

RISK MANAGEMENT MEMO

"SCREENING VOLUNTEERS AND PAID STAFF WORKERS WITH CHILDREN AND YOUTH"

Loss Control And Insurance Topics For United Methodist Leaders

Number 2

Prepared by the United Methodist Insurance Program, Sponsored by the General Council on Finance and Administration

The tragedy of abuse of children, youth and adults by religious leaders has received wide coverage over the past several years. The secular media reports of United Methodist-related incidents have been at a lower profile than those received by some other denominations. Known occurrences include ones involving perpetrators who have been United Methodist church school and camping leaders.

Church schools are vulnerable.

Our church schools are vulnerable to potential sexual and other child abuse. Most church-sponsored programs rely on high numbers of volunteer staff. Often, only minimal screening of those volunteers occurs. Some programs have used youth in teaching roles with little training. Many staff have not been as carefully screened as they should have been.

There is a long-standing assumption that church school and youth program volunteers are motivated by a faith commitment and desire to serve others. Minimum volunteer application, screening and supervision procedures have resulted in violation of the trust given some individuals by pastors, church school superintendents, parents and children. Some specialists who work with child abuse prevention suggest that, as other professional children and youth-serving programs and agencies implement more effective screening techniques, church programs will be an attraction to chronic child abusers. The enthusiastic acceptance the church has readily given to almost anyone expressing a willingness to work with children and youth is widely known both inside and outside the church family.

Jesus made the importance of children clear during his ministry. "Let the little children come to me, and do not stop them; for it is to such as these that the kingdom of heaven belongs." Emulating his example, the church has recognized that education is important for nurturing children in the faith. Sunday, mid-week and vacation church school and other experiences are ways that Christian education occurs in our local churches. A variety of camps, retreats, conferences, trips and high adventure experiences have enriched the faith development of our children and youth in settings beyond the local church. We keep children from growing in faith when we allow abuse to occur in any of the church's education, recreation and other nurturing programs. The broken trust, pain and suffering which results distracts from the mission and ministry of the church.

Responsible church leaders use the utmost care in screening volunteer and paid staff who will be working with the children and youth in our programs. It is recommended that church leaders check the background, training and experience of individuals seeking to *volunteer* their services, in addition to those applying for paid positions. The encouraged practice is to require use of application forms with volunteers for teaching, child care, youth counselor and other roles which provide access to children and youth. This practice is urged for several reasons. First, the significance of these positions is affirmed when persons wishing to serve must apply for the opportunity. Second, for everyone's protection, inquiries should be made about the history of those who volunteer for these positions. Previous incidents or allegations which could disqualify them may be discovered. Request and contact references to learn more about applicants.

Screening of staff is key.

Screening of staff is a key step for developing a child abuse prevention program. There are additional actions which need to be taken by church leaders seeking to develop and implement prevention efforts.



A. Check List for Administrators

1. Evaluate screening and hiring practices - including volunteers.
2. Review staff training procedures.
3. Implement thorough staff supervision procedures.
4. Evaluate supervision of activities at and away from the church-sponsored entity.
5. Routinely document all personnel processes.
 - Hiring
 - Probations
 - Incidents
 - Dismissals
6. Work with appropriate local church and conference committees to develop needed procedures.
7. Assure actual practice reflects written policies and procedures.

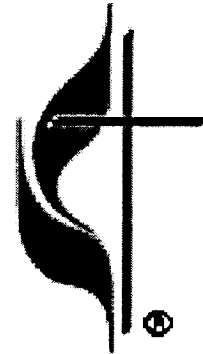


B. Check List for Local Church, District and Conference Groups

1. Identify potential problems in advance.
2. Develop procedures to:
 - Handle *allegations*
 - Handle *known incidents*
 - Handle *offenders*
3. Prepare to work with parents and children in the event of a known incident.

The General Council on Finance and Administration has developed a model *Volunteer Application Form* which church leaders are encouraged to adapt for their own use. Please review the sample with a local attorney or other authority prior to using it with your volunteer applicants. Legal counsel familiar with your state's personnel laws must be consulted when developing application forms for paid staff positions.

Many insurance companies providing liability coverage for our churches and institutions have developed helpful resources on child and sexual abuse/misconduct prevention. These resources can be useful as you review your present policies and procedures, and implement changes.



