

Safe Sanctuary Policy

In compliance with the regulations of the Peninsula-Delaware Conference of the United Methodist Church concerning safe sanctuary policies and procedures, the One Board of St. John's UMC hereby adopts the following Safe Sanctuary Policy effective January 1, 2025.

Adults (defined as those age 18 or older) working with children and youth (defined as those under the age of 18) in an isolated location will adhere to the following personnel requirements:

1. Attend St. John's regularly and/or be a church member for at least 6 months prior to working with children/youth
2. Complete a written application which includes contact information for personal references every two years
3. Agree to the screening process as described in this section. The Pastor is responsible for completing the screening process for each applicant. The screening will verify the applicant's name and address and will include both a criminal background check and a sex offender registry search. Each applicant will be screened at least once every two years.

The following procedures will be deemed official policy:

- A. There will be two or more unrelated adults at any church event which includes children/youth. Should there be a shortage of volunteers, a designated adult be assigned to randomly audit any situations in which a single volunteer is engaged with children/youth.
- B. A list of adults approved to work with children/youth will be maintained in the Pastor's office. Both the Pastor and the Spiritual Formation One Board Representative will have access to the list to allow organizers of events to determine eligibility of adults to participate.
- C. All adult workers must be at least 5 years older than the oldest child/youth in the group they are working with.
- D. All rooms must have a window in the door or the door must remain open while activities are taking place.
- E. Any person under the age of 18 is not to be left unattended during any church activity with the exception of restrooms, in which case the adult will remain in the hallway within earshot.
- F. Adults who are not certified by the above personnel requirements may be observers of activities but may not take the place of the certified adults.
- G. A parent or authorized caregiver must sign their child in and out of Sunday School. Sunday School will not be dismissed until the church service is over. Parents/guardians must initial the attendance sheet that they have picked up their child.
- H. The SAFE Team will ensure all adults working with children/youth as well as parents/families of those children/youth are provided an annual review of the Safe Sanctuary policy. This may take various forms such as providing a written copy of this policy, via Zoom, or in-person.
- I. The SAFE Team will encourage adults working with children/youth to avail themselves of opportunities to participate in CPR/First Aid training and to be re-certified every three years.
- J. Physical contact between an adult and a child/youth should be kept to a minimum. Minimal physical contact to ensure the safety of a child/youth may occur. Should a child/youth initiate

physical contact with an adult, the adult should disengage carefully and politely and advise the parent/guardian as soon as possible.

- K. Adults should be aware of how their comments may be interpreted to ensure off-color language and sexual innuendo/remarks are avoided.
- L. Children/youth should not be contacted directly by adults through text, email, videochat, or phone without the express permission of the parent/guardian.
- M. If bulk email communication is used to keep children/youth informed, "bcc" should be used so that individual email addresses are not accessible to others.
- N. If the pastor is asked to counsel children/youth, a parent/guardian must be present. Meetings will be held in a public setting and parent permission must be obtained beforehand. An additional adult should be present in the building within earshot of the meeting. Such counseling should be for a limited number of sessions before referral to another professional.
- O. If a child/youth reports abuse (or it is suspected), the adult must personally and immediately inform the authorities. (Note: Informing the Pastor is not sufficient, it must be the authorities.)

The SAFE Team will be responsible for maintaining, upholding, and annually reviewing and revising this Safe Sanctuary Policy. This Team will encourage all adults in ministry to children/youth to participate in available training. The Team will administer the policy and protect the confidentiality of all information. In the event there is reason for concern, the Team will work collectively to discern and implement actions and interventions. The SAFE Team shall consist of:

- a. Trustee representative
- b. SPRC representative
- c. Sunday School representative
- d. Pastor

Attachments:

Application

Sunday School Consent Form

St. John's United Methodist Church

312 E. Main Street P. O. Box 236
Fruitland, MD 21826
410-742-5592

Revised 6-16-25

Application to Work with Children and Youth

Date: _____

(last name)

(first name)

(middle name)

If you have used any other name in the past, what was it? _____

Date of Birth: _____

Social Security Number: _____

Current Address: _____

(street)

(city)

(state)

(zip code)

Phone Number: _____

(cell)

(home)

E-mail Address: _____

Place of Employment: _____

Phone: _____

Personal Reference #1

(non-relative)

(name)

(phone)

Personal Reference #2

(non-relative)

(name)

(phone)

I have received a copy of the St. John's UMC SAFE Sanctuary Policy. Please answer the following questions.

- ☐ Yes ☐ No As a volunteer in this congregation, do you agree to observe and abide by all church policies regarding working in ministries with children and youth?
- ☐ Yes ☐ No As a volunteer in this congregation, do you agree to observe the "Two Adult Rule" at all times?
- ☐ Yes ☐ No As a volunteer in this congregation, do you agree to abide by the "Six Month Rule" before beginning a volunteer assignment?
- ☐ Yes ☐ No As a volunteer in this congregation, do you agree to participate in training and educational events provided by the church related to your volunteer assignment?
- ☐ Yes ☐ No As a volunteer in this congregation, do you agree to promptly report abusive or inappropriate behavior to your supervisor(s)?

I affirm I have never participated in, been accused or convicted of, or pleaded guilty or no contest to any abuse or sexual misconduct.

I have read this SAFE SANCTUARIES PARTICIPATION COVENANT and I agree to observe and abide by the policies set forth above.

Signature of Applicant

Date

(over)

(office use only)

Verification of Criminal Background Check and Sex Offender Registry Search

Name of Person Completing Criminal Background Check, Date and Findings:

(print name)

(date of check)

(findings)

Name of Person Completing Sex Offender Registry Search, Date and Findings:

(print name)

(date of search)

(findings)

Additional Comments:

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2024/2025 Sunday School Consent Form

I give permission for my child _____ to attend Sunday School at St. John's UMC.

Address _____

Date of Birth _____ Allergies/Medical Info _____

Parent/Guardian name _____ Phone _____

Names of those who can pick up child from Sunday School:

1. _____ 2. _____

3. _____ 4. _____

Emergency Contact Name(s) and Phone Number(s): _____

I give permission for my child to attend St. John's UMC Sunday School. By allowing my child to attend, I give permission for my child's information to be stored by St. John's UMC for purposes as considered necessary, and for photographs and video which may feature my child to be used by St John's UMC.

I have also reviewed the Safe Sanctuary Policy and will help the teachers uphold the policy, which includes communicating with my child to stay with both teachers until picked up by family members listed.

Should there be changes to details in this form, I understand that it is my responsibility to inform the teacher and update it.

In the unlikely event of illness or accident, I give permission for any necessary emergency first aid or medical treatment to be given to my child. In an emergency and if I am not contactable, I am willing for my child to receive hospital treatment. I understand every reasonable effort will be made to contact me as soon as possible.

☐ Yes ☐ No I give permission for the Pastor or other adult leader of a church-related activity that my child/youth participates in to contact my child/youth via e-mail, text, phone with information about that activity.

Parent/Guardian Name _____

Signature _____ Date _____