

Epworth United Methodist Church Safe Sanctuary Policy & Forms

Adopted 2012

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I. Conference Child Abuse Prevention Policy

The General Conference of The United Methodist Church adopted a resolution aimed at reducing the risk of child sexual abuse in the church. In accordance with *The Book of Resolution of the United Methodist Church –1996*, we adopt this policy for the prevention of child abuse in Epworth United Methodist Church (“Epworth”).

This policy takes effect immediately upon adoption by Epworth’s Administrative Council. This policy supersedes any policy previously adopted and is considered the full and complete Safe Sanctuary Policy at Epworth. This policy shall be reviewed annually by Epworth’s Safe Sanctuary Committee and any changes presented to Epworth’s Administrative Council.

Dissemination: This policy will be printed in the Church Conference booklet. Copies will be available through the church office. A copy will be posted in the narthex. The policy will be published on the church website.

II. Oversight

There has been established a Safe Sanctuary Committee charged with drafting, developing, implementing, and periodically reviewing and revising a Safe Sanctuary policy for Epworth. Said Committee is comprised of the Safe Sanctuary Chair, Pastor, Lay Leader, Chair of Staff Parish Relations Committee (the “SPRC”), Sunday School Superintendent, Youth Advisor and 2 lay persons. The chair shall be part of Administrative Council.

III. Basic Procedures for Safe Ministry with Children and Youth

These procedures are designed to encourage Epworth’s ministry to children and youth (the terms “children” and “youth” are defined as all those under the age of 18, and those terms may be used interchangeably without intending a different meaning) and reduce the possibility of harm to children, youth, and advisors within our midst. Each of the following procedures is an integral part of Epworth’s comprehensive abuse prevention strategy:

- Orientation for Advisors
- The “Two-Advisor” Rule
- The “Five-Years-Older” Rule
- No Advisors Under Eighteen
- Windows in Classroom Doors
- Advance Notice to Parents
- Participation Agreement for Advisors and Children/Youth
- Adequate Insurance Coverage

Orientation for Advisors

All those who work with children and youth, whether paid, volunteer, part-time, full-time, clergy, or laity are referred to herein as “advisors.” Advisors must attend an annual orientation session to learn about:

- Epworth’s policies for the prevention of child abuse;
- Procedures to be used in all ministries with children and youth;
- Appropriate steps to report a suspected incident of child abuse; and
- Details of the state laws regarding child abuse.

The orientation shall include presentation of the Safe Sanctuaries Policy and a building tour. The building tour shall include identification and location of all exits, fire extinguishers, first aid kits and similar safety equipment.

Coordinating orientation sessions falls under the responsibility of the Safe Sanctuary Chair.

At orientation advisors will be given an opportunity to renew their agreement to abide by Epworth's Safe Sanctuaries Policy. Epworth will maintain proof that it has informed all of its advisors about its policies. Advisors will be required to sign a written form indicating that they have been advised of, understand, and agree to follow Epworth’s policies in this area. Advisors who cannot attend will be contacted individually so they may be trained/updated and asked to renew their agreement.

The “Two-Advisor” Rule

The “Two-Advisor Rule” requires no fewer than two advisors on site during any church-sponsored program, event, or ministry involving children. Advisors are persons at least 18 years of age, and in order to qualify under the Two-Advisor Rule they must have successfully completed background checks approved by the Greater New Jersey Annual Conference of the United Methodist Church (the “GNJAC”). Completed background checks shall be maintained indefinitely by Epworth under the supervision of the Safe Sanctuary Chair.

Situations should be avoided where one advisor is with one child. Epworth’s goal is to have an advisor with first aid and/or CPR training available for each activity involving children and youth.

Children shall not be left unattended before, during, or after any event. All advisors who are identified as one of the “two advisors” on site shall register at each event. A record of attendance shall be taken of all those attending (youth and advisors) by the advisor in charge of the event. The advisor in charge shall submit said records on a regular basis to the Safe Sanctuary Chair.

Diapering may be completed by one of the “two advisors.” Diapering must take place in an area with an unobstructed view.

In classrooms or restrooms with half doors, the top half of the door must remain open at all times. One of the “two advisors” may assist any child in the restroom, but the top half of the door must remain open at all times.

Children who leave the classroom to use the restroom may be accompanied by one of the “two advisors” or an approved aide, as defined below. At no time may any advisor be with one child in any restroom with the outside door closed. If the child needs assistance in the restroom stall, the stall door must remain ajar.

The “Five-Years-Older” Rule

An advisor must be 5 years older than the oldest youth with whom he or she is working unless an exception is granted by the Administrative Council for good cause. All exceptions shall become part of the minutes of the Administrative Council and shall be kept on record by Epworth.