The Risk Management Department of the General Council on Finance and Administration of The United Methodist Church (GCFA) has developed this Risk Management Memo as an educational tool on behalf of the United Methodist Insurance Program. GCFA does not develop loss control procedures for United Methodist organizations, but does offer the Risk Management Memo series to help them develop loss control procedures to suit their own needs. We do not intend for nor does this memo establish a standard of care regarding any of this subject matter, and GCFA does not provide legal advice. We encourage church leaders to consult with competent attorneys about any matter that has potential legal implications. GCFA encourages reproduction and distribution of this memo within the United Methodist denomination. Non-United Methodist groups may contact the Risk Management Department, GCFA, 1200 Davis Street, Evanston IL 60201, 847-425-3345 to discuss permission to reproduce this memo. [8/01]

**VOLUNTEER APPLICATION FORM
THE UNITED METHODIST CHURCH**

*SAMPLE ONLY. Please review
with local attorney or other
authority prior to use*

The information obtained on this form is for internal use by this local church only.

Name _____ Date of Birth _____

Address _____

City, state, zip _____

Home telephone _____ Business telephone _____

Position applied for _____

Occupation, current employer, and business address: _____ Time at this employment: ___ years ___ months

List (name and address) other churches you have attended regularly the past five years:

Name/address/telephone number of pastor, and employer and personal references who may be contacted.

Pastor:

Employer:

Personal:

Describe your background working with the program and/or age group requested. (Include information about church-related, volunteer, and paid experience you may have.)

Groups you are currently active in:

Have you ever been convicted of any criminal offense? Yes No

Have you ever been charged with or convicted of child neglect or abuse? Yes No

Have any complaints or allegations of misconduct involving children ever been made against you? Yes No

Have you been convicted of the possession, use, or sale of drugs? Yes No

Within the past 30 days have you abused alcohol, legal or illegal drugs? Yes No

Have you been convicted or plead guilty to a traffic offense within the last 5 years? Yes No

Current drivers license number:

Please explain fully any YES answers to the above questions. In addition to the above, is there any fact or circumstance involving you or your background that would call into question your being entrusted with the supervision, guidance, and care of young people? (Explain)

The information that I have provided may be verified by contacting persons or organizations that may have information concerning me. I hereby release and agree to hold harmless from liability any person or organization that provides information, and this release may be sent to any reference. I also agree to hold harmless the (name) United Methodist Church, and the officers, employees, and volunteers thereof from any use of this application or information. I waive any right that I may have to inspect references provided on my behalf.

I certify that the information I have provided is true and correct; if it is found that the answers given are untrue, I understand it may be cause for dismissal.

Signature _____ Date _____

**SUGGESTED WRITTEN RECORD OF CONTACT WITH A REFERENCE
OF AN APPLICANT FOR CHILDREN/YOUTH WORK**

(PLEASE COMPLETE ONE FORM FOR EACH REFERENCE CONTACTED)

CONFIDENTIAL

1. Name of Applicant _____
2. Reference or church contacted (if a church or organization, identify both the church or organization and person or minister contacted)

3. Date(s) and time(s) of contact(s) _____

4. Person contacting the reference or church _____
5. Method of contact (e.g., telephone, personal conversation, letter [PLEASE ATTACH]):

6. Summary of conversation (summarize the reference's or minister's remarks concerning the applicant's fitness and suitability for youth or children's work)

Signature

Position: _____

Date: _____

REPORT FORM FOR INJURIES OCCURRING IN THE NURSERY

Today's date: _____

Injured's name:	Age:	
Address:	City:	Phone:
Parents/guardians of inured:		
Date/time/parent/guardians contacted:		

Location of accident:	
Date of accident:	Time of accident:
Staff person in charge at time of accident:	
Brief description of accident:	
Other children involved in accident:	
Other adult or youth witnesses to accident:	

Action taken:
Medical attention required:
Treating medical personnel and/or facility:
Follow up required:

Insurance-related action:	
Name of insurance company:	Policy term:
Agent:	
Action taken:	

Report prepared by: _____

REPORT FORM FOR SUSPECTED INCIDENTS OF SEXUAL OR PHYSICAL ABUSE

Staff person completing report:

Victim's name:

Age:

Parents/guardians of victim:

Location of incident:

Date:

Time:

Brief description of incident:

Date/time/location of initial conversation with victim:

Notes of conversation:

Name of person accused of abuse:

Date/time/location of initial conversation with accused (if staff member):

Notes of conversation:

Date/time/location or phone call of initial contact with parent(s)/guardian(s):

Person spoken to:

Notes of conversation:

Date/time of call to child protective services agency:

Person contacted:

Notes of conversation:

Date/time/location of call to law enforcement agency:

Persons contacted:

Notes of conversation: