

GUIDELINES FOR MINISTRY WORKERS
BIBLE BAPTIST CHURCH OF BALLINCOLLIG, CORK
AND ITS ASSOCIATED YOUTH MINISTRIES
JUNE 2008

Policy Statement

In order to provide as safe and secure an environment as possible for our church ministry participants, and to minimize the ministry's and workers' vulnerability to unwarranted accusation, the following procedures have been adopted and will be strictly enforced.

Volunteer Worker Screening Procedures

1. Prior to consideration for a position, any candidate who may be working with children, youth, or the disabled will complete and return an initial "**Ministry Application**" (see Form #1).
2. The "Ministry Application" will be carefully reviewed by a ministry leader to make certain that the worker will be appropriate for the ministry position, based on the information provided.
3. If the person appears to be appropriate for the ministry work, then at least one of the references will be checked to confirm the information provided on the "Ministry Application" (see Form #2).
4. Any information indicating that a candidate poses a threat to others or has any prior history of physical or sexual abuse directed against another person will result in the immediate removal of the individual candidate from consideration for a ministry position with this organization.
5. A criminal background check may be performed through a Garda law enforcement agency with respect to any candidate seeking to work with children, youth, or the disabled.

Employee Screening Procedures

1. The same procedure set forth for volunteer workers will apply to all potential employees, regardless of the ministry position for which they are being considered (see Forms #1 and #2).
2. In addition, a criminal background check will be performed through a Garda law enforcement agency with respect to all candidates for employment.
3. Any information indicating that a candidate poses a threat to others or has any prior history of physical or sexual abuse directed against another person will result in the immediate removal of the individual candidate from consideration for employment with this organization.

Waiting Period

No volunteer worker candidate will be considered for any ministry position involving contact with children, youth, or the disabled until the candidate has been regularly involved in our local organization (or by way of validation by participating in an associated ministry) for six months or more.

Child Protection Officers

1. At least two Child Protection Officers (one male, and the other female) will be appointed by the Youth Camp Director who will be responsible for watching for possible areas of wrong doing by other ministry workers, and reporting those concerns to the Youth Camp Director.
2. They will be required to interview any worker associated with an injury, or alleged child abuse along with the Camp Director.
3. Child Protection Officers have the authority to ask anyone to leave the Youth Camp who they deem to be a threat to a child, or to the welfare of the children at the Victory Youth Camp.
4. Child Protection Officers also have the authority to call in the Garda to investigate suspicious behaviours, but must still also notify the Camp Director of such action.
5. Any allegations against a Child Protection Officer must be made to the Camp Director.

Supervision During Activities

1. At least two adults (at least one over the age of 21) should be present at every function and in each classroom, vehicle, or other enclosed area, during every child, youth, and disabled ministry program. (For large groups of children, the number of adult supervisors will be increased in accordance with state student/teacher ratio requirements.)
2. During services/events, at least two adults (who have been approved as volunteer workers through the above screening process) will be appointed to supervise activity on the premises outside of the room where the service/event is held.
3. Workers should arrive at least 10 minutes before a scheduled activity and should keep watch over those in their care until all have been picked up by an authorized person. Do not send children out to find their parents, and do not release any child or youth to await transportation.

Worker Restrictions

1. For children over the age of five, at least one adult female should take girls to the rest room, and one adult male should take boys to the rest room. The adult should check to make sure the facility is safe, and then wait outside the rest room until the children come out.
2. Children five years of age or younger (boys and girls) should be assisted as needed in the rest room by an adult female.
3. Never touch a person's private areas except when necessary, as in the case of changing a diaper.
4. Workers should avoid the appearance of impropriety, such as sitting older children on their lap, kissing or embracing others, etc.
5. Workers are to release children in their care only to parents, guardians, or persons specifically authorized to pick up the person.

Discipline

1. Workers are never to spank, hit, grab, shake, or otherwise physically discipline anyone.
2. Disciplinary problems should be reported to the Pastor, Camp Director or to a parent or guardian.

Injuries or Illness

1. Workers, or children who are ill (with a fever, or having a communicable disease which can be transmitted by cough or by touch) will not be permitted to participate in any ministry activity.
2. A suitable worker substitute (who has been approved as a volunteer worker through the above screening process) must be used to take the place of workers who are ill.
3. Children should be returned to their parent or guardian as soon as illness is discovered. If this is not possible, then the person who is ill should be isolated in a manner that will allow supervision to continue until the person can be returned to their parent or guardian.
4. Reasonable steps should be taken to avoid contact by anyone with body fluids of any kind.
5. Any coordinator/supervisor who becomes aware of an injury to a worker or child will take steps to ensure proper medical attention is given to the injured person. If any medical attention is needed, the Director of the Activity must be notified immediately.
6. Persons who have received an injury which is obviously minor, should be given first aid as needed at the time of injury. The person's parent or guardian should be notified of the minor injury when they pick up the injured person.
7. Any injury which may require medical treatment beyond simple first aid should be given immediate attention: the parent or guardian of the injured person should be immediately notified, along with the Director of the Activity. An ambulance should also be called immediately if warranted by the injury.

