

**SAFE SANCTUARY**  
**POLICIES AND PROCEDURES**  
**EASTLAWN UNITED METHODIST CHURCH**  
**PASCAGOULA, MISSISSIPPI**

When the disciples tried to keep the children away from Jesus, he was quick to respond, “Let the children come to me.” Jesus taught that children were to be included and provided for within the community of faith. Today, the church may be the only place where some children find the unconditional love and care they so desperately need to grow and thrive. We fail in our responsibilities if we neglect to take adequate precautions against abuse in our churches. It is unlikely that we can completely prevent child abuse in every situation, but it is possible for us to greatly reduce the risk by following a thorough practical policy of prevention. This policy is designed to set procedures for the safety of the children and youth of Eastlawn United Methodist Church (“EUMC”). This is based on our understanding of the widespread problem of abuse throughout the country.

**REQUIREMENTS FOR STAFF AND VOLUNTEERS**

- All paid staff and volunteers will be interviewed and written permission will be received for a background check prior to that person assuming the position
- Volunteers working with children (birth to 18 years) must attend EUMC for 6 months before they are eligible to begin a volunteer provider position. However, such individuals may begin the application, training and background check process at any time during that 6-month period.
- Whenever reasonable, the “Two Adult Rule” will require that no fewer than two adults be present at all times during any church-sponsored program, event or ministry involving children or youth. Emergency situations may arise when the “Two Adult Rule” is not feasible. However, at no time will an adult be one on one with a child in an isolated or closed situation. In emergency situations, childcare will be relocated to a room near the meeting area and the doors will be left open. Staff and volunteers will ensure that children/youth are picked up by parents after events. Only in emergency situations may staff or volunteers give children/youth a ride home and only after securing permission from parents. If a ride home is required, 2 adults must be present in the car.
- The church nursery will require all parents to sign their child in for events, according to the church nursery policy.
- No one shall serve the congregation who, in the belief of the leader, sponsoring agency or the event director may represent a potential threat of committing abuse or violating this policy.
- No one shall serve if she/he is known to have been previously convicted of, plead guilty or no contest, to any crime arising out of any act or conduct involving sexual abuse, or any act or guilty conduct which is of a sexual, molesting, seductive, or criminally deviant nature, whether or not such conduct (molesting of a pre-adolescent child), incest, rape assaults involving adults with special needs, murder, kidnapping, pornography, and the physical abuse of an adult with special needs.
- No one shall serve as a staff or volunteer who has had a verdict or judgement rendered against him or her in any civil action arising from any personal act or conducts related to sexual abuse of an adult with special needs or child. This qualifying rule shall apply no matter how long ago the civil verdict occurred and judgement was rendered.
- Adult volunteers or staff representing outside organizations who work with children or youth at Eastlawn UMC without direct supervision of Eastlawn staff will be required to sign a statement acknowledging compliance with Eastlawn’s safe sanctuary policy.

## SCREENING PROCESS

### Responsibility:

- The Senior Pastor and/or a representative from the PPRC will be responsible for screening all paid staff employees.
- The Family/Children's Director will be responsible for screening all Sunday school and Children's Programs volunteers.
- The Family/Children's Director is responsible for screening nursery staff and volunteers.
- The Lay Pastor/Youth Director will be responsible for all volunteers within the Youth programming area.
- The Director of Music Ministries will be responsible for all volunteers in the Music Ministries area.
- Outside groups will not be screened by Eastlawn and are responsible for ensuring compliance with our Safe Sanctuary policy while using our facility.
- The Senior pastor will review the results of background investigations conducted by the Mississippi Conference and/or the Department of Human services and will take appropriate actions when background checks indicate problems with perspective or current staff or volunteers under review. Background checks indicating abuse of a minor or vulnerable adults will result in automatic and immediate suspension of contact with and access to minors or vulnerable adults in all church programs.

### Procedures:

- The persons noted above will be responsible for receiving, reviewing, confirming and processing employment or volunteer applications.
- References will be requested on all applicable groups noted above and it will be left to the discretion of the screeners (noted above) to follow up on specific references listed.
- A check for arrest and convictions record (MS) will be made for all applicable people, performed by the person noted above.
- The interview questions may vary depending on the interviewee and the recipient's responsibilities within the Church. The results of the interview, especially when sensitive will remain confidential.

All prospective staff and volunteers, please read the summary below, then complete an **Application** if you want to work in children or youth ministries. A complete and detailed policy is available in the office. All Staff and Volunteers are also asked to complete and sign the **Covenant Application**.

## **THIS IS A SUMMARY OF OUR POLICY FOR THE PROTECTION OF CHILDREN, YOUTH AND VULNERABLE ADULTS**

Preamble:

When the disciples tried to keep the children away from Jesus, he was quick to respond, “Let the children come to me.” Jesus taught that children were to be included and provided for within the community of faith. Today, the church may be the only place where some children find the unconditional love and care they so desperately need to grow and thrive. We fail in our responsibilities if we neglect to take adequate precautions against abuse in our churches. It is unlikely that we can completely prevent child abuse in every situation, but it is possible for us to greatly reduce the risk by following a thorough practical policy of prevention. This policy is designed to set procedures for the safety of the children and youth of Eastlawn United Methodist church (“EUMC”). This is based on our understanding of the widespread problem of abuse throughout the country.

Every 15 seconds a child is abused or neglected. Often abuse occurs in settings where children, youth or vulnerable adults should have been able to feel safe – homes, schools, camps, and most sadly the church. In more than three-quarters of the reported incidents of child abuse, the victim was related to or acquainted with the abuser.

It is the purpose of this policy to first of all protect the children that come to us, the second is to protect our staff both paid and volunteer from potential allegations of abuse and third to limit the extent of legal liability of our church.

Here is a comprehensive plan that will include all the areas of the issue: Screening, Supervision, Reporting Procedures and Response Plan.

These policies we have delineated are the MINIMUM necessary precautions for protecting children.

### **OUR COVENANT WITH CHILDREN AND YOUTH**

As a Christian community of faith we pledge to conduct the ministry of the gospel in ways that provide an environment for spiritual growth and for safety of children, youth in our care, as well as those who work with children and youth in this ministry. We will follow the measures of this policy in the recruitment and selection of paid staff as well as volunteer workers with children and youth. We will implement the operational procedures of this policy. We will train and educate our staff and volunteer workers in the use of these policies. We will define and follow procedures for reporting a suspected incident of abuse that conforms to state law. We will define and follow procedures for handling an allegation of abuse among staff or workers. We will be prepared to respond to media interest if an incident occurs.

### **SAFE SANCTUARY – POLICY DEFINITIONS**

**“Adult”** means a person 18 years of age or older.

**“Child abuse”** as defined under Mississippi’s Department of Human Services means any of the following

- (1) Any recent act or failure to act by a perpetrator which causes non-accidental serious physical injury to a child under 18 years of age.
- (2) An act or failure to act by a perpetrator which causes non-accidental serious mental injury to or sexual abuse or sexual exploitation of a child under 18 years of age.
- (3) Any recent act, failure to act or series of acts or failures to act by a perpetrator which creates an imminent risk of serious physical injury to or sexual abuse or sexual exploitation of a child under 18 years of age.

- (4) Serious physical neglect by a perpetrator constituting prolonged or repeated lack of supervision or the failure to provide essentials for life including adequate medical care, which endangers a child's life or development or impairs the child's functioning.

No child shall be deemed to be physically or mentally abused based on injuries that result solely from environmental factors that are beyond the control of the parent or person responsible for the child's welfare such as inadequate housing, furnishings, income, clothing and medical care.

For the purpose of this Policy, this definition includes vulnerable adults.

**“Child”** means any person under the age of 18.

**“Children's activities”** means any activity of program in which children are under supervision of persons (staff or volunteers) in charge of these activities.

**“Church”** means the Eastlawn United Methodist Church of Pascagoula, Mississippi.

**“Conference”** means the Mississippi Conference of the United Methodist Church

**“Staff person”** means any person employed by Eastlawn United Methodist Church of Pascagoula, Mississippi.

**“Volunteer”** means a person 18 years of age or older who assists in conducting children's activities under the supervision of a person in charge of children's activities.

**“Person required to report child abuse”** means person, who, in the course of their employment, occupation, or practice of their profession, come into contact with children. Such persons include, but are not limited to, medical professionals; school administrators; teachers and nurses; social services workers; day-care center workers; mental health professionals; peace and law enforcement offices.

**“Person's in charge of a children's activity”** means the church volunteer or employed staff person responsible for the conduct of this activity, such as the Sunday School or VBS teacher, nursery worker, choir director, youth leader, summer theater production staff.

**“Vulnerable adult”** means any person over 18 years of age with diagnosed diminished physical, mental or emotional capacities.

**“We”** means the Eastlawn United Methodist Church.

### **SAFE SANCTUARY STEP 1 – SCREENING PROCEDURES:**

Careful screening is one way to prevent the abuse of children and vulnerable adults. It can be time consuming and expensive, but well worth the effort in peace of mind that the most reliable, committed and experienced staff and volunteers are in place for every program that involves children and vulnerable adults.

We cooperate with the Mississippi Conference of the United Methodist Church in efforts to network with Conference agencies and local churches because staff persons and volunteers may serve in a variety of places and roles.

We propose these **MINIMUM** standards:

- All adults, volunteers or staff persons, who have regular and direct contact with children, youth and vulnerable adults shall be required to fill out an application.

- Reference check and background check will be completed for each applicant.

### **SAFE SANCTUARY – STEP 2 – SUPERVISION:**

The second step for providing a holy place of safety for children, youth and vulnerable adults is conscientious and intentional supervision. These procedures are designed to reduce the possibility of abuse to the children or vulnerable adults and to protect persons and volunteers from unwarranted accusations. Again, the MINIMUM standards and each children’s activity may adopt more stringent requirements as necessary.

- Training is a requirement for all staff persons and volunteers in charge of children’s activities.
- Minimum supervisory standards will include the “two-adult rule”. The two-adult rule requires that no matter the size of the group, there will always be two adults present. This may include the presence of an adult “roamer” who moves in and out of rooms. At least one of these adults must have training in Safe Sanctuary policies and procedures.
- No person in charge of children’s activities shall supervise an age group unless he/she is AT LEAST 5 years older than the children with whom he/she is working. Each room or space where children are being cared for shall have a window in the door or the door shall be left open. All activities should occur in open view.
- Registration materials for activities in which children are outside of the direct supervision of their parents/guardians shall require signed written permission forms that include pertinent health information in order to participate.
- All participants who can understand a covenant shall sign a participation covenant. In a situation that has continuous care, this covenant can be in the form of clear, posted rules that are explained to the participants at the outset of the program. For example a covenant shall be adopted for youth fellowship trips and retreats on each occasion. Ongoing ministries, such as the church nursery shall post their covenant in plain view.

### **SAFE SANCTUARY STEP 3 – REPORTING:**

Once an incident of child abuse occurs or allegation of an incident is made it is crucial that it be dealt with speedily and in a clearly outlined manner. The person who observes alleged abuse or to whom such alleged abuse is reported shall report the incident immediately to the person in charge of the children’s activity.

Upon receiving such information, the Senior Pastor or the person designated by and accountable to the Staff Parish Relations Committee will speak to the alleged victim immediately and call the appropriate Mississippi authorities and /or hotline to make a report.

Persons who are the objects of the report will be required to refrain from all children’s activities until the incident report is resolved. In any removal of a person from any children’s activities, care should be taken to handle this in a discreet manner, recognizing that an investigation is still being conducted.

### **SAFE SANCTUARY STEP 4 – RESPONSE PLAN:**

A quick, compassionate and unified response to an alleged incident of child abuse is expected. All allegations will be taken seriously. In all cases of reported or observed abuse in a children’s activity, all volunteers or staff involved in that activity shall be at the service of all official investigating agencies.

The Senior Pastor, or his/her designee, is the only person’s authorized to make statements to representatives of the media.

If the allegation concerns activities or persons outside any relationship to a church related event or activity, it is the responsibility of the person in charge of that event or activity to make the initial contact with the Childline and Abuse Registry 1-800-932-0313 and to inform the Senior Pastor.

If allegations are made against the Senior Pastor, the chairperson of the Staff Parish Relations Committee shall be contacted immediately and care for the responsibilities assigned to the Senior Pastor in this policy.

All prospective volunteers, please read the above summary. Then complete a **Volunteer Application** if you want to volunteer in children or youth ministries. A complete and detailed policy is available in the church office. Volunteers are also asked to sign the **Volunteer Covenant**.

#### **SAFE SANCTUARY STEP 5:**

An assigned church member will screen all computers and media, DVD, videotapes, printed material no less than yearly.

**COVENANT APPLICATION FORM**

Eastlawn United Methodist Church  
Pascagoula, MS 39567

NAME \_\_\_\_\_ M \_\_\_ F \_\_\_ BIRTHDATE \_\_\_\_\_ SS# \_\_\_\_\_  
ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_  
CHURCH I ATTEND \_\_\_\_\_ # OF YEARS \_\_\_\_\_ OVER 18 YRS. OLD? \_\_\_\_\_

**STATEMENT OF DISCLOSURE**

Eastlawn United Methodist cares about the children/youth/adults in our programs and activities, and desires to ensure their safety while they are in our care. Because we care, we ask each person who provides supervision and/or leadership to complete the following background information.

