

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**Revised 11-2-2022**

Gay Street United Methodist Church

18 N. Gay Street

Mt Vernon, Ohio 43050

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Church Insurance Company:

Insurance Agent:

Knox County Abuse Hotline:

Job And Family Services:

Mt Vernon Police Department:

Knox County Sheriff Department:

First Adopted by East Ohio Conference                      June 1998

Policy Adopted by the Gay Street UMC Church Council xx/xx/xxxx.

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**Gay Street United Methodist Church believes in providing a safe environment for children, youth and vulnerable adults. 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 vulnerable adults is important at Gay Street UMC.**

The high value and importance Gay Street UMC places on all persons is reflected in our vision and core values. Our church strives to provide a “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, **sensory manipulatives resources and partnership assistance availability (is this something that we want to consider?)**, 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>

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#### 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 all those who volunteer to participate in our ministries.

The purpose of the Safe Sanctuaries Policy of the Gay Street 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.

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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: Lead Pastor, SPR Chair, \_\_\_\_\_, Children's Director, Youth Director and 2 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 Gay Street 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, in the case of a supervisory role, at least 5 years older than those being supervised.

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**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.

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**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 youth directors, choral scholars, choral conductors, children directors or other family ministry directors.

**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

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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 Gay Street United Methodist Church program or ministry. This policy is intended to help our congregation make Gay Street 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 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 Gay Street UMC may utilize). They must also supply Gay Street 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



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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 Gay Street United Methodist Church and/or to Mt Vernon, 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.

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.)

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- Successfully complete the online “Child Safety Training” Video and quiz through “Protect My Ministry” (or other background check service Gay Street UMC may utilize).
- 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 Gay Street UMC 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 make sure the appropriate forms are filled out and on file 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. Persons supervising activities must be at least 5 years older than the children or youth they are supervising.

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#### **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.

Parent must receive contact info to include:

- start/stop times
- location of event
- program content

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- 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

#### **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.

#### **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 invited events and ministries that involve children, youth and vulnerable adults, 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

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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**

Gay Street United Methodist Church hosts many outside organizations. Each organization will be asked to complete a Facility Use Agreement.

#### **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. Should Gay Street UMC initiate Stephen Ministry, it 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 restroom off the Sanctuary.

#### **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.

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*The adult should respond to the child's need for comfort and encouragement and not base touching on their own emotional needs*

#### V. Gay Street 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 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 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.

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- 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

In general, Gay Street 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, Gay Street UMC requires, as a condition of participation in the event, that paid/volunteer staff observe the following guidelines when referring to Gay Street 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 Gay Street 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 Gay Street 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 Gay Street 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 Gay Street UMC Policies, including, but not limited to, the use of alcohol and illegal drugs, sexual behavior, sexual harassment, and bullying.

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6. Paid/volunteer staff should not post pictures of Gay Street UMC children, youth or vulnerable adults on personal social media account but may share Gay Street UMC 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 Gay Street 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 where outside 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 Gay Street UMC, not attending worship, groups, or other activities. Leaders affiliated with Gay Street 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 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 and financial procedure.

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



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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 INDISCRETION/VIOLATIONS OF SAFE SANCTUARY PRACTICES**

Procedure for dealing with 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 prescribe a resolution. This may include a review of an individual’s future involvement in ministries with vulnerable populations.
- Document 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.
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

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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 assigned person, 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 assigned person. Forms should be filed in an incident folder and with an individual's Safe Sanctuary forms.

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#### 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 childcare 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*

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*the child. In Knox County the report is made by calling 740.392.KIDS (5437). 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 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

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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.

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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

Training Packets can contain but are not limited to the following resources to assist 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.

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

The well-being of all persons is important at Gay Street UMC. The high value and importance Gay Street 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 Gay Street United Methodist Church 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:

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- Gay Street UMC 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 Gay Street UMC.
- All persons known to have been accused or convicted of sex offenses must comply with the terms of this policy.

Gay Street UMC will periodically review this policy and ministry enforcement of this policy.

#### **A. INVESTIGATION AND DISCLOSURE**

As a condition of continued service, all staff, employees, volunteers, and interns will submit the Safe Sanctuary application form authorizing Gay Street UMC to conduct criminal background investigations according to an 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.

Gay Street UMC 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.

#### **B. SAFE SANCTUARIES GROUP**

1. 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 Gay Street UMC. The Safe Sanctuaries Group will be familiar with the terms and procedures of both Gay Street UMC Sex Offender policy and the overall Safe Sanctuary policy. Safe Sanctuary group members must submit to the screening procedures established in the Gay Street UMC Safe Sanctuary policy.



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2. In the event a complaint, allegations or information involves a member of the Safe Sanctuaries Group, that member will not participate in the proceedings.
3. 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.
4. 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:
  - a. 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.
  - b. 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.
  - c. The Safe Sanctuaries Group will make determinations and take actions appropriate to resolve the matter.
5. 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.
6. If the Safe Sanctuaries Group determines that the referral is well-founded, it may take the following actions:
  - a. Contact appropriate legal authorities to determine whether the referred person is permitted to participate in Gay Street UMC activities and any additional legal restrictions imposed on them.

