# Taking care of the children



s Christians, we should have a special understanding of the value of each person as a child of God, a life worth saving. In recent years, many modern societies have finally come to see the value of an individual life. "Safety First" has become a mantra of our culture. Yet, all too often we overlook or postpone what we can do to safeguard ourselves, our families, our churches, our communities, and especially those who cannot protect themselves. This section will touch on many areas of concern, but it is impossible in this setting to cover all of them adequately. Consider this simply an introduction. Much further study, planning and action is required on part of all club staff members!

**Basic documentation** 

Each child (or parent of the child) should complete a *Health Record Form* at registration. The information on this form should be updated every year. Many clubs include this information as part of the *Registration Form*. In addition the parent should sign a *Permission Slip* for any event or activity that takes the child away from the normal meeting location. This form should include new or temporary health information that was not included on the *Health Record*. A sample, combined *Registration and Health Record Form* is included here for your reference.

# **Protecting Children from Child Abuse**

hild abuse is a major problem in all of society. Over 1.5 million cases of child abuse reported annually in the USA and 5,000 children die each year in the USA as a result of abuse, often by their parents. While family members are the most common offender, many are abused by a non-family member whom they know and trust.

#### **Protective documentation**

Screening of adults who work with children is an important step in protecting the children. Any adult working with the club should complete a *Volunteer Staff Service Form* which the club will submit to the local conference. NAD also highly recommends that all conferences require those working with Pathfinders (indeed any vulnerable population) to complete an online background check. Most confences have voted to REQUIRE this for all Pathfinder staff in their conference. The recommended program is *Adventist Screening Verification*. You can find more information about them at *www.nadadventist.org/asv*. Your local Conference Youth Department will explain how you access their account and complete the online training and submit your information for the background check.

Whosoever shall offend one of these little ones that believe in me, it is better for him that a millstone were hanged about his neck, and he were cast into the sea.

—Макк 9:42 KJV

The angel of the Lord encampeth round about them that fear him, and delivereth them.

—Psalm 34:7

#### Primary online resources

- adventistyouthministries.org/ safety-resources
- uat.adventistrisk.org/en-us/ safety-resources/pathfindersafety

Preteen and teenage boys are especially at risk for sexual abuse by non-family members and peers. The physical and hormonal changes caused by puberty, and their natural curiosity about their new emotions and feelings, make these youth likely targets for child molesters. The normal desire of boys this age to show their independence from their parents' control adds to the risk. This combination might keep boys this age from asking their parents for help when faced with sexual abuse.

—Boy Scouts of America

#### Children's Bill of Rights...

...outlines some specific strategies your child can use to protect himself. Share these with your Pathfinders and their parents.

"When feeling threatened, you have the right to:

- Trust your instincts or feelings.
- Expect privacy.
- Say no to unwanted touching or affection.
- Say no to an adult's inappropriate demands and requests.
- Withhold information that could jeopardize your safety.
- Refuse gifts.
- Be rude or unhelpful if the situation warrants.
- Run, scream, and make a scene.
- Physically fight off unwanted advances.
- Ask for help."

#### "Three Rs" of youth protection

- Recognize that anyone could be a child molester and be aware of putting yourself in situations that could lead to abuse.
- **Resist** advances made by child molesters to avoid being abused.
- **Report** any molestation or attempted molestation to parents or other trusted adults.

#### NAD guidelines on appropriate touch

- Always ask a child's permission before physically touching him/ her anywhere, even when responding to an injury or problem. This is especially true for any areas that would normally be covered by a T-shirt and/or shorts. If an injury is within this area, make sure another adult works with you as care is provided.
- ☐ Volunteers must not engage in inappropriate physical contact of any kind including rough physical play, physical reprimand and horseplay. This should not prevent appropriate contact in situations where it is necessary to ensure the safety and well-being of a child.
- Affirm children with appropriate touching by keeping hugs brief and "shoulder-to-shoulder" or "side-to-side." Always keep hands at (not below) the shoulder level. A caregiver's kiss should be to the forehead or cheek only not elsewhere. For small children who like to sit on laps, encourage them to sit next to you.

#### NAD guidelines on appropriate discipline

- Any discipline administered shall occur within the visual contact of another adult. Any form of physical punishment of children is not permissible under any circumstances.
- ☐ Verbal abuse of children or telling jokes of a sexual nature in the presence of children is unacceptable.

