

# **CHILD CARE AND PROTECTION POLICY**

**2012**

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## **PURPOSE STATEMENT**

The purpose of Fuller Avenue Christian Reformed Church's Child Care and Protection Policy is to insure that the physical, emotional and spiritual well-being of each person in our church is protected from abuse or accusations of abuse by providing a safe environment and by establishing procedures and policies for conduct.

## **IMPLEMENTATION**

The Ministries Coordinator is responsible for administering and implementing this policy. Annually, the policy will be brought to the October council meeting for general review and compliance assessment.

The Congregation should be given an opportunity to learn about abuse and abuse prevention and should be educated about this policy yearly.

## **SCREENING PROCEDURES FOR STAFF AND VOLUNTEERS**

1. All potential staff and volunteers will be screened.
2. Screening for volunteers must include filling out a Staff and Volunteer Screening Form (see appendices). Criminal record checks may be completed upon receipt of a signed Staff and Volunteer Screening Form.
3. Screening for potential staff must include a completed Staff and Volunteer Screening Form and two references. In addition, a criminal background check performed through a state law enforcement agency is required for all potential staff.
4. The appropriate Program Director or the person responsible for hiring shall contact the references provided by the potential staff and will facilitate the criminal check.
5. The appropriate Program Director shall approve or disprove the applicant prior to assuming their position. The Program Director will notify the applicant of the decision.
6. If the screening process identifies a prospective volunteer or staff that we suspect may represent a potential threat to children, we will restrict such a person from any ministry.
7. A Worker Renewal Screening Form (see appendices) will be completed annually by all employees and volunteers. At the time the Worker Renewal Screening Form is completed, the Child Care and Protection Policy will be reviewed.
8. If the screening process identifies a current employee or volunteer representing a potential threat to children, the Vice President of council will be notified to determine further action.
9. Staff and Volunteer Screening Forms and application forms will be stored in a locked file, in the church office, with limited access.

### **NURSERY PROCEDURES**

1. The nursery must be monitored by at least two unrelated people, one of whom is an adult.
2. Infants and Toddlers must be dropped off and picked up from the nursery by their parent[s], grandparent[s], family member[s], or guardian[s].
3. Diapers will be changed in open view of other workers. The use of disposable gloves for changing diapers is strongly recommended. If feasible, workers should have parents change diapers. Those children who are able may use the bathroom. If a child needs bathroom assistance, a worker may assist the child with the bathroom door ajar.

### **PROPER DISPLAY OF AFFECTION**

1. It is understood that working with small children requires some physical contact. Displays of affection toward the children should be limited to such actions as a brief hug, an arm around the shoulder, an open-hand pat on the back, a handclasp, a high-five, or a light touch to the forearm. Volunteers, helpers and children should respect the other person's right to refuse a display of affection.
2. Kissing is inappropriate.
3. Lap sitting is inappropriate for children over the age of five. Rather, encourage children to sit next to you.
4. It is recommended that body-to-body hugs be avoided. One arm hugs, side hugs or hand to arm hugs are acceptable.
5. Avoid giving or receiving back rubs.

### **DISCIPLINE**

1. No corporal punishment, harsh words, insults, belittling comments, threatening words, or other verbal humiliation of children will be permitted.
2. At the beginning of the year the appropriate Program Director will state the class rules to the children and the consequences for breaking them.
3. Volunteers and staff should report to the appropriate Program Director all concerns about a child's unacceptable behavior as well as the appropriate response taken to deal with that behavior.
4. The appropriate Program Director should inform the parent(s) whenever a child misbehaves beyond minor correction or if a pattern of misbehavior becomes apparent.

### **SUPERVISION**

1. Two screened adults must be present at every function and in each classroom, vehicle, or other enclosed area during all activities involving children or vulnerable adults. When this precaution cannot be met, 3 individuals (at least one adult) must be present at every function.
2. Volunteers or staff may take the children from the classroom only for a compelling reason, such as to use the bathroom or in case of illness.
3. If a child needs bathroom assistance during the program, a volunteer or staff may assist the child with the bathroom door ajar.

### **TRANSPORTATION**

1. Children should not be taken on a field trip or special outing without first notifying the appropriate Program Director and having written permission from the parents. (See appendices: Parental Consent and Medical Form and Transportation Consent Form).
2. If a child needs transportation to a church activity, two unrelated adults are required to provide that transportation. If there are two or more children in the vehicle at all times, one driver is adequate.

### **FACILITIES**

1. Limit the number of open access points to the building during program hours.
2. Periodically clean all nursery toys, games and equipment and check them for safety.

### **IN CASE OF ILLNESS AND DISEASE**

1. Parents should not bring a child with a contagious illness or disease (including the common cold) to any children's program.
2. If a child breaks out with a contagious illness after having attended a children's program, and a parent notifies the appropriate Program Director, the appropriate Program Director shall then notify the parents of the other children who may have been exposed.

### **IN CASE OF INJURY**

1. A First Aid kit is available in the kitchen and the Cadet building. Another is available for field trips. Contact the office.
2. An AED (automated external defibrillator) is located on the sanctuary level on the wall by the elevator.
3. Plastic gloves are to be used for the treatment of open wounds. Wash the wound under running water.
4. Avoid direct contact with blood, vomit, excrement or any bodily discharge. Assume the secretions are contaminated and use gloves.
5. Report any minor injuries to the appropriate Program Director and parents as soon as possible after class or the event.
6. Report severe injury or illness to the appropriate Program Director and parents immediately.

### **IN CASE OF INCLEMENT WEATHER**

1. If a severe thunderstorm warning, tornado watch, tornado warning or winter storm warning is in effect one hour prior to a children's program, the program will be cancelled.
2. If the Grand Rapids area schools are dismissed early or cancelled due to inclement weather, any children's program will also be cancelled that evening.

### **IN CASE OF TORNADO WARNING**

1. Move the children to the lower level, away from windows. Adults in building shall join children in designated rooms.
2. Children will only be dismissed to a parent, guardian or designated person.

**IN CASE OF FIRE**

1. In the event of a fire, whoever discovers it will clear the area immediately, smother the fire or use the extinguishers only if safe to do so and assist with first aid if needed. See appendix for fire extinguisher locations.
2. Count the children before leaving the room/area. One staff/volunteer will be the last person to leave the room.
3. Exit designated doors (the nearest door, but away from the fire). Before leaving your room, feel the doorknob. If it is hot, do not open the door. If it is cool, open the door slowly. If the hallway is smoky, stay next to the wall and crawl on hands and knees to the designated exit door.
4. Count the children after reaching the designated outdoor area: west end of the church parking lot.
5. The appropriate Program Director should check the halls and restrooms and assist in the evacuation of the children.
6. Children will only be dismissed to a parent, guardian or designated person.

**LOCATION OF FIRE EXTINGUISHERS AT FULLER CRC****LOWER LEVEL**

Fellowship Room: 1 in NE Corner

Nursery: 1 in front room, 1 in back room

Kitchen: 1 above phone

Boiler Room: 1 on N wall in the front room, 1 on W wall of the back room

**SANCTUARY LEVEL**

Copy Room: 1 mounted on desk

Council Room: 1 in NE Corner

Sanctuary: 1 behind piano, 1 in NE corner

Balcony: 1 in N side stairway

**UPPER LEVEL**

1 in N hallway

1 in S hallway

**OTHER**

Gathering Place: 1 in SE Corner

Cadet Building: 1 by door in N room, 1 by door in S room

Total: 16

## **PROCEDURES FOR HELPING VICTIMS OF CHILD ABUSE**

1. If a child discloses an abusive situation, listen. Take the child seriously. Don't deny the problem. Remind the child it was good to tell someone.
2. Stay calm. Fear and anger are normal reactions. Give emotional support. Maintain eye contact and avoid displaying any signs of shock or disapproval.
3. Tell the child he/she is not to blame for what another person has done to him/her.

## **REPORTING ABUSE**

1. A person who receives a report of allegations of abuse against a church leader (staff, volunteer, helper) or witnesses abuse or has reasonable suspicion of abuse should report the matter to the Vice President of council or a member of the Administration Committee.
2. After consulting with council members and/or legal counsel, further reporting may include calling the local police (616-456-3400) or Child Protective Services (616-248-9600) or the Children's Assessment Center (616-336-5160).
3. As soon as possible after notifying the appropriate authorities, the person who reports the matter should contact the Pastor. If the Pastor is the alleged offender, the person should contact the Vice-President of council.

## **RESPONSE TO ABUSE ALLEGATIONS**

1. Pending the outcome of the investigation of abuse, the volunteer or staff person accused must be removed from his or her position and barred from further service in that or any similar capacity.
2. When criminal proceedings have been concluded it should be decided by the church council, in the case of acquittal or dropped charges, whether to rescind or maintain its earlier action. In the case of conviction the staff or volunteer's position will be terminated.
3. Any contracts allowing the suspected perpetrator to participate in any ministries of the church should be drawn up by the council on a case by case basis.



## APPENDICES

### DEFINITIONS OF CHILD ABUSE

1. **Physical Abuse:** Physical abuse is a non-accidental injury to a child. Physical abuse may include, but is not limited to, burning, beating, kicking and punching. There may be physical evidence of bruises, burns, broken bones or other unexplained injuries. Internal injuries may not be readily apparent.
2. **Sexual Abuse:** Sexual abuse encompasses several different types of inappropriate sexual behavior: 1) Any intentional touching/contact that can be reasonably construed as being for the purpose of sexual arousal, gratification, or any other improper purpose, 2) sexual penetration, and 3) accosting, soliciting, or enticing a child to commit, or attempt to commit, an act of sexual contact or penetration, including prostitution. 4) Examples of non-physical sexual abuse include displaying pornographic material, photographing a child for pornographic purposes, making obscene telephone calls, and requesting someone to engage in sexual activity where no physical contact occurs.
3. **Emotional Abuse:** attempts on the part of the abuser to control a child through words, threats, and fear or to destroy a person's self-worth through humiliation, degradation and deprivation.

### POSSIBLE INDICATORS OF CHILD ABUSE

#### **In Nursery Children:**

1. Burns, blisters, black and blue marks or other unexplained injuries.
2. Excessive crying during diaper change.
3. Failure to show typical signs of growth and development.
- 4.

#### **In Preschool Children:**

1. Regression to an earlier stage of developmental behavior, i.e. thumb sucking, baby talk, cuddling a blanket.
2. Changes in social behavior, such as withdrawal, fear, excessive crying, aggressive behavior, etc.
3. Problems with urine and bowel control.
4. Refusal to play with a favorite toy or to participate in a favorite activity or with a previously favorite person.
5. Explicit sexual language or statements that would indicate that the child is involved in behavior beyond what is age-appropriate.
6. Attempted sexual behavior with other children or adults.
7. Burns, blisters, black and blue marks or other unexplained injuries.

#### **In School Age Children:**

1. Frequent requests to go to the bathroom; loss of bladder or bowel control.
2. Multiple incidents of unexplained injuries.
3. Poor concentration in class or daydreaming.
4. Signs of low self-esteem, including overachieving and perfectionism.
5. Physical self-injury.
6. Masturbation.
7. Anger or hostility directed toward others and sometimes acted out on toys or objects.
8. Drawings that reveal details of sexual activities and nude adults.
9. Attempted sexual behaviors with other children or adults.
10. Sexually explicit language beyond what a child should know.
11. Behavior such as lying, stealing, hoarding food, toys or other objects.
12. Frequent absences from school.
13. Blackouts in which the child has a period of life that the child cannot recall.

**In Adolescence:**

1. Unexplained physical injuries, chronic physical complaints.
2. Eating disorders such as anorexia, bulimia, sudden and unexplained weight or appetite changes.
3. Over or underachieving in school.
4. Difficulty in being emotionally supportive of others or difficulty in interacting with other teenagers.
5. Withdrawal from physical contact and avoidance of all touch.
6. Tendency to behave in a way that sets others up to reject them or abandon them and perpetuate a situation of re-victimization.
7. Sexually active, seductive around members of the opposite sex.
8. Fear and distrust of authority figures, sometimes manifested as arson, stealing, cruelty to animals, chemical abuse, etc.
9. Depression and suicidal ideation.
10. Unexplained fears, anxiety and worries.
11. Refusal to attend to basic hygiene or normal everyday habits and routines.

**STAFF AND VOLUNTEER SCREENING FORM**

Fuller Avenue Christian Reformed Church

**A: PERSONAL DATA**

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

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip/Postal Code \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

Work \_\_\_\_\_

Do you have a current driver's license? \_\_\_\_\_ If no, please explain \_\_\_\_\_

\_\_\_\_\_

If transporting children, please list your driver's license number: \_\_\_\_\_

**B: POSITION APPLYING FOR**

Please indicate the type of children's work you prefer: \_\_\_\_\_

\_\_\_\_\_

Please indicate the date you will be available: \_\_\_\_\_

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

**C: HISTORY AND PRIOR CHILDREN'S WORK IN A NONPROFIT SETTING**

List the churches you have attended regularly during the past five years. \_\_\_\_\_

\_\_\_\_\_

Please list all previous church work involving youth. \_\_\_\_\_

\_\_\_\_\_

Please list all previous non-church work involving youth. \_\_\_\_\_

\_\_\_\_\_

If applying for a staff position please list two independent references (not friends or relatives). \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**D. BACKGROUND CHECK**

Have you ever participated in, or been accused, convicted or pleaded guilty or no contest to abuse or any sexual misconduct? Yes\_\_\_\_\_ No\_\_\_\_\_

Have you ever been dismissed or terminated from a volunteer or paid position for charges of child abuse or neglect? Yes\_\_\_\_\_ No\_\_\_\_\_

Have you ever been convicted of or pled guilty or no contest to a misdemeanor or a felony (other than a simple misdemeanor traffic violation)? Yes\_\_\_\_\_ No\_\_\_\_\_ If yes, please explain:\_\_\_\_\_

\_\_\_\_\_

Have you ever been dismissed or terminated from a volunteer or paid position for allegations of fiscal mismanagement, harassment, or misconduct? Yes\_\_\_ No\_\_\_ If yes, please explain\_\_\_\_\_

\_\_\_\_\_

The information contained in this application is correct to the best of my knowledge.

Upon consideration of this application, I release any individual, this church or church official, employer, or other organization from any and all liability for damages of whatever kind or nature, which may at any time result to me, my heirs, or family on account of compliance or any attempt to comply with this authorization.

I understand that a background check may be initiated.

I have carefully read the foregoing release and know the contents thereof, and I sign this release of my own free will. This is a legally binding agreement, which I have read and understood.

I have read the child safety policy of this church and I agree to follow the policies as written.

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

Date \_\_\_\_\_

If applicant is a minor, a parent/guardian's signature is requested.

Applicant's Parent/Guardian Signature \_\_\_\_\_

Date \_\_\_\_\_

Training Completion Dates: \_\_\_\_\_



**PARENTAL CONSENT AND MEDICAL FORM**

Fuller Avenue Christian Reformed Church

I \_\_\_\_\_  
(Parent or Guardian)

give permission for \_\_\_\_\_  
(name of child)

to attend the following activity sponsored by the organization:

Activity name: \_\_\_\_\_

Activity supervisors: \_\_\_\_\_

\_\_\_\_\_

I/We give permission to the supervisors of the activity to secure needed emergency medical treatment for the child named above. In case of accidental injury during the activity, I/We release the supervisors from all liability not covered by insurance.

Parent/guardian signature \_\_\_\_\_

Date \_\_\_\_\_

In case of emergency or my absence, my child may be released to: \_\_\_\_\_

\_\_\_\_\_

Telephone/cell number \_\_\_\_\_

Family's insurance company \_\_\_\_\_

Policy number \_\_\_\_\_

Allergies \_\_\_\_\_

Current medications (name, dosage, time of administration) \_\_\_\_\_

\_\_\_\_\_

Other pertinent medical information \_\_\_\_\_

**TRANSPORTATION CONSENT FORM**  
Fuller Avenue Christian Reformed Church

I \_\_\_\_\_  
(Parent or Guardian)

parent/guardian of \_\_\_\_\_, give permission  
(name of child)

to Fuller Avenue Christian Reformed Church to transport my child/ward to:

Name of event \_\_\_\_\_

Date of event \_\_\_\_\_

Fuller Avenue Christian Reformed Church confirms that \_\_\_\_\_  
is the designated driver for this event.

This driver has a valid driver's license and proof of insurance: Yes\_\_\_ No \_\_\_

I hereby give consent for my child/ward to be transported by a designated driver approved by Fuller Christian Reformed Church. I agree to provide specific safety seats if my child requires them in order to be transported. I waive the driver and the organization from liability due to accidental injury suffered in a motor vehicle accident while a passenger in the vehicle.

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

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