

Child/Youth/Vulnerable Adult Protection Policy

Central United Methodist Church
Florence, SC

In order to protect our children, youth (up to age 18), and vulnerable adults from the undue risk of verbal, physical, and sexual abuse and misconduct; and to protect our staff and volunteers who work with children and youth from false accusations, Central UMC has established the following policy. All church ministries, including the Preschool Program, that work with children, youth, and vulnerable adults must adhere to this policy.

All full-time and part-time paid staff and clergy, along with volunteers who work with children, youth, and vulnerable adults will be screened and trained using the reference, *Safe Sanctuaries®: Reducing the Risk of Abuse in the Church for Children and Youth* material that is endorsed by the United Methodist Church. Each area of ministry is responsible for evaluating the suitability of its volunteers: children's volunteers under the supervision of the Director of Children's Ministries for those working with children 6th grade and under; the youth volunteers under the supervision of the Minister of Youth Discipleship for 7th through 12th graders; the adult volunteers under the supervision of the Director of Adult and Family Ministries under for our vulnerable adults, and the Preschool Program volunteers under the supervision of the Preschool Director. The Staff/Parish Committee is responsible for evaluating clergy and paid employees. Each area is also responsible for training and supervising its volunteers and staff.

The primary screening procedure will be:

- a. Completion of the Child/Youth/Vulnerable Adults Worker Application and Screening Form
 - b. Signing of an Authorization for Consent of a Background Check
 - c. A personal interview:
 - *All paid employees will have a personal interview
 - *The right is reserved to interview potential volunteers
 - d. Reference Checks – The right is reserved to contact references listed on the application and screening form
 - e. The sex offenders registration lists of South Carolina will be checked against all employees and volunteers.
2. Adults or youth who have been convicted of either sexual or physical abuse of minors or vulnerable adults; or who have a history of inappropriate conduct involving actual or attempted physical or sexual abuse with individuals in these groups, are not allowed to work with or interact with minors or vulnerable adults.
 3. Volunteers must be members or regular attendees of Central United Methodist Church for a minimum of six months before being eligible to work as a teacher or worker with children, youth, and vulnerable adults. However, this time requirement may be waived after the applicant's references and other background information are verified. Any volunteers or paid staff under the age of 18 must have adult supervision at all times.
 4. Those working with children, youth, and vulnerable adults in organized activities shall

observe the “two-person rule” and/or the “open-view rule” at all times. The “two-person rule” requires that employees, volunteers, and supervisors avoid situations where one worker is alone with children, youth, or vulnerable adults. If the “two-person rule” is not feasible or practical, then the “open-view rule” must be observed. The “open-view rule” requires the interior of the occupied room to be visible to outside observers. An open door, a split door with one half open, or an observation window/opening meets the requirements of the “open-view rule.”

5. Social Media Policy. In order for a minor to receive a phone call, text message, email, or other forms of digital communication from adult employees or volunteers, a message communication form should be on file. Communication should be done in group messages that include other adults such as the youth minister or parent, not one on one communication between adults and youth. No videos or pictures will be sent to children, youth, or vulnerable adults. Staff or a designated volunteer will be the only people to post photos of church events with children or youth involved. No minors should be identified or “tagged.” No cyberbullying will be tolerated and incidences of it should be reported to the staff person in charge of that ministry area.
6. Staff and volunteers should never remove a child, youth, or vulnerable adult from church property or take him or her home without the verbal or written approval of the ministry’s director and the parent/guardian. One, preferably two, ministry approved persons will be on site until all children, youth, and vulnerable adults have left an event.
7. Corporal punishment of any kind is absolutely forbidden and is considered abuse. No discipline that employs the use of physical force such as spanking, hitting, or shaking, will be used. No one should scream in anger or threaten verbally or through bodily motions.
8. Staff and volunteers are primarily responsible for children, youth, and vulnerable adults from a designated drop-off point within the church to dismissal. Children 3K through second grade will be released from activities to a parent/guardian or designated adult, or a sibling with written parental permission. All parents of infants through Nursery Three must provide a mobile number during church programs and the child will only be released by a parent or designated adult.
9. Any person or persons, including minors, who disrupt an event in a harmful or threatening manner, or harms others will be asked to leave the event site. In the case of minors, parents/guardians will be contacted to remove the child/youth. If the situation warrants and/or the person refuses to leave or the parent(s) cannot be located, law enforcement officials will be contacted. Notify a ministry area supervisor or clergyperson.
10. Volunteers and paid staff who observe any suspected harm to a child or misconduct by another adult are required to report it immediately to the ministry area’s supervisor or a pastor. In addition, South Carolina law requires that these persons also report suspected cases of abuse or misconduct to the local law enforcement officials.