No Advisors Under the Age of Eighteen

No one under the age of 18 can be considered an advisor under the “Two-Advisor Rule” (see above).

Those under the age of 18, but at least 14 years of age, may be aides to the advisors. Names of the aides shall be provided to the pastor for approval in advance of any events at which the aides will assist. No person between the ages of 14 to 18 who has not been expressly approved by the pastor shall be considered an aide. Aides shall not be left with care and custody of children or youth except in emergencies requiring immediate attention.

Windows in All Classroom Doors

Each room used for children and/or youth and any counseling session should have a door with an unobstructed window in it or a half door to allow for full visual access. If the space is not so equipped the door shall remain open at all times.

Advance Notice to Parents

A basic rule for ministry with children and youth is providing parents with advance notice and full information regarding “special events” (defined as overnight events or off-site events not occurring during the regular meeting hours for that group) in which their children will be participating. Special event permission and medical release forms signed by parents or guardians must be provided to the advisor prior to the special event. Any child or youth who fails to provide a signed special event permission and medical release form shall be prohibited from attending the special event.

Participation/Registration Agreements for Advisors and Youth

All advisors shall first complete a written agreement of participation. This agreement is a statement in which the advisors agree to abide by Epworth’s Safe Sanctuary Policy and New Jersey law. Completed agreements will be kept on file in the church office.

All youth participating in an activity or ministry of Epworth shall have a parent/guardian complete a Youth Ministries Registration Form. Registration forms and general permission forms shall be required from all participants’ parents/guardians annually in September, or immediately upon the child’s enrollment in an activity.

Registration forms and general permission forms must be signed by a parent or guardian before the child will be permitted to participate in any youth activity or program at Epworth on a regular basis. Completed forms will be kept on file in the church office.

Adequate Insurance Coverage

Epworth recognizes its responsibility to have an updated certificate of occupancy and adequate insurance, including liability and workers' compensation, for the scope of its ministries, including coverage for allegations of abuse by advisors. The Board of Trustees shall be responsible for maintaining adequate insurance and ensuring the certificate of occupancy is current and valid.

All groups conducting programs for children, youth, or vulnerable advisors using Epworth's facilities must have adequate insurance, including liability and workers' compensation, for the scope of its ministries, including coverage for allegations of abuse. Those groups shall either provide Epworth with their safe sanctuaries policy, or they shall agree to abide by this Safe Sanctuary Policy, as may be amended from time to time.

The policies and procedures under this Safe Sanctuary Policy have been created with the express goal of preventing and reducing the risk of child/youth abuse within the ministries of Epworth. This information shall be disseminated to the full congregation in an effective, efficient manner.

IV. Congregational Plan for Responding to Allegations of Abuse

Plan Summary

This is a plan for complying with reporting requirements imposed by New Jersey law and for communications with church officials and the media. The pastor will contact GNJAC offices as appropriate. If the alleged abuse involves the pastor, the SPRC Chair will contact appropriate GNJAC officials.

What should be reported?

Every individual in New Jersey, including clergy, is legally required to report child abuse to the authorities if they have reason to believe that it is occurring. The New Jersey Department of Children and Families ("DCF") (formerly DYFS) (<http://www.nj.gov/dcf/reporting/how/index.html>) investigates reports of child abuse and neglect.

DCF operates a 24-hour hotline (1-877 NJ ABUSE 1-877-652-2873) to receive reports of suspected child abuse and neglect during evenings, weekends and holidays. This office will promptly investigate and respond to emergency reports.

Procedure

Reporting:

All complaints and allegations of child abuse occurring outside the church or its ministries should be reported to the DCF Abuse Hotline.

All complaints and allegations of child abuse occurring inside the church or during a church program or activity should be reported to DCF and the Pastor should be immediately informed. The pastor shall immediately contact other authorities.

Our job is not to try to investigate the suspected abuse, but to document the specifics that cause us to suspect abuse and to carefully report them. New Jersey law does not require proof to call the hot line.

Follow the following procedure immediately in response to a child's complaint or allegations of child abuse occurring inside the church or during a church program or activity.

1. Remove child to safe place. The safety of the victim is the primary concern.
2. Do not confront the alleged abuser with anger and hostility - treat with dignity but immediately remove from further involvement.
3. Notify the following authorities immediately. Document each contact using the Report Form for Suspected Abuse attached to these policies.
 - a. Call DCF hotline. DCF will instruct you of the steps you should follow for the specific situation.
 - b. Call police: 911 (Only if the child is in immediate danger and/or if directed by DCF)
 - c. Call Pastor Charlie Soper (Cell- 732-300-7410)
 - d. The pastor shall call:
 - The victim's parents
 - District Superintendent
 - Church insurance agent and attorney
4. All reporting shall be done immediately.
5. Keep a written record of all steps taken in response to the allegation.
6. Cooperate fully with any investigation conducted by law enforcement or child protective services.
7. Media inquiries. Only the pastor should speak to the media on behalf of Epworth United Methodist Church regarding any allegations of abuse. The pastor should refrain from communications with the media except after consultation with the District Superintendent and counsel.

Penalty For Failure To Report

According to New Jersey law, any person who knowingly fails to report suspected abuse or neglect, or to comply with the provisions of the law, is a disorderly person and subject to a fine up to \$1000 or up to six months imprisonment, or both.

Immunity From Civil Or Criminal Liability

Any person who, in good faith, reports abuse or neglect or testifies in a child abuse hearing resulting from such a report is immune from any criminal or civil liability as a result of such action.

FORMS

EPWORTH UNITED METHODIST CHURCH

AUTHORIZATION AND REQUEST FOR BACKGROUND CHECK

_____, hereby authorizes Epworth United Methodist Church to request trak-1 Technology to release information regarding any record of charges or convictions contained in its files, or in any criminal file maintained on me, whether said file is a local, state, or national file, and including but not limited to accusations and convictions for crimes committed against minors, to the fullest extent permitted by state and federal law. I do release trak-1 Technology from all liability that may result from any such disclosure made in response to this request.

Signature of Applicant

Date

Print applicant's full name: _____

Print all other names that have been used by applicant (if any): _____

Date of birth: _____ Place of birth: _____

Social Security number _____

Driver's license number: _____ State issuing license: _____

License expiration date: _____

Request sent to: _____

Name: _____

Address: _____

Phone: _____

Will you be transporting children, youth or vulnerable adults? yes no

This form will be securely filed and will be used solely to obtain information for your background check.

EPWORTH UNITED METHODIST CHURCH

ADVISOR PARTICIPATION COVENANT AGREEMENT

The congregation of Epworth United Methodist Church is committed to providing a safe and secure environment for all children, youth, and adult volunteers who participate in ministries and activities sponsored by the church. The following policy statements reflect our congregation's commitment to preserving this church as a holy place of safety and protection for all who would enter and as a place in which all people can experience the love of God through relationships with others.

1. No person who has been convicted of child abuse (either sexual abuse, physical abuse, neglect, emotional abuse, or ritual abuse) shall be permitted to work with children or youth in any church- sponsored activity.
2. Individuals must have been members of the congregation for at least six months before serving as an advisor.
3. Advisors shall observe the "Two-Advisor Rule" at all times so that no advisor is left alone with children or youth.
4. Advisors shall attend regular training and educational events provided by the church to keep informed of Epworth's policies and state laws regarding child abuse.
5. Advisors shall immediately report any behavior that is questionable and/or inappropriate consistent with the Safe Sanctuary Policy.
6. In all cases of suspected abuse, advisors shall follow the Safe Sanctuary Policy.

Please answer the following questions:

1. As an advisor in this congregation, do you agree to abide by all church policies regarding working in ministries with children and youth? Yes No
2. As an advisor in this congregation, do you agree to observe the "Two-Advisor Rule" at all times?
 Yes No
3. As an advisor in this congregation, do you agree to participate in training and education events provided by the church related to your volunteer assignment? Yes No
4. As an advisor in this congregation, have you filled out all necessary forms truthfully and accurately?
 Yes No

I have read this **ADVISOR PARTICIPATION COVENANT AGREEMENT**, and I agree to observe and abide by the policies set forth above and in the Safe Sanctuary Policy which I have received.

Signature of Applicant

Date

Print Full Name

YOUTH MINISTRIES REGISTRATION FORM

Epworth United Methodist Church
501 Morgan Ave., Palmyra, NJ 08065
856-829-1908

Child's Name _____ Nickname _____

Child's Date of Birth ____/____/____

Grade in school (or age) _____ School _____

Parent(s) or Guardian(s) Name(s) _____

Address _____

Phone # _____ Household e-mail Address _____

Allergies or other conditions we should be aware of (food reactions, physical limitations, etc.)

Emergency contact (name & phone #) _____

Who may pick up your child _____

Photo Consent

Epworth United Methodist Church will be taking photos at various events during the year. Photos may be used for Epworth UMC promotional publications or advertising materials (printed or electronic). We request your consent should your child appear in a published photo taken during the year.

_____ I give my permission for photographs of _____ enrolled in the Epworth UMC Sunday School and/or Youth programs to appear in various promotional materials. I understand that photographs will be the property of Epworth and this consent also serves to waive all rights of privacy or compensation which I may have in connection with the use of my child's photograph and/or name.