#### NAD guidelines on respect for children

- Children's need for privacy should be respected at all times. Particular care regarding privacy must be taken when young people are in locations such as changing areas, swimming pools, showers and rest rooms.
- Photographs of children or young people must never be taken while they are in changing areas, for example, in a locker room or bathing facility.
- ☐ Tasks of a personal nature should not be carried out for children or young people if they can undertake these tasks themselves. For example, helping with toileting, washing or changing clothing.

#### Physical abuse

Physical abuse involves physical injury to the child in some manner that was not accidental. Examples are multiple fractures in the long bones, skull fractures, soft tissue injuries and bruises, and subdural hematoma.

#### What to look For

- Cuts, bruises, welts, or swelling
- Burns—cigarette burns or "donut-shaped" burns from immersion in scalding liquids; burns with a pattern such as from an iron
- Fractures
- Scars with a peculiar pattern looped or rounded
- Bite marks
- Physically abused children will often have successive injuries

#### **Behavioral characteristics**

- Sleep difficulties
- Thumb sucking and nail biting
- Fearfulness
- Listlessness and apathy
- · Aggression and violence or withdrawal

#### Sexual abuse

Sexual abuse includes everything from indecent exposure to sexual assault and rape.

#### What to look for

- Torn or stained underclothing
- Difficulty with bowel or bladder control
- Soreness, bleeding or discharges from a non-menstruating girl
- Trauma to breasts, buttock, lower abdomen, thighs, genitals or rectal
- Evidences of self-mutilation (cuts, sores, cigarette burns)

#### **Behavioral characteristics**

- Regressive behavior such as thumb sucking or bed wetting
- Refusal to undress under normal circumstances (getting ready for bed)
- Avoiding physical contact
- Poor personal hygiene
- Obsessively good behavior
- Frequent unprovoked anger, such as mutilation of toys
- Panicking or flinching when being touched, like when being tucked in
- Continually falling asleep during the day
- Seductive behavior
- Fire setting
- Cruelty to smaller children and animals
- Obsession with punctuality
- Frequent sore throats, difficulty swallowing or choking
- Sudden weight gain or extreme weight loss

#### How to respond to a child's report of abuse

- Remain calm or the child may decide not to disclose information in order to spare your feelings
- Allow the child to talk without applying pressure
- Assure the child that reporting the abuse was the right thing to do
- Believe the child—neither the abuse not the aftermath is their fault
- Tell the child you will try to help the offender
- Do not, under any circumstances, attempt to verify the child's story or to disprove it
- Don't investigate the matter, confront the perpetrator, or try to determine guilt
- Report the abuse to Child Protective Services
- For the child's sake, do not discuss the matter with anyone but the
- If it is confirmed that the abuse has occurred, don't hesitate to prosecute the perpetrator
- Don't explain or excuse the abuser's behavior to the child
- Help the parents of an abused child find a trusted confidant

#### Abuse prevention discussion

Most discussion of abuse focuses on screening and post incident prosecution and recovery. As a Youth leader (and as a parent for most of you) prevention is more important! One way to help prevent abuse is to hold a meeting at the very beginning of the Pathfinder year where a parent is required to attend with each Pathfinder. We request that both parents come, but only one is required. All staff are required to attend. Then we share our policy on appropriate touch, verbal abuse, and our reporting policy. It includes the following points, plus many others:

- Appropriate affection is required for human happiness.
- Appropriate touch is on arms and shoulders, and platonic hugs. Anywhere covered by a swimsuit is absolutely out of bounds.
- No means No. Stop means Stop.
- Any concern of inappropriate contact should be taken immediately to staff member and to parents. Introduce a specific staff member who is the primary contact on these issues, and a "back up" person should the primary contact be the problem.
- Depending on the nature of the contact, law enforcement will be contacted.
- Review the *Children's Bill of* Rights and the Three R's.
- Discussion of dating policy within the club.

This open and frank discussion, with all parties present, sets the tone for what happens through the coming year. Transparency and responsibility is important to us all. The list to the right was prepared by Phil Singh, an Adventist child protection professional in Virginia. It provides some yellow flags for which to watch staff volunteers. If lots of boxes are checked then perhaps another ministry might be a better place for the person to volunteer.

#### A prayer

Lord, make me a channel of thy peace

That where there is hatred I may bring love,

That where there is wrong I may bring the spirit of forgiveness,

That where there is discord I may bring harmony,

That where there is error I may bring truth,

That where there is doubt I may bring faith,

That where there is despair I may bring hope,

That where there are shadows I may bring thy light,

That where there is sadness I may bring joy.