Record-keeping

1. An attendance list should be kept for all of the ministry's functions involving children, youth, and the disabled. The date of the function, along with the names of all participants and coordinators/supervisors should be recorded.
2. A written incident/notice of injury report should be prepared by workers whenever an injury should occur during a ministry function (see Form #3). The incident report will be forwarded to the Director of the Activity promptly upon completion.

Notice of Injury, Abuse, or Molestation

1. Workers who become aware of any injury, abuse, or molestation connected with any ministry activity will immediately inform the Director of the Activity or ministry leader of such injury, abuse, or molestation, and will complete a "Notice of Inquiry" form (see Form #3).
2. Any ministry leader who becomes aware of possible abuse or molestation of a participant will ensure that the participant's parent or guardian is immediately informed that possible abuse or molestation has occurred. The ministry leader will also see that an attorney is promptly contacted to provide a written opinion as to whether the organization should report the abuse or molestation to law enforcement authorities. The written opinion should be obtained within 24 hours of when the ministry leader first becomes aware of the abuse or molestation, and the attorney's advice should be followed. If the attorney recommends that an incident be reported, the advice should be acted upon immediately.
3. Upon notice of abuse or molestation, the ministry's insurance carrier (general or professional liability insurance) must be promptly notified, as well as any associated Pastor to whom the Ministry has a duty to report such allegations.

Violation of Policy or Procedures

1. Workers must promptly notify their Director of any activity undertaken on their own behalf or by others which violates this policy or procedures.
2. Any ministry leader who becomes aware of a violation of the policy or procedures will take all necessary steps to ensure future compliance with the policy and procedures by all workers, and will remove workers from their position if such removal is warranted, or if the worker poses a potential threat to others.

Internal Investigation

1. Any allegation of abuse or molestation will be taken seriously and will be investigated by ministry leaders.
2. Any employee of the ministry who is the subject of an investigation will be removed from their position, with pay if they are on staff, pending completion of the investigation (unless the employee has admitted to the abuse or molestation, in which case they will be terminated in accordance with organizational employment practices).
3. Any volunteer worker who is the subject of the investigation will be removed from their position pending completion of the investigation.
4. Any person who is not found innocent of alleged abuse or molestation will be removed from work with children, youth, or the disabled within the organization. The church will consult with legal counsel for advice if termination of employment is indicated.

Dealing With Law Enforcement/Media

1. All ministry leaders, employees, and volunteers will cooperate fully with any law enforcement or governmental agency that may be investigating allegations of injury, abuse, or molestation in connection with activities of the organization.
2. Legal counsel will be contacted for advice and guidance as soon as possible after the organization receives notice of possible abuse or molestation in connection with organization activities. Decisions concerning the ministry's response to the allegations will be made in accordance with such advice.
3. A single organizational leader will be designated as spokesperson following notice of any abuse or molestation in connection with activities of the ministry. The spokesperson will be the only person to convey information concerning the situation, and (to avoid compromising any ongoing investigation) will convey only such information as is necessary under the circumstances.

Annual Employee/Worker Review

1. This policy and procedures will be conveyed for review annually to all workers, employees, coordinators, supervisors, and leaders to whom it applies.
2. All ministry employees, and all volunteer workers associated with the organization will complete a new "Application" once each year (see Form #1).
3. Should the application show that any employee or volunteer worker has become unsuitable for working with children, youth, or the disabled, they will be immediately removed from their current position, and will not be considered for other positions involving work with children, youth, or the disabled.

Revision of Policy/Procedures

This policy and procedures will be regularly reviewed with legal counsel and can be modified in accordance with the Bible Baptist Church's bylaws. Any such modification should be promptly conveyed to all persons affected by the modification.

**Children/Youth Work Application Form
Volunteers and Employees**

Personal Information

Today's Date _____
Name: _____ Daytime telephone: _____
Address: _____
Church Name: _____
Church Address: _____
Pastor's Name: _____ Phone: _____
Are you a member of the above Church? Yes / No How Long Are You a member? _____
Your Age: _____ Birthdate: _____ Gender: _____

In which children/youth program(s) are you seeking to become involved?
 Teaching, Preaching, Sports, Kitchen, Music, Other

What skills would you bring to the children/youth program? _____

What other children/youth work experience do you have? (Please list.)

Organization	Program	Dates	Contact
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Have you at any time ever:

Been arrested for any reason? _____ **Yes** _____ **No**

Been convicted of, or pleaded no contest to, any crime? _____ **Yes** _____ **No**

Engaged in, or been accused of, any act of child molestation, exploitation, or abuse?
_____ **Yes** _____ **No**

Had a disciplinary sanction (from an employer, sports organisation, Church or any other voluntary body) relating to inappropriate behaviour with children or young people, or child abuse?
_____ **Yes** _____ **No**

Are you aware of:

Having any traits or tendencies that could pose any threat to children, youth or others?
_____ **Yes** _____ **No**

Any reason why you should not work with children, youth, or others?
_____ **Yes** _____ **No**

If the answer to any of these questions is "yes," please explain in detail: _____

Do you Smoke? **Yes / No** Have you drank alcoholic beverages in the past year? **Yes / No**

Are you on any prescription medication? _____ **Yes** _____ **No**
If yes, what medications are they? _____

(Please attach additional pages if more space is needed)

Involvement in Church Activities

What church or churches have you attended in the past five years?

Church name	Pastor's name	Years attended
_____	_____	_____
_____	_____	_____
_____	_____	_____

Personal Character References (other than relatives)

Name/Relationship	Address	Phone
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Applicant Verification and Release

I hereby declare and represent that, except for as disclosed above, I have not at any time, whether in Ireland or abroad, been found guilty and sentenced by a Court for a criminal offence.

I recognize that the organization to which this application is being submitted is relying on the accuracy of the information contained herein. Accordingly, I attest and affirm that all of the information that I have provided is absolutely true and correct.

I authorize the organization to contact any person or entity listed in this application, and I further authorize any such person or entity to provide the organization with information, opinions, and impressions relating to my background or qualifications.

I voluntarily release the organization and any such person or entity listed herein from liability involving the communication of information relating to my background or qualifications. I further authorize the organization to conduct a criminal background investigation if such a check is deemed necessary.

I agree to advise the Bible Baptist Church should I be convicted of an offence after the commencement of my employment/voluntary activity with the Bible Baptist Church and that failure to do so may lead to the immediate suspension of my work with children at the Church, the termination of my services and, in certain cases, the termination of my membership in the Church.

Printed name: _____

Signature: _____ Date: _____

Interview Section – to be completed by Authorized Church Staff

Interviewer _____ Date of Interview _____
Have they reviewed the Bible Baptist Church's Child Protection Policy Guidelines? **Yes No**

Questions and Issues

Garda Background Check Necessary? **Yes No**

Initiated When? _____ Returned When? _____

Attach Background Check Form

Approval Status _____

This person will be monitored by and reporting to: _____

Probation Period 1 month, 3 months, 6 months

Referred to for further interview _____

Pastor/Director Acceptance Signature _____ Date _____

Reference Response Information

From:

**VICTORY YOUTH CAMP,
a Ministry of the Bible Baptist Church of Ballincollig, Cork**

To: _____

Address: _____

Regarding: _____

Name of Worker Candidate

To Whom It May Concern:

You have been listed as a reference by the above individual, who has expressed an interest in working with children or youth in our ministry. In order for our organization to properly evaluate the qualifications of this worker candidate, we would like you to complete this form with your honest opinions and impressions of the candidate.

Once completed, please return this form to our organization in the enclosed envelope. Thank you for your assistance in this regard.

1. How long have you known the above individual? _____
2. In what capacity have you come to know this individual? (i.e. coworker, neighbor, friend, church-member, etc.) _____
3. In your opinion, is the above worker candidate fully qualified to work with children and youth? ____ Yes ____ No (if no, explain below)
4. What concerns, if any, would you have in allowing this individual to work with children or youth? _____

5. Are you aware of anything in the candidate's background, personality, or behavior that could in any way pose a threat to children or youth? ____ Yes ____ No (if yes, explain below)

Additional Comments or Explanation: _____

The above information is true and correct to the best of my knowledge.

Signature: _____ Date _____

Please return this form at your earliest convenience to:

The Bible Baptist Church
Attention: Pastor Craig Ledbetter
Unit B, Enterprise Business Park
Innishmore
Ballincollig, Cork

VICTORY YOUTH CAMP

Notice of Injury

To be filled out by the attending Youth Worker AND the Child Protection Officer

Time and Place of Injury Date of Injury: _____ Time: _____
Where did it occur? _____

Person Injured Name: _____ Age: _____
Address _____
Phone: _____
Name of parents/guardians (if a minor): _____

Injuries sustained: _____

Where was injured taken? (hospital/doctor): _____

Relationship to the Youth Camp:

Child, Worker, Visitor

Who was responsible for supervision at the time of the injury? _____

Does the injured party have personal medical insurance that could apply? Yes No

Name of medical insurance company _____

Parent/Guardian Contacted? Yes / No When? _____

Camp Director Notified? Yes / No When? _____

Full Description Of Incident _____

Witnesses Name: _____ Phone: _____
To the Incident Address: _____
Name: _____ Phone: _____
Address: _____

Final Conclusion What was the final conclusion about the injury and how was it closed in relation to the Youth Camp?

Print Your Name _____
Signature: _____ Date of report: _____

Child Protection Office Name: _____
Signature: _____ Date Signed: _____