_____ Please do not use photographs of my son/daughter _____ in any promotional publications or materials for Epworth UMC.

Signature of parent or legal guardian

Date

GENERAL PERMISSION FORM

Epworth United Methodist Church
501 Morgan Ave., Palmyra, NJ 08065
856-829-1908

NAME: _____ DATE OF BIRTH: _____

PARENT/GUARDIAN: _____

HOME ADDRESS: _____

HOME PHONE NUMBER: _____ CELL: _____

EMERGENCY CONTACT: _____

ADDRESS: _____ PHONE: _____

Occasionally during the course of our regularly scheduled meetings the group(s) in which my child participates may go off site for all or part of the program. I give my child, named above, permission to participate in such activities.

Signature of parent or legal guardian

Date

SPECIAL EVENT PERMISSION AND MEDICAL RELEASE FORM

Epworth United Methodist Church
501 Morgan Ave., Palmyra, NJ 08065
856-829-1908

NAME: _____ DATE OF BIRTH: _____

PARENT/GUARDIAN: _____

HOME ADDRESS: _____

HOME PHONE NUMBER: _____ CELL: _____

EMERGENCY CONTACT: _____

ADDRESS: _____ PHONE: _____

Dietary Restrictions: _____

Allergies: _____ Date of last Tetanus Shot: _____

Current Medications (please supply instructions): _____

Any treatments or medications to be continued while at event: _____

Any activity restrictions while at event: _____

Name of family physician: _____ Phone: _____

Address: _____

Name of dentist/orthodontist: _____ Phone: _____

Address: _____

Do you carry family medical/hospital insurance? Yes _____ No _____

Carrier: _____ Policy Number: _____

PLEASE ATTACH COPY OF INSURANCE CARD TO THIS FORM

This health history is correct as far as I know, and the person herein described has permission to engage in all activities except as noted.

AUTHORIZATION FOR EMERGENCY TREATMENT: I hereby give permission to the medical personnel selected by the Adult Leaders of the above named local church to order x-rays, routine tests, treatment, to release any records necessary for insurance purposes, and to provide or arrange necessary related transportation for my child.

I hereby give PERMISSION FOR MY CHILD (named above) TO ATTEND _____

on _____.

Signature of Parent/Guardian: _____ Date: _____

Witness - Signature of Adult Advisor: _____ Date: _____

EPWORTH UNITED METHODIST CHURCH

REPORT OF SUSPECTED INCIDENT OF CHILD ABUSE:

1. Name of worker (paid or volunteer) observing or receiving disclosure of child abuse:

2. Victim's name: _____

3. Victim's age/date of birth: _____

4. Date/place of initial conversation with/report from victim: _____

5. Victim's statement (give your detailed summary here): _____

6. Relationship of accused to church and/or victim (paid staff, volunteer, family member, other): _____

7. Call to DCF:

Spoke with: _____

Date/time: _____

Summary: _____

8. Call to local law enforcement agency (if necessary): _____

Date/time: _____

Spoke with: _____

Summary: _____

9. Reported to pastor: _____

Date/time: _____

Summary: _____

10. Pastor shall call the victim's parent/guardian: _____

11. Other contacts: _____

Name: _____

Date/time: _____

Summary: _____

Signature of Incident Reporter Date

Print full name

EPWORTH UNITED METHODIST CHURCH

PASTOR'S REPORT OF SUSPECTED INCIDENT OF CHILD ABUSE

1. Name of worker (paid or volunteer) observing or receiving disclosure of child abuse:

2. Victim's name: _____

3. Victim's age/date of birth: _____

4. Date/place of initial conversation with/report from victim: _____

5. Was call placed to DCF? Yes No

By: _____

When: _____

6. Was call placed to police? Yes No

By: _____

When: _____

7. Call to Parent/Guardian: _____

Date/time: _____

Summary: _____

8. Call to District Superintendent: _____

Date/time: _____

Summary: _____

9. Call to Insurance Agency: _____

Date/time: _____

Summary: _____

10. Report to other church officials: _____

Date/time: _____

Summary: _____

11. Other Conversations: _____

Date/time: _____

Summary: _____

12. Summary of action taken and/or resolution: _____

Signature of Pastor Date

Print full name

EPWORTH UNITED METHODIST CHURCH

ACCIDENT REPORT FORM

(Please print all information.)

Date of accident: _____ Time of accident: _____

Name of child/youth injured: _____ Age: _____

Address of child/youth: _____

Location of accident: _____

Parent or guardian: _____

Name of person(s) who witnessed the accident: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Describe accident: _____

Nature of injury: _____

Was medical treatment sought? _____ yes _____ no

If yes, describe: _____

Signature of Incident Reporter Date

Print full name