Lord, grant that I may seek rather To comfort—than to be comforted; To understand—than to be understood;

To love—than to be loved;
For it is by giving that one receives;
It is by self-forgetting that one finds;
It is by forgiving that one is
forgiven;

It is by dying that one awakens to eternal life.

—St. Francis of Assisi

## **Spotting a predator**

Child sexual abuse oriented offenders tend to: ☐ Be shy, overly "sensitive", unassertive, moralistic and inadequate. ☐ Feel awkward, insecure, and resentful. ☐ Have difficulties with relationships, both social and sometimes sexual. ☐ Often do things without thinking about the consequences. ☐ Show a strong need for approval and recognition from others. ☐ May be emotionally and socially immature. ☐ Can be very "self-serving", doing things mostly for themselves. ☐ Feel it is acceptable to only get close to children. ☐ Often have poor social skills and become isolated from their peers. ☐ Can be extremely distrustful of others. ☐ Are usually unable to appropriately show their feelings. ☐ Often feel a strong sense of hopelessness. ☐ View the control of their life as being outside themselves. ☐ Sometimes view themselves as the victim to avoid responsibility for their behavior. ☐ Have a low opinion of themselves. ☐ Have learned some of these characteristics through modeling adults in their life at an early age. ☐ Find younger children attractive because of their innocence and vulnerability. ☐ Can be sexually aroused by younger children. ☐ Find relationships with children emotionally and socially safer than relationships with peers. ☐ View children's attention and affection as unconditional and therefore desirable. ☐ Talk themselves out of how serious the abuse is by repeating offenses and rationalizations. ☐ Sometimes make their attraction and feelings stronger toward children through child pornography and even child oriented advertisements or television. Repeat their offenses often with respect to their primary victim of choice. ☐ Sometimes use alcohol to make it easier to commit offenses. ☐ Use denial, minimization, rationalization, and manipulation as ways to avoid detection, guilt feelings, and conflicts. ☐ Inaccurately view child sexual abuse as less destructive to the victim because it usually involves manipulation rather than overt violence. ☐ Demonstrate direct and indirect abuses of power both in offending and in other situations. ☐ View the reluctance of the legal system to prosecute sexual abuse cases as a message that the abuse may not be all that serious. ☐ Sometimes encourage their family to treat children in a manner that suits the needs of the adults. ☐ Are always capable of re-offending under certain conditions of stress or having unmet emotional needs. ☐ Present a higher risk of re-offending if they have exclusively targeted male victims, have a history of prior sex offenses, and who are younger

at the time of their first offense than most sex offenders.

# Risk management

he Conference Youth Department has specific guidelines on Risk Management that are often connected to their insurance carrier. However, there are some standard things that you should be aware of and consider when leading or serving with a Pathfinder club.

- Be familiar with what your church's insurance covers and what it does not cover. If it does not cover a specific activity, you may be able to pay for a "rider" or extra policy that covers the event. This might include high risk activities such as boating, rock climbing etc.
- In the USA, the sharing of medical information is protected by the Health Insurance Portability and Accountability Act (HIPAA). It's most commonly known for protecting the privacy of medical records.
- Be aware of child labor laws which may restrict the usage of certain equipment like saws and knives with age restrictions.
- Your church should conduct a yearly risk management survey of its property, including any space where the Pathfinders meet. (See adventistrisk.org/prevention-resources/safety-officer-central/ evaluation)
- Any vehicles used to transport Pathfinders must be properly licensed and insured. The same is true for drivers.
- Adequate adult supervision of Pathfinders at all times is required.
- Any and all club equipment should be kept in good working order and be visually inspected before each usage.
- Every club activity, especially field trips and outings, should be analyzed for possible risk issues.
- All club meetings and trips should be approved by the local church board before they take place.
- All staff should be background checked according to Conference
- All staff should be given training for the role they will play in the club leadership. Clear instruction should be given concerning but not limited to: supervision standards and duties, safety guidelines, prohibited activities, risk analysis, proper discipline and policies for unit level outings.
- All staff should have first aid and CPR training.
- A staff member should be given the specific job of risk management, including analysis and reduction.
- All staff working with food should have training to prevent food borne illness.
- Emergency plans (where to meet, what to do, what sorts of emergencies are possible) should be made for every meeting and outing location and distributed to staff before the event.
- Completed Registration & Health Records and Permission Slips should be secured from prying eyes, but be accessible by staff during all meetings, outings and camp outs. The forms must be with you to be of any use. All members of the club should know where the completed forms are secured.

#### Other RM issues to consider

- Hyperactive Kids
- Cold/Heat
- Sun/Rain/Snow
- Lightning
- Fire
- Weapons (Knives, Axes, Utensils)
- Water Safety
- Personal hygiene including proper hand washing
- Being located in, or passing through areas of social unrest or high crime rates
- Neighboring industries

#### **Primary online resources**

- uat.adventistrisk.org/en-us/ safety-resources/pathfinder-
- · churchmutual.com/98/Safety-Resources

#### Home emergency kit

- Three-day supply of water (1 gallon per person per day) in sealed, unbreakable containers
- Nonperishable foods and a nonelectric can opener (include pet food)
- Eating utensils
- Family first aid kit
- Battery or crank-powered radio
- Flashlight or lantern
- Extra batteries (stored separately and rotated regularly with fresh ones)
- Matches in waterproof container
- Blankets
- Extra clothing appropriate for the season
- Face masks for air filtering
- Soap, wipes, or antibacterial gel for hand sanitation
- Toilet paper
- Emergency toilet, if needed
- Health Records and Permission Slips
- Whistle to signal for help
- Local maps
- · Cash and coins

### **Medical care**

he Conference Youth Department can provide you with detailed instructions on what care you are authorized to provide to an ill or injured Pathfinder or staff member, based on state or provincial law. In general you are expected to call for professional medical assistance for any major injury. You should contact parents also, and also in case of illness. Consulting the child's *Health Record* should provide you with all the information you need to start the process.

It is recommended that all staff hold a valid recognized First Aid and CPR certification. They should also have access to a stocked first aid kit.

Refer to the *Health Record* before providing any medication. Some jurisdictions prohibit medication by anyone other than a trained medical professional or a parent.

There are three fairly common major medical issues that arise with alarming frequency with Pathfinders. Those are Allergic Reactions, Asthma, and Diabetes. Basic information on these issues is provided here, but we highly recommend you receive training from a qualified local trainer.

#### Allergic reactions\*

Obviously the first line of defense is to keep them from eating a food they are allergic too, but it is more difficult to protect them from bee stings or from touching a plant to which they may be allergic. If you have Pathfinders who have noted on their *Health Record* that severe allergic reactions are possible, then all staff should be made aware of this so they can be on the watch for this medical emergency. This is especially true for your food service staff.

The key to treating a life-threatening allergic reaction (anaphylaxis) is to take immediate action. To do this you must learn to recognize the symptoms. Signs can vary from person to person, even from time to time, but they typically start within a few seconds and get progressively worse.

#### **Symptoms**

- Cough, difficulty or irregular breathing, wheezing, itchy throat or mouth, and difficulty swallowing.
- Nausea, vomiting, abdominal pain, and diarrhea.
- Itchiness, red bumps or welts on the skin (hives), and skin redness.
- Dizziness, light-headedness, heart palpitations, chest discomfort or tightness, mental confusion, weakness, lower blood pressure, rapid pulse, loss of consciousness, and fainting.

Many of these symptoms are caused by multiple common aliments. However, if any of these symptoms become severe, such as loss of consciousness or difficulty breathing, or if different parts or systems of the body are involved, such as having the combination of hives and vomiting, an allergic reaction should be considered as a possible cause.

#### **Treatment**

- In Bermuda, Canada and the USA, Call 911 immediately.
- Administer epinephrine (epi-pen) if available.
- Keep the patient calm.
- Avoid giving any oral allergy medicine and any liquids if the person is having trouble breathing.

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- If the allergic reaction is from a bee sting, scrape the stinger off with a credit card or fingernail. Do not use tweezers, which will release more venom into the sting site.
- To help prevent shock, have the person lie flat with his or her feet elevated about 12 inches and cover him or her with a blanket or jacket. Do not put the person in this position if it causes discomfort or if a neck, back, or leg injury is suspected.
- Do not put a pillow under the person's head if he or she is having trouble breathing.
- Get them to the ER even if you have administered an Epi-pen.

#### Asthma attack\*

If you have Pathfinders who have noted on their *Health Record* that they have asthma, then all staff should be made aware of this so they can be on the watch for this medical emergency. Their unit counselor or other staff should check regularly to confirm that they are carrying a charged inhaler with them. This is especially true on hikes, camp outs and other outdoor activities.

#### **Symptoms**

• Difficulty talking or walking because of shortness of breath, or lips or fingernails turning blue.

#### **Treatment**

- In Bermuda, Canada and the USA, call 911.
- Follow the person's Asthma Plan. This written plan from their doctor gives directions for giving asthma medication and seeking medical help for acute asthma attack.
- Sit the person upright comfortably and loosen tight clothing.
- If the person has asthma medication, such as an inhaler, assist in using it.
- Do not mistake drowsiness as a sign of improvement; it could mean asthma is worsening.
- Do not assume the person's asthma is improving if you no longer hear wheezing.

#### **Typical inhaler instructions**

- **1.** Remove cap and shake inhaler well.
- **2.** Insert inhaler into spacer. See *Plan B* in the sidebar if no spacer is available.
- 3. Have the person breathe out completely and put mouth tightly around spacer mouthpiece.
- **4.** Press inhaler once to deliver a puff.
- **5.** Have the person breathe in slowly through the mouth and then hold breath for 10 seconds.
- **6.** Give a total of four puffs, waiting about a minute between each puff.
- **7.** After four puffs, wait four minutes. If the person still has trouble breathing, give another set of four puffs.
- **8.** If there's still little or no improvement, give four puffs every four minutes until ambulance arrives. If the person is having a severe attack, give up to six to eight puffs every five minutes.
- **9.** Monitor the person until help arrives.

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#### Personal first aid kit

- Adhesive bandages (6)
- Sterile gauze pads, 3"x3" (2)
- Adhesive tape (1 small roll)
- Moleskin, 3"x6" (1)
- Soap (1 small bar) or alcoholbased hand sanitizing gel (1 travel size bottle)
- Triple antibiotic ointment (1 small tube)
- Scissors (1 pair)
- Nonlatex disposable gloves (1 pair)
- CPR breathing barrier (1)
- · Pencil and paper

#### Plan B - No spacer

- **B1.** Have the person breathe out all the way and seal lips tightly around inhaler mouthpiece.
- **B2.** As the person starts to breathe in slowly, press down on inhaler one time.
- **B3.** The person should keep breathing in as slowly and deeply as possible (about five to seven seconds) and then hold breath for 10 seconds.
- **B4.** Give a total of four puffs, waiting about one minute between each puff.
- **B5.** Continue using inhaler if breathing is still a problem
- **B6.** Continue with step 7.

#### Club first aid kit

Quantity is for 10-15 members. Adjust quantities according to your membership.

- Copies of current Health Record forms for all current Pathfinders and staff.
- Copies of current *Permission Slips* for all current Pathfinders for the specific outing.
- Roller bandage, 2" (1)
- Roller bandage, 1" (2)
- Adhesive tape, 1" (1 roll)
- Alcohol swabs (24)
- Assorted adhesive bandages (1 box)
- Elastic bandages, 3" wide (2)
- Sterile gauze pads, 3"x3" (12)
- Moleskin, 3"x6" (4)
- Gel pads for blisters and burns (2 packets)
- Triple antibiotic ointment (1 tube)
- Triangular bandages (4)
- Soap (1 small bar) or alcoholbased hand sanitizing gel (1 travel size bottle)
- Scissors (1 pair)
- Tweezers (1 pair)
- Safety pins (12)
- Nonlatex disposable gloves (6 pairs)
- Protective goggles/safety glasses (1 pair)
- CPR breathing barrier (1)
- · Pencil and paper

Optional (consider local restrictions)

- AED
- EpiPen
- Common OTC meds
- Inhaler

#### Diabetes\*

The most common problem diabetics experience is low blood sugar. Diabetes medications are powerful but can be imprecise especially if children are self medicating.

If you have Pathfinders who have noted on their Health Record that they have Diabetes, then all staff should be made aware of this so they can be on the watch for this medical emergency. Their counselor or other staff should check regularly to see that they are OK. This is especially true on hikes, camp outs and other outdoor activities. Staff should always carry snacks in case the child forgets to carry some.

