# Diocese of Rockford Guidelines for Youth and Those Working with Youth

# Employee, Adult Volunteer and Youth Participant General Guidelines and Boundaries Expectations

Revised and Effective October 7, 2016

These Guidelines have been developed to support the Diocese's youth, young adult ministry leaders, and employed adults and volunteering adults who work with youth. The intent of these Guidelines is for youth and adults to have a consistent set of rules to govern and guide appropriate conduct. The Supervising Adult, defined below, of an activity in which youth participate is required to verify compliance with these Guidelines.

In these Guidelines, "Minors" are defined as individuals under the age of 18 years. "Youth" is defined to include both minors and young adults between the ages of 18 to 20 years.

"Supervising Adult" is defined as the person held responsible for the operation of the activity, and may include the Pastor, Principal, Youth Minister, Coordinator or Director of Religious Education, Director of a Diocesan Department, a teacher, employed coach, or other similar individual; provided that the Supervising Adult shall be employed by the Diocese, parish, school, or other Diocesan entity. A volunteer may not be a Supervising Adult. The Supervising Adult may or may not be present at the activity, but is responsible for ensuring these Guidelines are followed.

"Activity" is defined as any gathering on Diocesan premises or off Diocesan premises, which is sponsored or hosted by the Diocese, a parish or school of the Diocese, or by other Diocesan entity, in which minors and/or youth participate.

#### A. Requirements for Employees and Volunteers working with Minors

- 1. All adult employees and volunteers having contact with minors are required to:
  - a. undergo a criminal background check before performing services for the Diocese. School employees undergo a fingerprint background check. All other employees and all volunteers undergo a name background check;
  - b. complete the online safe environment training, VIRTUS: *Protecting God's Children for Adults*; and
  - c. read and agree to abide by:
    - the Diocese's Pastoral Code of Conduct (and sign the Receipt Acknowledgement Form),
    - the Norms for the Prohibition of Sexual Misconduct (and sign the Receipt Acknowledgement Form),
    - the Code for the Pastoral Use of Technology and Social Media (and sign the Receipt Acknowledgement Form),
    - the Mandated Reporter Form, as an Employee or Volunteer, as applicable (and sign the form), and
    - these Guidelines for Youth and Those Working with Youth (and sign the Receipt Acknowledgement Form).

All of these resources are available on the Diocese website at <a href="http://www.rockforddiocese.org/documents">http://www.rockforddiocese.org/documents</a>. Obtain passwords for these documents at the parish. The VIRTUS safe environment training is here: <a href="http://www.rockforddiocese.org/protectinggodschildren">http://www.rockforddiocese.org/protectinggodschildren</a>.

- 2. Minors who are 16 years of age or older employed by the parish or school or volunteering with children for the parish or school are required to:
  - a. complete the online safe environment training, VIRTUS: Protecting God's
     Children for Adults unless the minor's parent notifies the parish/school/diocesan
     entity in writing that the parent wants to opt out his or her child from this
     requirement (email notification is acceptable); and
  - b. read and agree to abide by:
    - the Diocese's Pastoral Code of Conduct (and sign the Receipt Acknowledgement Form).
    - the Norms for the Prohibition of Sexual Misconduct (and sign the Receipt Acknowledgement Form),
    - the Code for the Pastoral Use of Technology and Social Media(and sign the Receipt Acknowledgement Form), and
    - these Guidelines for Youth and Those Working with Youth (and sign the Receipt Acknowledgement Form).

Minors who are younger than 16 years of age are not subject to the requirements of this paragraph 2.