1. Have you ever been convicted of any crime against children or any other persons? Yes No
2. Have you ever been found in any dependency action to have sexually assaulted or exploited any minor or to have abused any minor?.....Yes No
3. Have you ever been found by a court in a domestic relations proceeding to have sexually abused or exploited any minor, or to have abused any minor.....Yes No
4. Have you been convicted of the possession, use, or sale of drugs within the last 7 yrs.?.....Yes No
5. Have you been released from incarceration for a conviction of the possession, use, sale of drugs within the last 7 yrs?.....Yes No
6. Within the past 30 days, have you abused alcohol, legal, or illegal drugs?.....Yes No
7. Has your driver’s license been suspended or revoked within the last 7 yrs?.....Yes No
8. Have you ever been convicted of crimes relating to financial exploitation where The victim has been a vulnerable adult?.....Yes No
9. Have you ever been found by a court in a protection proceeding to have abused or financially exploited a vulnerable adult?.....Yes No
10.
  - a. Have you ever been licensed by a board that licenses businesses/professions?.....Yes No
  - b. Have you ever been found by a board that licenses businesses/professions, or any other disciplinary board, to have sexually or physically abused or exploited any Minor or developmentally disabled adult?.....Yes No
  - c. Have you ever been found by that licensing board, or any other Disciplinary board to have abused, or financially exploited any Vulnerable adult?.....Yes No

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**STAFF AND VOLUNTEERS**  
**REFERENCES**

All references must be 18 years of age or older. No references may be a member of your immediate family (*parents, siblings, spouse, stepparents, grandparents etc.*)

**1. This reference SHOULD be the pastor or a member of the program staff of the church in which you are a church member. *\*If this reference is not from a pastor or member of the program staff of the church in which you are a member, please explain why.* If you are a pastor request a reference from you District Superintendent.**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**2. This reference should be someone who has known you for TWO YEARS or more. He/She may be a teacher, employer, classmate, etc.**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**3. This reference should be someone who has know you for TWO YEARS or more. He/She may be a teacher, employer, classmate, etc.**

NAME \_\_\_\_\_ PHONE \_\_\_\_\_

RELATIONSHIP \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Please note any matters, other than those addressed in the Covenant Application Form, that will help us ensure optimum matching of your service with conference and district ministries with children and youth. (health, diet, background, life experiences, limitations, interest, gifts, etc.)

**GENERAL REFERENCE FORM**

STAFF/VOLUNTEER WORKER REFERENE FORM – SAFE SANCTUARIES PROGRAM  
 CONFIDENTIAL INFORMATION  
 EASTLAWN UNITED METHODIST CHURCH, PASCAGOULA, MISSISSIPPI

APPLICANT NAME \_\_\_\_\_

The individual named above has applied to work with children/youth at CHURCH events. Please complete this form as is elates to this person, their character, and their qualifications to work in such settings. **The person completing this form should not be a relative of the individual for whom the form is being completed and must have known the applicant for at least two years.**

PLEASE COMPLETE THE INFORMATION BELOW AND RATE THE PARTICIPANT IN THE CATEGORIES LISTED:

I HAVE KNOWN THE APPLICANT FOR:

\_\_\_ 2 years    \_\_\_ 2-5 years    \_\_\_ 5-10 years    \_\_\_ more than 10 years

	Excellent	Good	Poor	Don't Know
Personal Habits				
Character				
Moral				
Attitude				
Compassion for those in need				
Responsible to complete commitments				
Emotional Stability				
Christian Maturity				
Ability to relate to youth (12-18 yrs. old)				
Ability to relate to children (under 12 yrs.)				
Receptivity to constructive criticism				
Health				

If you were in our position, would you affirm this person as a worker with children/youth?

\_\_\_ I would with no reservations; \_\_\_ I would with some reservations; \_\_\_ I would not recommend this applicant

.....

