed to you the most?
4. What specific skills do you bring to this position?
5. With what age group and gender do you prefer to work? Why? Please give examples of your work with this age group.
6. If you are trained for a certain age group, are you willing to work with other age groups or gender?
7. What kind of programs or activities would you be willing to lead, supervise, or conduct? If trained, would you be willing to conduct other activities?
8. What do you feel are chief indicators of a successful program or activity?
9. Give a specific example of how you overcame a difficulty in job, school, or family.
10. Give an example of how you overcame a problem with a youngster other than your own. How were you disciplined as a child? How would/do you discipline?
11. Under what supervision style to you work best?
12. In what types of activities or recreation do you participate?
13. What were your favorite subjects in school?
14. What would you like to tell us that hasn't been covered?
15. What questions do you have about our congregation?
16. Other questions to raise regarding information given on the information form?

One might conclude the interview with one or two hypothetical situations which are typical in FUMC and then ask the applicant how he/she would respond in that situation.

**FAITH UNITED METHODIST CHURCH  
SAFE SANCTUARIES  
WRITTEN RECORD OF CONTACT WITH A REFERENCE OF A SAFE SANCTUARY APPLICANT**

(Complete one form for each reference contacted)

**CONFIDENTIAL**

1. Name of applicant: \_\_\_\_\_
  
2. Individual, church, or organization contacted (if a church or organization, identify both the church or organization and minister or person contacted). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
3. Date(s) and time(s) of contact(s): \_\_\_\_\_  
\_\_\_\_\_
  
4. Person contacting the reference: \_\_\_\_\_
  
5. Method of contact (e.g. telephone, personal conversation, letter/e-mail [please attach]):  
\_\_\_\_\_
  
6. Summary of conversation (summarize the reference's remarks concerning the applicant's fitness and suitability for youth or children's work).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Position: \_\_\_\_\_

Date: \_\_\_\_\_

**FAITH UNITED METHODIST CHURCH  
SAFE SANCTUARIES**

**PROCEDURES FOR HANDLING SAFE SANCTUARY INFORMATION AND FORMS**

1. Background check form will always be turned in to the Church office in the provided security envelope. Envelope should always be sealed when turned in.
2. Envelope will only be opened by two (2) members of the Safe Sanctuary Ministry Group.
3. Information will be entered in to the "Protect My Ministry" or other background check provider's site by a member of the Safe Sanctuary Ministry Group to secure a background check for each applicant. After the check, the tear off section will be shredded. Files will be held in a double locked secure location.
4. All background checks will be reviewed by a member of the group and any concerns will be turned over to the review team.
5. The review team will consist of the chairperson and two (2) members of the Safe Sanctuary Ministry Group. They will review any concerns about a background check and make a recommendation to the pastor(s).
6. The pastor(s) of Faith United Methodist Church will make the final decision on any application that has a questionable background check.
7. Any concerns that come from members of the Church community will be addressed by the chairperson and/or pastor(s) of Faith United Methodist Church.
8. All members of the committee will also have a background check and take any video training required of volunteers.
9. Background checks will be good for three (3) years and will be staggered so as to not overload the Church budget.

# **Faith UMC Youth\* Ministry Communication Policy**

Texting, e-mailing, and other forms of electronic communication have become common today, especially among students. Texting and electronic communication can be a vital part of youth ministry work, but their improper use can produce serious consequences.

*\*Youth is defined in this policy as students grades 6-12.*

## **Promoting Safety**

Faith United Methodist Church desires to promote safety and to create a healthy environment for texting and electronic communication between its youth workers and students who participate in youth ministry activities. As a result, Faith United Methodist Church has developed the following guidelines:

1. Employee and volunteer leadership youth workers (hereafter referred to as ministry youth workers) who want to communicate with minors using text messaging, e-mail, social networking websites or other forms of electronic media must first sign a consent form and attend Safe Sanctuary training. The class will outline the recommended practices, limitations, and legal parameters for texting and other forms of electronic communication within youth ministry.
2. Ministry youth workers may not transmit any content that is illicit, unsavory, abusive, pornographic, discriminatory, harassing, or disrespectful when communicating with each other or with minors involved in ministry activities.
3. Except in an emergency, youth workers may not transmit any personal information pertaining to a minor without the youth ministry participant and his or her parents or guardians signing consent forms. This applies to group texting, group e-mail, or any other public method of electronic communication. Personal information may include such things as a minor's name, phone number, e-mail address, or photograph.
4. Youth workers will discourage students from using cell phones during ministry programs except in an emergency, to contact a parent or guardian, or to place calls specifically approved by a leader.
5. The Youth Director will instruct youth and volunteer leadership youth workers periodically about the Youth Communications Policy.
6. Youth workers who become aware of possible child abuse through electronic media must immediately notify their supervisor. The ministry will comply with Safe Sanctuary procedures in compliance with and as mandated by law.
7. All information, images, or videos shared electronically through public ministry communications channels are not considered confidential.
8. To participate in ministry electronic communications, youths must sign a related consent form.
9. Youths who violate this policy may lose electronic communications privileges or be removed from the youth ministry program. The ministry's pastoral leadership will notify parents immediately of any violation.
10. Cellular phones can cause distraction if used while driving. For safety reasons, youth workers driving on ministry business are not to make calls unless they use a hands-free device. If they receive a phone call while driving, the youth worker should answer it using a hands-free device or pull off the road to a safe location as soon as possible.
11. Youth workers driving on ministry business are to avoid cell phone use- even hands-free- when transporting children, while driving in heavy traffic, during hazardous weather conditions, or when it violates local law.
12. Youth workers are never to send or read text messages while driving.
13. Youth workers will engage in peer accountability and will periodically review to help ensure maintenance of appropriate boundaries. This entails having a check in for all regular youth workers to assess who is texting who, a general sense of being in compliance, and the frequency of text messages to ensure the appropriate use of this tool. The Youth Director will periodically report to the Safe Sanctuary committee that these reviews have taken place.