#### B. Procedures and Forms for Parents/Guardians and Adult Leaders

- 1. Permission Slip forms are required for all off-site and overnight, on-campus activities no exceptions. A parent/legal guardian is required to sign a permission slip that specifically identifies the particular off-site activity or activities. Where an activity in which minors participate begins at the parish and then proceeds to another off-site location, the permission slip is required to state that. Where such activity is not sponsored by the parish, such as a group of minors who participate in the parish youth ministry group decide to attend a movie together, a permission slip is not required, because the parish is not assuming responsibility for the minors. However, in that example, if the Youth Minister is also attending the movie, the activity could be construed as parish-sponsored and therefore, a completed permission slip is required.
- **2.** A Student or Youth Emergency Information form is to be completed and submitted for every youth participating in an activity.
- **3.** Permission Slip forms and Student or Youth Emergency Information forms are to remain with the Supervising Adult throughout the activity. If the Supervising Adult is not present at the activity, the forms are to remain with an Adult Leader. The Permission Slip form and Student or Youth Emergency Information form are attached at the end of this Policy.
- **4.** If an activity includes mission work or performing manual labor, minors may not operate machinery of any kind or power tools or be on scaffolding, and the Permission Slip should include a description of any known risk.
- **5.** Passenger vans that have anywhere from 10 to 15 seats are not covered by Diocesan insurance. They are not to be used to transport individuals.

- **6.** Drivers who are transporting minors or adults as part of an activity are required to complete the Driver Information Sheet, regardless of whether the driver is a Diocesan employee or volunteer. All drivers must be a minimum 21 years of age or older and provide proof of a valid automobile insurance card and a valid driver's license. The Driver Information form is attached at the end of this Policy. An adult may use his or her own vehicle to transport individuals, but not if the vehicle is a passenger van that has anywhere from 10 to 15 seats.
- 7. When transporting individuals in a vehicle, two adults should be in the front seat and all minors shall be seated behind them. If the group in the vehicle is comprised of only one chaperone, the chaperone is to sit in the front seat of the vehicle, and all minors are to sit behind the chaperone in the back seats. A vehicle shall not be comprised of only one adult and one minor. There shall be no more than two adults sitting in the front seat of a vehicle, and no minor shall sit in the front seat. All individuals in a vehicle are required to wear his or her own seat belt at all times that the vehicle is being operated. The number of individuals in a vehicle may not exceed the number of seat belts in the vehicle.
- **8.** An Incident Report shall be completed by an Adult Leader for each injury sustained by an adult or youth, and for any or other incident that occurs. That form is attached at the end of this Policy. If the person sustaining the injury is an employee of the Diocese, Parish, School, or other Diocesan entity, an *Illinois Form 45: Employer's First Report of Injury form* shall be completed by the Adult Leader. The Form 45 is here: <a href="http://www.rockforddiocese.org/documents">http://www.rockforddiocese.org/documents</a>, under the Section entitled Property Insurance.

# C. Chaperone/Minor Ratio

- 1. Each activity must have at least one (1) adult chaperone for every ten or fewer minors; two chaperones for every 11-20 minors; three chaperones for every 21-30 minors; and so on.
- 2. Youth who are age 18 to 20 years may attend youth activities but may not be considered an adult chaperone in the Chaperone/Minor ratio.

### D. Overnight Accommodations

- 1. Sleeping rooms shall have doors to the room; rooms should be located in groups, where possible. Connecting doors (doors which connect one sleeping room with another) shall be locked at all times.
- 2. Request that the hotels/motels restrict the use of the in-room televisions and in-room phones, including blocking inappropriate cable channels. Rooms are to be programmed by the hotel/motel so that no extra television (such as HBO, Showtime, adult channels) or long distance fees can be charged to the room.
- 3. Chaperones and youth shall have separate sleeping rooms when using hotels, motels, inns, youth hostels, retreat centers, and other facilities set up for sleeping. No Exceptions. If large spaces are used (such as gymnasiums), adult and youth spaces shall be separate.
- 4. Except in situations involving members of a family, minors are to room with other minors of the same gender. Youth who are age 18 to 20 years are required to room with other youth who are age 18 to 20 years and who are of the same gender.
- 5. Adult Leaders are to consider limiting the use by minors of cell phones and other electronic devices.