I, _____, have read, understand and will abide by this policy of
(your name)

Central United Methodist Church of Florence, S.C.

_____ Date _____
(your signature)

Responding to Allegations of Abuse: ***Guidelines to Follow if an Allegation Should Occur***

- ☐ Do not prejudge the situation. Take the allegations seriously as the care and safety of the alleged victim is the first priority. Confidentiality is required on behalf of both the alleged victim and the alleged perpetrator. Extend whatever pastoral resources are needed. Confidentiality, care, and support helps prevent further hurt. Lack of proper handling can only increase the anger and pain of the alleged victim and family, and/or alleged perpetrator, if later found to be innocent of charges. Future reconciliation will be more difficult and the possibility of damaging litigation increases when not handled properly.
- ☐ Secure the safety of the involved child away from the accused.
- ☐ Notify the staff person and/or pastor related to the ministry area when an incident takes place. The alleged perpetrator should be advised of the accusations & his/her rights, preferably by a pastor.
- ☐ Notify the parents. The parents or legal guardians of the child involved are to be contacted immediately by the staff person and/or pastor. If the parent(s) are the suspected perpetrator(s), then local law enforcement should be notified and consulted before contacting the parent(s).
- ☐ Report any allegations to the local law enforcement agency.
- ☐ Treat the accused with dignity and support. If the accused is a church worker, that person should be relieved temporarily of his or her duties until the investigation is finished. If the person is a paid employee, arrangements should be made to maintain his or her income until allegations are substantiated.
- ☐ Document all actions in handling the incident. Any individual observing an incident will complete an incident report of the actual event and subsequent activities pertaining to the people involved. Each witness is to compile this record independently from others. Copies of all written reports are to be given to the pastor and maintained with other confidential documents related to child safety.
- ☐ If it is alleged that a clergy person is a perpetrator of abuse, contact the Board of Trustees chairperson and the District Superintendent immediately.
- ☐ The Chair of the Staff Parish Relations Committee, the Senior Pastor, or designee shall be the sole spokesperson for the Church insofar as media inquiries are concerned. Confidentiality of all persons involved shall be safeguarded.

**Children/Youth/Vulnerable Adults Ministry Application
& Screening Form for Volunteers**

Central United Methodist Church

P.O. Box 87

Florence SC 29503

(843) 662-3218

Leadership is essential to our ministry, and we are grateful for your willingness to serve. Our desire is that every Christian in our church has the opportunity to serve according to their own desires and ministry gifts. This application and screening form is part of our policy to provide the highest quality leadership in our ministries and to provide an official record of your participation. The form is to be completed by all volunteer persons involved in ministry with minors and vulnerable adults. Paid staff and clergy will also sign a similar screening form. This confidential form will be filed at Central United Methodist Church for authorized inspection only.

Personal Information: (Please Print)

Full Name: _____
first middle (maiden) last

Additional Names (used previously or currently): _____

Street Address _____

City, State, Zip Code _____ E-Mail address: _____

Phone: (home) _____ (cell) _____ (work) _____

Present Employer & Address: _____

Are you over the age of 18? Yes _____ No _____

Faith Background:

Are you a member of Central United Methodist Church: Yes _____ No _____

How long have you attended Central United Methodist Church _____

If not a member, where do you attend church _____

Are you involved in other ministries at Central United Methodist Church? Yes____ No____

If yes, what are they? _____

What gifts, callings, training, education or other attributes do you have that have prepared or qualified you for ministry/teaching with children, youth, or special needs adults?