REFERENCE NAME \_\_\_\_\_ E-MAIL \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

***Please return the completed form to:*** Eastlawn United Methodist Church, Pascagoula, MS

**PASTOR OR PROGRAM STAFF REFERENCE FORM**

STAFF/VOLUNTEER WORKER REFERENE FORM – SAFE SANCTUARIES PROGRAM  
 CONFIDENTIAL INFORMATION  
 MISSISSIPPI CONFERENCE OF THE UNITED METHODIST CHURCH

APPLICANT NAME \_\_\_\_\_

The individual named above has applied to work with children/youth at CHURCH events. Please complete this form as is elates to this person, their character, and their qualifications to work in such settings. **The pastor of program staff person completing this form should not be a relative of the individual for whom the form is being completed.**

PLEASE COMPLETE THE INFORMATION BELOW AND RATE THE PARTICIPANT IN THE CATEGORIES LISTED:

I HAVE KNOWN THE APPLICANT FOR:

\_\_\_ Less than 1 yr.    \_\_\_ 1-5 years    \_\_\_ 5-10 years    \_\_\_ more than 10 years

	Excellent	Good	Poor	Don't Know
Personal Habits				
Character				
Moral				
Attitude				
Compassion for those in need				
Responsible to complete commitments				
Emotional Stability				
Christian Maturity				
Ability to relate to youth (12-18 yrs. old)				
Ability to relate to children (under 12 yrs.)				
Receptivity to constructive criticism				
Health				

If you were in our position, would you affirm this person as a worker with children/youth?

\_\_\_ I would with no reservations; \_\_\_ I would with some reservations; \_\_\_ I would not recommend this applicant

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REFERENCE NAME \_\_\_\_\_ EMAIL \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

HOME PHONE \_\_\_\_\_ WORK PHONE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**Please return the completed form to:** Eastlawn United Methodist Church, Pascagoula, MS

**EASTLAWN UNITED METHODIST CHURCH**  
**CHILDREN AND YOUTH**  
**STAFF/VOLUNTEER AND LEADER APPLICATION**

**PERSONAL**

Last Name \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_  
Date of Birth \_\_\_\_\_ Social Security Number \_\_\_\_\_  
Current Driver's License Number \_\_\_\_\_ State \_\_\_\_\_  
Current Home Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_  
Current Employer \_\_\_\_\_ # of years employed \_\_\_\_\_  
Address \_\_\_\_\_

Have you ever been convicted of or pled guilty to a crime, either misdemeanor or a felony (including but not limited to drug-related charges, child abuse, or other crimes of violence, or theft?) Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain:

\_\_\_\_\_

**CHURCH MEMBERSHIP**

How long have you been attending EUMC? \_\_\_\_\_  
Please indicate the type of volunteer work you prefer and why:

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

If you volunteer to provide transportation:

Are you at least 25 years old? \_\_\_\_\_ Do you have a valid driver's license? \_\_\_\_\_

Insurance Company \_\_\_\_\_

Policy Number \_\_\_\_\_

**EDUCATION**

How many years of schooling have you completed \_\_\_\_\_

First Aid training \_\_\_yes \_\_\_no

Special skills (second language, sign language, special needs, arts, crafts, teaching, etc.)

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

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**EASTLAWN UNITED METHODIST CHURCH**  
**PASCAGOULA, MISSISSIPPI**

**PERMISSION AND LIMITED POWER OF ATTORNEY**

The undersigned, being the custodial parent of legal custodian of the child(ren) hereinafter named, does hereby give permission for the child(ren) to participate in the following activity, which is sponsored by the Eastlawn United Methodist Church of Pascagoula, Mississippi:

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The undersigned appoints the person(s) hereinafter named for purposes of consenting to any and all medical treatment (of whatsoever nature) that may arise during the child's participation in the activity stated herein when the attending physician believes that medical assistance must be given to the child before I can be reached to personally give my consent. I, further, agree to be financially responsible for any such treatment given to my child and consented to be person authorized to give consent through this document.

The undersigned acknowledges that the activity for which consent is given may involve some risk of harm, although it is understood that all reasonable steps will be taken to keep the child(ren) from injury. The undersigned agrees that Eastlawn United Methodist Church of Pascagoula, Mississippi, as well as those persons conducting the activity for which consent is given, and as well as those who are part of the governing body of said church, shall NOT be held liable for injury suffered by the child(ren) except for injury from willful misconduct of said participating person.

Name of child(ren) participating:

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Name of Person's authorized to consent to Emergency Medical Treatment:

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By checking the space to the right I am confirming my objection to permit my child(ren) to be treated y medical personnel while participating in the above-mentioned activity. \_\_\_\_\_

Custodial Parent/Legal Guardian \_\_\_\_\_

Dated: \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.