#### **Symptoms**

- Appear disoriented, confused, or drunk
- Unusual sweating
- Stumbling, loss of bearings
- Aggressive, even "feisty," sometimes obscene
- Feeling weird
- Unconsciousness

#### **Treatment**

- The best treatment is prevention. Keep them on their med schedule. Make sure they eat the right amount on time, and get the appropriate exercise, on time. Make sure they have their blood glucose monitor. The more they test, the better idea they have about their sugar level.
- If monitor test results are at or below 70 mg/dl, and they haven't just eaten, eat a snack now. NOTE: People are different. This figure is "general," and they need to work with their monitor and their health care team, to determine where the "trip-wire" is for them as an individual.
- Hard candy, apple juice or pineapple juice provide fast sugar intake. Avoid sugar with fat (chocolate), as the fat will slow down the sugar absorption.
- Sometimes a person is just going down too fast for oral sugar to stop the slide. Other times they aren't discovered until they're so low it doesn't make a difference—they can't swallow—or they're unconscious. (Never force anything down the throat of an unconscious person, or one who can't freely swallow—it can be aspirated into the lungs, and can cause pneumonia or kill them.) In this case, call 911. Tell the dispatcher it is a "diabetic low."

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# Please Print: Child's Last Name

# **Registration & Health Record**

Child's full name			Phone ()
City	State		Zip
School		Grade	Child's cell phone ()
Church	Sabb	ath school class	
Yes No	Child's e-m	ail	
Is there a Master (	sly been a Pathfinder. If yes, where?		When?
Child agreement Comple	ete, date and sign.		
	finder club. I will do my best to attend club mo club functions. I agree to be guided by the rule		
Highest completed IA class	Date Ch	ild's signature _	
Parent/guardian agreeme	ent Complete, date and sign.		
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Au	thorizations Check if you agree.			
oss	infinders may carry pocket knives, hunting knives and hatchets for use in club activities. Abuse of this privilege will result in a of privilege and/or confiscation of the tools, at the discretion of the staff.  I understand the above statement and grant permission for my child to carry and use a staff approved knife, hatchet and/or ax during Pathfinder events.			
con	hinders may carry matches or lighters for use in club activities. Abuse of this privilege will result in loss of privilege and/or fiscation of the tools, at the discretion of the staff.  I understand the above statement and grant permission for my child to utilize matches or lighters on Pathfinder expeditions.			
eco he	Infinders are often photographed or videoed by club staff or other Pathfinders during club activities. These images and ordings are often use by the club for non-profit, promotional purposes related to the ministry of Church and Pathfinder club. Guidelines are established and followed to provide appropriate privacy for all members of the program I understand the above statement and grant permission for my child to be photographed and the images used according to the printed guidelines.			
Μe	edical information This information is released to staff only, on a need to know basis. A second sheet may be attached.			
	Has your child had any serious health trouble? Please list. (Examples: Asthma, Ear Aches, Tuberculosis, Constipation, Epilepsy, etc.)			
2.	Does your child currently have any serious health trouble? Please list.			
3.	Does your child have any other trouble we should be aware of? Please list. (Examples: Learning disorders, bed wetting, hydrophobia, sleep walking.)			
4.	Is the child allergic to any medications or have serious allergies? Please list the cause and reaction.			
5.	Please list any medications the child is currently taking.			
6.	Please list any special dietary considerations (food allergies etc.) we should make for the child.			
7.	Please list any restrictions on activity due to medical conditions. Please explain.			
8.	Please send us an up to date immunization history. For official use only. Date Received			
9.	Name, phone number and relationship of persons to be contacted in case of an emergency (other than parents).  Name Phone () Relation			
1O.	Name and phone number of child's primary physician.			
	Name Phone ()_			
11.	Please provide your medical insurance information.			
	Company Number Phone ()			
o tl	s health history is correct so far as I know, and the person herein described has permission to engage in all prescribed vities, except as noted by me and the physician. In the event I cannot be reached in an emergency, I hereby give permission he physician selected by the adult leader in charge to hospitalize, secure proper anesthesia, or to order injection or surgery for child. A photocopy of this shall be valid as the original. I also authorize the approvals listed at the top of this page.			

Requests and notes from parents

Parent/guardian signature

# **NAD** quidelines on supervision

ell-trained adult supervision will greatly minimize the risk of inappropriate conduct during children and youth ministries activities and events. It will also minimize the potential of false accusations being brought against an adult staff member or volunteer.

Adults supervising children and teens must be constantly vigilant for signs of inappropriate behavior by other adults. When there is a breach of the code of conduct, this should be addressed immediately by the ministry's leader to protect the minor, the adult, and the ministry.

It is important to remind adult staff members on how to properly interact with children. Take note if a staff member is over-friendly or establishes a special relationship with a child that includes direct contact outside the ministry.

Never leave a child or group of children unattended for whom you are responsible. Provide appropriate adult supervision at all times.

Parents are responsible for supervising their children before and after church sponsored children's programs and seeing that their children are picked up at the appointed dismissal time. Every reasonable effort should be made to release children to their parent or designee.

No child shall be released to another older child or permitted to go to the rest room accompanied by an older child unless the child is a sibling. Provide extra care when taking small children to the rest room. Take another adult along, or leave the door open.

Minors under 18 years of age (children and teens), should not be permitted to remain on church property unless two adults are present.

#### **Elements of effective supervision**

- ☐ Always have a minimum of two adults supervising children and youth at all times.
- Have a record of the names and numbers of all children or youth participating in the ministry event and how to best contact parents or guardians in the event of an emergency.
- ☐ Have vision panels or windows which allow easy sight into all classrooms and office areas.
- Adults must be fully engaged in the responsibility of supervision and watchfulness at all times.
- Do not allow distractions (e.g. phone or personal conversations, texting, computer or tablet use) during assigned supervisory responsibilities.
- Keep track of the whereabouts of all children and youth throughout the event facilities.
- ☐ Be especially vigilant of time spent and the number of children or youth in rest room areas.
- Make sure areas not being used in the facility are properly locked, limiting access by unauthorized individuals.
- Make sure all exterior areas are properly illuminated during nighttime activities.
- ☐ Have roving adult supervision monitoring the facility and parking lot areas during the event.
- Never be alone with a child (if possible). In the event you are the last adult left with a child, call the parent or child's guardian. If they cannot be reached, call another trusted adult to notify them of your situation, the steps you are taking to contact the parents, and ask if they could return to assist.

#### **Primary online resources**

- adventistyouthministries.org/ safety-resources/protectionsupervision
- adventistyouthministries.org/ files/safety-guidelines/youthsupervision info-sheet eng. pdf

#### **Primary online resources**

• adventistyouthministries. org/safety-resources/tripstransportation

# **NAD** quidelines on travel safety

ne of the great joys of Pathfinders is field trips and camp outs. That joy can quickly be turned to frustration and sorrow if plans are not adequately made, vehicles and drivers are not up to the task, and if emergency plans are not made and distributed.

#### **Traveling with minors**

- □ Volunteers should not travel alone with a child or young person. If only one adult is available, there should be a minimum of two children or young people present for the entire journey.
- ☐ If an emergency situation arises where it is necessary to travel alone with a child, the child's parent or guardian should be informed as soon as possible.

#### **Trips**

- ☐ All trips and any meetings conducted off the church premises must be pre-approved by the church board. All overnight activities or miscellaneous trips must have prior documented approval of the church board. All minor attendees must have a signed parental permission slip for each trip as well as an emergency medical treatment release. Parents must be notified of adults in charge of the activity.
- All trips, including day trips and overnight stays, need careful advance planning, including adequate provision for safety in regard to transport, facilities, activities and emergencies.
- ☐ Adequate liability insurance through your local Conference and Adventist Risk Management should be in place prior to any trip.
- Appropriate auto insurance should be in place prior to any trip.
- ☐ Written consent by a parent or guardian specifically for each trip and related activities must be obtained well in advance.
- ☐ A copy of the trip itinerary and contact telephone numbers for leaders should be made available to parents and guardians.
- ☐ There must be adequate, gender-appropriate, supervision for boys and girls.
- ☐ Arrangements and procedures must be put in place to ensure that rules are followed and appropriate boundaries are maintained.
- The provision of appropriate and adequate sleeping arrangements should be ensured in advance of the trip.
- ☐ Sleeping areas for boys and girls should be separate and supervised by two adults of the same gender as the group being supervised.
- ☐ If in an emergency situation, an adult considers it necessary to be in a child's sleeping areas without another adult being present he or she should immediately inform another adult in a position of responsibility.

#### **Transportation**

- ☐ When transporting children or youth, there should always be two adults in each vehicle. The driver's responsibility must be focused on the highway and traffic conditions. They cannot safely drive and provide vehicle supervision at the same time.
- ☐ The use of 15 passenger vans are not approved for use in church and school sponsored events by the Adventist Risk Management Liability.