What previous experience have you had with children, youth, or special needs adults?

List other churches you have regularly attended during the past five years:

<u>Church Name</u>	<u>Church Address</u>	<u>How long attended</u>
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_____	_____	_____
_____	_____	_____
_____	_____	_____

Personal References:

Please list two persons to whom you are not related by marriage or blood and who have known you for at least 5 years:

Name: _____ Name: _____

Address: _____ Address: _____

Phone: _____ Phone: _____

*Please return pages 4 and 5 to the appropriate ministry staff person
(Director of Children's Ministries, Minister of Youth, Director of Adult and Family Ministries)
or the Business Administrator)*

Background Check Information *(Please return pages 6, 7 and 8 to the Business Administrator):*

Because of recent developments in our country, and in order to safeguard our children, youth, vulnerable adults, and church from harm, we are required to seek the following information:

Driver's license # _____

Auto Insurance: _____ *(if seeking permission to drive on behalf of Central UMC).*

State _____ (Driver's license and insurance is subject to ongoing review)

The following information can be shared either on this form or in a personal interview with the senior pastor:

Have you ever been convicted of or plead guilty to a crime in your lifetime? Yes _____ No _____

If yes, please list each offense, its disposition, and the punishment assessed:

Have you ever been convicted of child abuse or a crime involving actual or attempted sexual molestation of a minor or terminated from any job/activity involving children or youth?

Yes _____ No _____

If yes, please explain: _____

Have you ever been charged with a crime for which you never pled guilty nor were convicted or do you have any criminal charges currently pending against you? Yes _____ No _____

If yes, please explain: _____

The information in this screening form is correct to the best of my knowledge. I authorize Central United Methodist Church to conduct any background checks to confirm the above information. I also authorize any references and churches listed in this application to give a designated representative of Central United Methodist Church any information, including opinions that they may have regarding my character and ability to work with minors or vulnerable adults. I release all such references from any liability for furnishing such evaluations to you, provided they do so in good faith and without malice. I waive any right that I may have to inspect references provided on my behalf.

Signature: _____ Date: _____

Acknowledgement of Child/Youth/Vulnerable Adult Protection Policy: Safe Sanctuaries

Central United Methodist Church
Florence, SC 29501

I have received and read the *Safe Sanctuaries Policy* of Central United Methodist Church, of Florence, South Carolina. I understand the content and agree to abide by the guidelines established in the policy.

Signature: _____ Date: _____

Authorization for Consent for Release of Information

I authorize Central United Methodist Church of Florence, SC (hereinafter CUMC) to conduct a background/reference/criminal check for the purpose of completing my application to volunteer/work in the ministries of the church.

I further authorize CUMC to release such information as is necessary to obtain the records or information referred to above. I understand that my records are protected under the Federal Confidentiality Act (42 C.F.R. Part 2) and cannot be disclosed without my written consent unless otherwise provided for the regulations. I understand that my refusal to consent to release of the above mentioned information will prevent the disclosure of the information. I also understand that I may, in writing, revoke this consent at any time except to the extent that disclosure was made prior to the time I revoked it, and that CUMC has the right to inspect and copy the information to be disclosed.

Facsimile, photocopy, carbon, or other copies of this authorization shall be treated as an original. This consent is valid for three years from the date of signature unless a specified date is otherwise noted by the applicant.

Signed this _____ day of _____, 20____.

Signature of Applicant

Name: _____

Address: _____

Social Security Number: _____ D.O.B: _____

*** Please include a copy of your driver's license.**

Acknowledgement of Training for Child/Youth/Vulnerable Adult Protection Policy:
Safe Sanctuaries

Central United Methodist Church
Florence, SC 29501

Personal Information: (Please Print)

Full Name: _____
first middle (maiden) last

I have received training on abuse prevention.

Signature: _____ Date: _____