## **Parent/Guardian Consent Form:**

# Faith UMC Youth Ministry Communication Policy

Name of minor: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

We have read Faith UMC's Youth Ministry Communications Policy and agree to its terms.

We understand that the ministry does not allow youth workers to transmit or receive any electronic content that is illicit, unsavory, abusive, pornographic, discriminatory, harassing, or disrespectful.

We also understand that the ministry cannot guarantee that all minors participating in youth activities will abide by the policy's terms. However, we realize that the ministry will seek to enforce the policy's terms to the best of its ability.

We acknowledge and understand that as parents we accept the responsibility of monitoring our children's electronic communications/social media networking.

Youth workers of Faith United Methodist have our permission to do the following:

1. Share our son or daughter's name, telephone number, and e-mail address with others involved in the youth ministry activity.
2. Share photos and other information about our son or daughter on Faith United Methodist's website and other electronic media channels controlled by the ministry.

If a dispute over this consent form or a claim for damage arises, we agree to resolve the matter through a mutually acceptable alternative dispute resolution process. If we cannot agree on a process, the dispute will be submitted to a three-member arbitration panel for resolution pursuant to the rules of the American Arbitration Association or a biblically-based alternative dispute resolution process. By signing this I agree that I have read and agree with all the aforementioned:

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

# **Participant Consent Form:** **Faith UMC Youth Ministry Communication Policy**

Faith United Methodist Church is committed to creating a safe ministry environment. This includes promoting a healthy environment for texting and other electronic communication between youth workers and students who participate in youth activities. As a result, the ministry has developed the following guidelines:

Cell phones are not to be used during ministry youth activities except in an emergency, to contact a parent or guardian, or to place calls specifically approved by a leader.

The ministry's policy bars youth workers from sharing personal information about any minor through group e-mails, social media, or other public electronic media without youth ministry participants and their parents or guardians signing consent forms, except in an emergency. Personal information may include such things as names, phone numbers, e-mail addresses, and photographs.

When communicating with youth workers, other people involved in youth ministry activities, or posting content to websites that the ministry owns or controls (such as its Facebook page), the following conditions apply:

1. You are not to make comments or share images that are sexually suggestive, abusive, disrespectful, or insensitive. Harassment and bullying are strictly forbidden.
2. You must obtain permission from an authorized youth ministry leader before posting photos or personal information about others involved in ministry activities on any website or social media site the ministry controls.
3. All information, images, or videos shared electronically through public ministry communication channels are not considered confidential.
4. Those who violate this policy may lose electronic communication privileges within the ministry or be removed from the youth ministry program. Parents will be notified immediately of any violation.

I understand and agree to the terms of this policy.

Name of Minor: \_\_\_\_\_

Signature of Minor: \_\_\_\_\_ Date: \_\_\_\_\_

# **Youth Worker Consent Form:** **Faith UMC Youth Ministry Communication Policy**

Texting, e-mailing, and other forms of electronic communication have become common today, especially among students. I understand that electronic media can play a vital role within youth ministry but can have serious consequences if used improperly.

As an employee or volunteer youth worker of Faith United Methodist Church, I agree to abide by the ministry's Safe Sanctuary policies and procedures relating to texting and electronic communication in connection with its youth program.

As a part of that policy, I authorize Faith UMC to obtain copies of telephone or Internet records related to my youth worker activities, if Faith UMC needs these records to investigate or document an incident. I agree to help the ministry obtain any records it requests.

I hereby release Faith UMC, including its officers, employees, and agents, from any and all claims, liability, damages, or causes of action for damages associated with this consent form or the communication policy, that may exist now or in the future. This may include, but is not limited to, damages arising from such claims as breach of privacy, defamation, libel, slander, emotional distress, and/or negligence.

I have read and fully understand the provisions of this document. I acknowledge that I have decided to sign this form voluntarily.

Youth Worker Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_