#### E. Medications

- 1. All prescription and non-prescription medication brought to an activity by a minor or minor's parent/guardian shall be in its original container.
- 2. A minor is permitted to self-carry an epinephrine pen as well as an asthma inhaler, and may administer it to him- or herself without having to present a permission slip or prescription.
- 3. An adult trained in the administration of an epi-pen injection ("Trained Adult") may carry on his or her person an epi-pen for emergency use, and that Trained Adult may administer an epi-pen injection to any minor or adult whom that Trained Adult in good faith believes is having an anaphylactic reaction.
- 4. Dispensing of prescription medication or non-prescription medicine (such as Tylenol) to a minor is prohibited, unless the parent completes and submits the Permission Slip attached at the end of this Policy
- 5. Medications (other than an epi-pen injector and asthma inhaler) brought to an activity by a minor or the minor's parent/guardian shall be left in the care of an Adult Leader. However, when the minor must have immediate access to a medication due to the nature of the minor's medical condition, the parent shall inform the Adult Leader of this fact, in which case the medication (other than an epi-pen injector and asthma inhaler) must be stored in a location where it may not be accessed by individuals other than the involved minor and Adult Leaders.
- 6. Prescription medications shall be administered and taken only in keeping with the minor's physician's orders. Over-the-counter medications shall be administered and taken only in keeping with the instructions provided by the manufacturer of the medication.
- 7. In the case of a medical emergency, an adult employee, adult volunteer, or adult chaperone shall call 911, and is permitted to provide first aid to the injured individual while awaiting the arrival of medical professionals.

#### F. General Guidelines for Chaperones of Youth Activities

- 1. All youth activities shall be chaperoned by adults 21 years of age or older. There must be at least one (1) adult chaperone for every ten or fewer minors. For each additional one to nine minors, an additional adult shall be required as a chaperone. Consideration is to be given to gender. The proportion of male and female chaperones should reflect the same proportion of male and female minors participating. Adults are to wear name badges designating "chaperone" or "volunteer" or job title such as "youth minister", as the case may be.
- 2. When chaperoning activities within secured facilities, adults should designate places and times where youth participants can locate group Adult Leaders throughout the day.
- 3. Chaperones are expected to maintain the separation of genders in youth sleeping rooms at all times. Chaperones should check sleeping rooms periodically after curfew. If a chaperone must enter youth sleeping rooms, a second chaperone must be present if the activity has a second chaperone. Chaperones shall be the same gender as the youth in the room being checked.
- 4. The sleeping room is to be occupied by minors of the same gender. When only queen- and full-sized beds are available to the group, two minors of the same gender may sleep in one bed.

- 5. Each chaperone shall have a cell phone, and have the group's leader's cell phone number readily available. Chaperones should be familiar with and strive to achieve the objectives and guidelines of the activity.
- 6. Chaperones shall uphold the authority of those responsible for the program or activity and assist them in any way to promote learning and full participation.
- 7. Chaperones shall be aware of and adhere to emergency plans and evacuation routes at the facilities being used.
- 8. Chaperones are responsible and/or accountable for stewardship of all resources entrusted to their care.
- 9. A Chaperone is to avoid situations where the chaperone is alone with a minor or minors, always following the two adult rule. Physical contact with youth can be misconstrued and should occur (a) only when completely nonsexual and otherwise appropriate; and (b) never in private.
- 10. Use a team approach (two or more adults) to managing emergency situations. Our children are the most important gifts God has entrusted to us. Chaperones are to:
  - Treat everyone with respect, loyalty, patience, integrity, courtesy, dignity, and consideration:
  - Use positive reinforcement rather than criticism, competition, or comparison when working with children and/or youth;
  - Not solicit gifts from children and/or youth or their parents;
  - Refrain from giving gifts to children and/or youth without prior written approval from the parents or guardian;
  - Immediately report suspected sexual abuse of a minor to the Supervising Adult and/or appropriate Adult Leader, and the Diocese of Rockford hotline phone number (815-293-7540), and to the Illinois Department of Children and Family Services hotline phone number (1-800-25ABUSE).
- 11. Chaperones are to avoid any form of excessive familiarity, inappropriate language, or any situation and conduct that exploits or could give the appearance of exploiting another.
- 12. Chaperones are prohibited from using illegal drugs, tobacco and/or alcohol at any time during an activity he or she is chaperoning. Additionally, chaperones shall not purchase or distribute illegal drugs, tobacco products or alcohol to minors.
- 13. Chaperones shall avoid situations that would humiliate, ridicule, threaten, demean or degrade minors or other adults in the group.
- 14. Chaperones shall follow practice that consistently exhibits no tolerance for any form of abusive behavior.
- 15. Chaperones shall avoid posing any known health risk to minors (i.e. no fevers or other contagious situation).