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- b. Require the referred person to execute a *Contingent Participation Agreement* with terms established by the Safe Sanctuaries Group.
- c. 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.
- d. Take any additional actions determined by the Safe Sanctuaries Group to be appropriate, including, but not limited to:
  - 1) A formal reprimand, with defined expectations for changed behavior.
  - 2) Recommending/requiring psychological or psychiatric assessment, counseling, and/or treatment.
  - 3) Probationary standing, with the terms of the probation clearly defined.
  - 4) Exclusion from ministry activities.
  - 5) Cooperation with criminal proceedings.
  - 6) The drafting of a public statement to be delivered to members of the congregation by SPRC.
7. 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.
8. The Safe Sanctuaries Group may seek the advice of legal counsel or others for advice in performing its functions.
9. 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.
10. 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.

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11. 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.

**C. 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.

**D. DESIGNATED COVENANT PARTNER TEAM**

1. 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).
  
2. 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.
  - a. 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.

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- b. Under no circumstances will a designated covenant partner be assigned to a referred person to whom they are related or with whom they cohabitate.
3. 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.
4. 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.
5. 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 designated representative on a regular basis, not less than monthly.

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**GAY STREET METHODIST CHURCH  
Contingent Participation in Ministry Activities Agreement**

Name:

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Address:

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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 Gay Street UMC property is contingent upon my adherence to the following conditions:

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1. I must abide by all policies and procedure of Gay Street UMC to protect the health and safety of children, youth, and vulnerable adults.
2. I may not participate in any ministry activity or enter any Gay Street UMC 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) 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.

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- ii. Any restroom that is accessible to more than one person at a time.
  
- 6) I agree to indemnify, defend, and hold Gay Street UMC harmless for any liability which may result or arise from my participation in ministry activities or presence on Gay Street UMC property.
  
- 7) I understand that I am not eligible for any employment and may not be eligible for certain volunteer positions at Gay Street UMC.
  
- 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 Gay Street UMC, its employees, and members, for such disclosure authorized by this agreement. I voluntarily release Gay Street UMC, 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.

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I have reviewed this document and agree to abide by its provisions. I agree that if I violate the conditions of this agreement, Gay Street UMC may take action against me, including, but not limited to: contacting relevant legal authorities, denying me access to Gay Street UMC 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 Gay Street UMC deems it appropriate to modify it. I agree that Gay Street UMC may modify the terms of this agreement at its sole discretion.

I further understand that Gay Street UMC 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 Gay Street UMC 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



**GAY STREET UNITED METHODIST CHURCH  
SAFE SANCTUARY POLICY**

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

I, \_\_\_\_\_ was trained on \_\_\_\_\_,

as a covenant partner for \_\_\_\_\_, a registered sex offender who has signed the Gay Street UMC Contingent Participation in Ministry Activities Agreement for RSOs.

I have read the policy for ministry including RSOs. \_\_\_\_\_(initial here)

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.

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

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

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#### XIII. Best Practices for Safe Sanctuary

- Wear a name tag 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 child, youth and/or vulnerable adult. 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 restroom off the Sanctuary.

**Check-In Procedures:** Parents/Guardians will register/sign in children. 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 was checked in.

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- 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 who 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, Section II for definitions of abuse and neglect. Please contact Children's Director, Pastor, or any Staff member 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 staff, 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.

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- Visitors will be asked to sign in 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 sign in station.
- We encourage you to share your experience at all of Gay Street UMC's ministries. If you choose to use social media, follow guidelines described in the Safe Sanctuary policy, Section V remembering that you represent Gay Street UMC.
- Wear your name tag to help identify you as a leader to participants, parents/guardians and other volunteers.
- Sign in each day at the sign in station. Attend Huddle, Prayer and Announcements in the designated location 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:** Escort children in pairs or small groups to restrooms; wait outside the door.

- If any assistance is needed (especially with young children), ask another volunteer to be present with you.
- Stay hydrated, especially if it is warm. Water will be available.

**Check-In Procedures:** Caregivers will register children in a designated Gathering Area then bring children to their designated group. Please be ready to greet families and get to know them. Building relationships is an important part of any 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!

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- 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.

#### **XIV. 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 eighteen 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**

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- 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

## **GAY STREET UNITED METHODIST CHURCH**

### **SAFE SANCTUARY POLICY**

#### **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.

#### **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 Gay Street UMC’s Safe Sanctuary policy, Section V.

#### **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 can and shall seek the advice of the church’s attorney to determine if the incident requires reporting under state law.

## **X. General Forms**

**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

**Gay Street United Methodist Church**  
**Safe Sanctuary Application**

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 Gay Street 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: \_\_\_\_\_

Best Contact Phone Number: (\_\_\_\_) \_\_\_\_\_

How long have you lived at the above address? \_\_\_\_\_

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



**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

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

---

Please indicate the areas you would like to serve at Gay Street 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

\*\*\*\*\*  
\*\*\*\*\*

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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:

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

At Gay Street 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?

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

I understand that participating in periodic training is important to maintaining a safe environment and a requirement for serving at Gay Street 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?

YES \_\_\_\_\_ NO \_\_\_\_\_

Our church encourages the use of two teachers/leaders for all children/youth activities. Are you comfortable working in teams? YES \_\_\_\_\_ NO \_\_\_\_\_

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**CHURCH HISTORY AND PRIOR EXPERIENCE**

How long have you been attending Gay Street 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:

---

---

---

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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---

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---

## GAY STREET UNITED METHODIST CHURCH

### SAFE SANCTUARY POLICY

#### 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

**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

2. \_\_\_\_\_

Name

Relationship

\_\_\_\_\_

Address

\_\_\_\_\_

Home Phone

Cell Phone

3. \_\_\_\_\_

Name

Relationship

\_\_\_\_\_

Address

\_\_\_\_\_

Home Phone

Cell Phone

**GAY STREET UNITED METHODIST CHURCH****SAFE SANCTUARY POLICY****APPLICANT'S AUTHORIZATION AND RELEASE**

I certify that all the information on this application is truthful and completely accurate. I authorize representatives of Gay Street 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 Gay Street 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 Gay Street 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.

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

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

Check One :                     Yes                     No

Applicant’s Signature

---

Date

---

Parent or Guardian Signature if under age 18

---

Date

---

**GAY STREET UNITED METHODIST CHURCH****SAFE SANCTUARY POLICY****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 Gay Street 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 Gay Street United Methodist Church Safe Sanctuaries Policy and abide by all laws.



**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

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.

## GAY STREET UNITED METHODIST CHURCH

### SAFE SANCTUARY POLICY

### 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:

\_\_\_\_\_

Add \_\_\_\_\_ 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?

**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

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: \_\_\_\_\_

**GAY STREET UNITED METHODIST CHURCH****SAFE SANCTUARY POLICY****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 Church Administrator. (One copy in the incident folder, one copy with the individuals Safe Sanctuary forms.)

Name of person who received disclosure of incident:

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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:

**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

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?

**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

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: \_\_\_\_\_

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

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.



**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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 Gay Street UMC 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 Gay Street UMC programs?

\_\_\_\_\_

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

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

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

Names of persons who have permission to pick up your child from Gay Street UMC events:

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

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**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 Gay Street UMC’s Children or Youth programs. Please include any special needs, or other information that will help your student have a great experience at Gay Street UMC.**

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---

Medications:

---

Medical Insurance Company and Policy Number:

---

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

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

## GAY STREET UNITED METHODIST CHURCH

### SAFE SANCTUARY POLICY

#### PERMISSION TO PARTICIPATE/WAIVER

My child, named above, has my permission to participate in the Gay Street UMC Children and Youth programs offered by Gay Street 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 Gay Street UMC's Children and Youth Ministry activities and do hereby release Gay Street 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 Dinner (Children)       Children's Choir

Confirmation     Youth Group     Youth Sunday School     Youth or Adult Choir

Nursery     Gay Street UMC Childcare during church functions

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

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

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

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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:

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---

---

---

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

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

**GAY STREET UNITED METHODIST CHURCH  
SAFE SANCTUARY POLICY**

**PHOTO RELEASE**

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

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

**QUESTIONS OR COMMENTS**

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

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

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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 Gay Street United Methodist Church

*Name of event*

\_\_\_\_\_ On \_\_\_\_\_ .

*Name of church group/ministry*

*date of event*

**GAY STREET UNITED METHODIST CHURCH  
SAFE SANCTUARY POLICY**

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 current Gay Street UMC Medical Release & Registration  
Form to the church group leader/event coordinator: yes \_\_\_\_\_ no \_\_\_\_\_

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

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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:  
\_\_\_\_\_



**GAY STREET UNITED METHODIST CHURCH**  
**SAFE SANCTUARY POLICY**

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:

---

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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: \_\_\_\_\_

## GAY STREET UNITED METHODIST CHURCH

### SAFE SANCTUARY POLICY

#### 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.

## GAY STREET UNITED METHODIST CHURCH

### SAFE SANCTUARY POLICY

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 at Gay Street UMC and then ask the applicant how he/she would respond in that situation.

**GAY STREET UNITED METHODIST CHURCH**

**SAFE SANCTUARY POLICY**

**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):
6. \_\_\_\_\_
7. Summary of conversation (summarize the reference’s remarks concerning the applicant’s fitness and suitability for youth or children’s work).  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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

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

## GAY STREET UNITED METHODIST CHURCH

### SAFE SANCTUARY POLICY

#### 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 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 of Gay Street 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 of Gay Street 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.