### G. General Guidelines for Youth participants

#### 1. Youth participants will:

- Project an image of Christian consideration, sensitivity, and respect to everyone and everything
- Use Christian consideration, sensitivity, and respect when using electronic devises
- Follow Adult Leaders' rules related to electronic devises
- Project an image of Christian etiquette in their use of language, dress, and behavior
- Refrain from inappropriate touching and verbal harassment
- Respect other persons and/or property, and keep their personal belongings of value with them at all times
- Refrain from actions that could result in injury and/or damage to property
- Adhere to stated curfew
- Wear appropriate credentials in order to gain and maintain access to youth activities
- Maintain courteous and appropriate noise levels in lobbies, hallways, and sleeping areas, especially later in the evenings
- Maintain the spirit of the activity
- Report problems of any kind to a trusted adult

#### 2. Youth participants will not:

- Possess weapons or explosive materials of any kind
- Purchase, possess, smoke or use tobacco products of any kind
- Purchase, possess, consume, or distribute alcohol or illegal drugs
- Engage in any form of sexual activity or sexual harassment
- Purchase, download, possess, distribute or view pornography
- Visit or gather in hotel rooms with the opposite gender
- Engage in any form of body piercing or tattooing
- 3. Youth participants are to be aware of what are and are not appropriate behaviors in terms of relationships between adults and youth, and with their peers.
  - a. The following are generally considered **appropriate behaviors** at youth activities:
    - Side hugs
    - Shoulder to shoulder or "temple" hugs
    - Handshakes
    - "High-fives," hand slapping, and fist bumps
    - Verbal praise for a job well-done (not regarding physical attributes)
    - Touching hands, faces (usually in context of a blessing), shoulders, and arms of minors
    - Arms around shoulders
    - Holding hands while walking with younger minors
    - Sitting beside younger minors
    - Holding hands during prayer
    - Pats on the head when culturally appropriate

- b. The following are generally considered **inappropriate behaviors** at youth activities:
  - Inappropriate or lengthy embraces and kisses on the mouth
  - Touching private areas of the body
  - Going to an isolated area away from the group, or being taken to an isolated area by an adult or peer
  - Showing affection in isolated areas of a facility such as bedrooms, restrooms, bathrooms, closets, staff-only areas, other private rooms, or without others present
  - Holding children on the lap who are capable of sitting on their own
  - Wrestling or tickling with another individual
  - Piggyback rides
  - Any type of massage given by minor or adult to another minor or adult
  - Any form of unwanted affection or peer sexual harassment
  - Compliments or put downs that relate to physique or body development
- 4. The following personal safety measures should also be remembered and followed:
  - Always carry photographic identification with you (driver's license, school ID) if you have one.
  - Always travel in a group, with chaperones knowing every youth's location at all times.
  - Always look for and use designated crosswalks and pedestrian bridges.
  - Sleeping room doors should to be locked at all times. Youth shall not open doors unless they can verify who is knocking and what the person's credentials are.
  - Sleeping room numbers and telephone numbers should not be given to strangers or distributed publicly.
  - Review fire safety procedures and know where emergency exits are in all facilities being used.
  - Do not make jokes or threats about weapons, bombs, terrorists, or other dangerous
  - Report all safety or security concerns or rumors to your Diocesan or parish/school Adult Leader.

Effective September 17, 2015 Revised January 1, 2016 Revised October 7, 2016

# GUIDELINES FOR YOUTH AND THOSE WORKING WITH YOUTH RECEIPT ACKNOWLEDGMENT

l,	_, acknowledge that I have received the
(Name)	hose Working with Youth. I agree that I have read
Signature:	Date:
Printed Name:	
Parish/School/Diocesan Entity:	
City:	
Witness:	

Return this form to the Parish/School/Diocesan entity you identified on this form.

# **PERMISSION SLIP**

Consent: I grant my permission for my child
to attend and participate in
(hereinafter referred to as "Activity") to be held at
on [LOCATION]
[INCLUSIVE DATE OR DATES]
2. Student Cooperation: My child agrees to abide by all the rules of aforementioned Activity and to obey the staff in charge of this Activity. The Parish, School, and Diocese will not be liable for my child's failure to cooperate and/or to abide by the rules. Any infraction of the rules may result in the immediate dismissal of my child from the Activity at my expense and without refund to me of the costs paid for the Activity.
3. First-Aid/Emergency Treatment: I authorize the School, Parish, and Diocese and its employees and volunteers to administer first-aid to my child if deemed necessary and appropriate to preserve the life, limb or well-being of my child. I authorize the Parish, School, and Diocese to contact and engage medical personnel and arrange for emergency treatment of my child, including transportation for medical, dental, surgical or hospital care or diagnosis, and I consent to that treatment for my child. I agree that I am financially responsible for such medical treatment.
4. Administration of Medication provided by parent/guardian of child: If my child needs to take prescription or non-prescription medication during this Activity, I have provided the medication in its original container. I give permission to an adult employee or adult volunteer to administer the medication or assist in the administration of the medication to my child in the dosage prescribed by the prescription or, for non-prescription medication, the dosage recommended on the container by the manufacturer. If there are explicit instructions for this medication, I state them here:
5. Release: I hereby release and discharge The Diocese of Rockford and its Bishop, and the Parish and School, and the officers, directors, employees, and volunteers of same, from all claims for personal injuries or property damage that I or my child may suffer while my child is attending and/or participating in the Activity, unless the injuries or damage resulted from willful misconduct of the Diocese, the Parish, the School or its employees. If I have provided medication for my child to take during this Activity, I hereby release and discharge The Diocese of Rockford and its Bishop, and the Parish and School, and the officers, directors, employees, and volunteers of same, from all claims for personal injuries or property damage that I or my child may suffer as a result of the administration of or lack of administration of or assistance in or lack of assistance in the administration of said medication to my child, whether by my child and/or an adult employee and/or an adult volunteer; unless the injuries or damage resulted from willful misconduct of the Diocese, the Parish, the School or its employees.  Date:
Name: [PLEASE PRINT]
[· EE/OE / (1111)]

#### PERMISSION SLIP FOR MULTIPLE ACTIVITIES

1.	Consent: I grant my permission for my child	to attend and
partici	pate in the activities identified on page 2 of this Permission Slip (these even	ents are referred
to in th	nis Permission Slip as "Activities").	

- 2. Student Cooperation: My child agrees to abide by all the rules of these Activities and to obey the staff in charge of these Activities. The Parish, School, and Diocese will not be liable for my child's failure to cooperate and/or to abide by the rules. Any infraction of the rules may result in the immediate dismissal of my child from the Activity or Activities at my expense and without refund to me of the costs paid for the Activity or Activities.
- 3. First-Aid/Emergency Treatment: I authorize the School, Parish, and Diocese and its employees and volunteers to administer first-aid to my child if deemed necessary and appropriate to preserve the life, limb or well-being of my child. I authorize the Parish, School, and Diocese to contact and engage medical personnel and arrange for emergency treatment of my child, including transportation for medical, dental, surgical or hospital care or diagnosis, and I consent to that treatment for my child. I agree that I am financially responsible for such medical treatment.
- 4. Administration of Medication provided by parent/guardian of child: If my child needs to take prescription or non-prescription medication at any of these Activities, I will provide the medication in its original container. I give permission to an adult employee or adult volunteer to administer that medication or assist in the administration of that medication to my child in the dosage prescribed by the prescription or, for non-prescription medication, the dosage recommended on the container by the manufacturer. If there are explicit instructions for this medication, I will provide same in writing.
- 5. Release: I hereby release and discharge The Diocese of Rockford and its Bishop, and the Parish and School, and the officers, directors, employees, and volunteers of same, from all claims for personal injuries or property damage that I or my child may suffer while my child is attending and/or participating in any of the Activities identified on page 2 of this Permission Slip, unless the injuries or damage resulted from willful misconduct of the Diocese, the Parish, the School or its employees. If I provide medication for my child to take during any of these Activities, I hereby release and discharge The Diocese of Rockford and its Bishop, and the Parish and School, and the officers, directors, employees, and volunteers of same, from all claims for personal injuries or property damage that I or my child may suffer as a result of the administration of or lack of administration of or assistance in or lack of assistance in the administration of said medication to my child, whether by my child and/or an adult employee and/or an adult volunteer; unless the injuries or damage resulted from willful misconduct of the Diocese, the Parish, the School or its employees.

6. l	In the event I later decide to not allow my child to attend an Activity identified on Pag	e 2
of this F	Permission Slip, I understand I am required to notify the parish/school/Diocesan entity	y in
writing t	to the following email address:	

Check all that	apply:	
	ermission Slip applies to all home and awa [sport] team in the ons are specifically identified here:	[school year] season. Those dates and
This P	ermission Slip applies to all Activities that a	are identified below.
Date of Activity	Name of Activity	Location of Activity
Date:		
Parent/Guard	ian's Signature:	
Name <sup>.</sup>		

[PLEASE PRINT]

# STUDENT OR YOUTH EMERGENCY INFORMATION

PARISH/SCHOOL/DIOCESAN	ENTITY:		(	CITY:
FAMILY NAME				
Only ONE EMERGENCY INFO	RMATION form per family	unit is necessary	, <u>-</u>	
Full Name of Child	Sex	Date of Birth		ondition (describe) or ribed or Dietary needs, etc.
Home Address:			Phone:	
Name of Mother/Guardian:		Place of Emp	loyment:	
Mother's work number:	(	Cell Number:		
Name of Father/Guardian:		_ Place of Empl	oyment:	
Father's work number:	c	Cell Number:		
If divorced, name of legal custoo	dial parent:			
Do Mother and Father have Joir	nt Custody? (Y/N)			
If custodial parent cannot be rea	iched, may we contact nor	n-custodial paren	t? (Y/N	N)
RESPONSIBLE ADULT(s) who	have agreed to assume re	sponsibility for cl	hild, if parent/guardian	cannot be reached.
Name	Address		Phone	Relationship to Child
Physician of Choice:				
Address:Phone:				
Hospital of Choice:				
Address:Phone:				
			ot be reached in an em	ergency and immediate medical
and/or hospital attention is indic				
Date:				
Signature:				
Print name:				
			Effortive Cor	otombor 17, 2015; Poviousd January 1, 2016

#### **DRIVER INFORMATION**

The Driver shall be at least 21 years of age, and is required to provide the Driver's valid driver's license and a valid automobile insurance card for the vehicle to be used for this Activity.

Driver	
Name:	Date of Birth:
Address:	
Vehicle that will be used	
Name of Owner:	
Address of Owner:	
Year and Make:	License Plate:
If more than one vehicle is to be used,	the above information must be provided for each vehicle
Certification:	
understand that as a volunteer driver, license, and have the required insuran youth. I certify I hold a valid driver's license.	nis form is true and correct to the best of my knowledge. I I must be 21 years of age or older, hold a valid driver's ce coverage in effect on any vehicle used to transport ense which is not revoked or suspended. I certify I am this Activity, or have the permission of the owner of the ity.
Signature	
Date	

# FOR PARISH/SCHOOL/DIOCESE USE

Photocopy the Driver's valid driver's license, and valid automobile insurance card for the car being used in this Activity, and attach those copies to this Driver Information form. Verify that the liability limits on the Driver's automobile insurance card are \$100,000/\$300,000.

# DIOCESE OF ROCKFORD INCIDENT REPORT

Names, addresses and phone numbers of individuals involved:
Date, time and location of incident:
Description of incident in as much detail as possible:
Description of incident in as much detail as possible.
Names, addresses and phone numbers of witnesses:
State what action(s) were taken as a result of the incident:
Name of Person making this Report:
Signature of Person Making this Report:
Date: