



## Parish/ Organization Name

### Screening in Faith

### Appendix J

#### **Ministry Guidelines:**

#### **Nursery Care Givers, Church School Teachers, Youth Workers**

Children are naturally trusting and readily place their faith in adults who care for them and they often do not have the skills, knowledge, or experience to distinguish between appropriate and inappropriate behavior in the adults who care for them. This leaves children particularly vulnerable to abuse. The following guidelines address some of the special considerations that need to be undertaken when working with children and youth. While it is acknowledged that some parishes may have difficulty with implementation, these guidelines protect both the young people and those who work with them. Every effort must be made to follow them as closely as possible.

1. Children should be supervised at all times. When Church School is over, children should be escorted to meet their parents or remain under supervision in the classroom until they are picked up. Parishes with large numbers of children in the Nursery or Church School should implement a more formalized sign in and out procedure, particularly where visitors or infrequent attendees may not be known to the staff.
2. Children must be supervised by adults or responsible teenagers. While all Church School teachers need a supervisor to whom they can regularly report, teens should have the opportunity to check-in with a responsible adult before or after each lesson. While it is not necessary that an adult be present in every classroom at all times, at least one clearly identified adult should be readily available each Sunday to handle any emergencies or extraordinary situations that may arise. Periodic check-ins in each classroom by the supervising adult are recommended.
3. There shall be at least two leaders supervising a group of children. In order that a single teacher not be alone with a group of children, establish either a schedule whereby parents take turns assisting the teacher each week or designate one person (perhaps one of that Sunday's greeters / sidespeople) to roam among all the classrooms each week, checking on each class, and supplying assistance when and where necessary.
4. Many guidelines suggest a leader to child ratio of 1:5 for infants and toddlers (under 2 and a half years old), 1:8 for older preschool children (2 and a half to 6 years old), and 1:10 for school age children (over 6 years old). Churches are not bound by these ratios, however, where leader-to-child ratios consistently exceed the suggested numbers, the parish should attempt to recruit more Church School Teachers. The strategies mentioned above, in point 3, may prove useful when recruiting additional help.
5. It is best that Church School Classes and Youth Group Meetings take place in public spaces. The church is better than a private home; a church hall is better than a secluded room. An open door is better than a closed door; a door with a window is better than a solid door.
6. Special events or field trips off church premises must be pre-approved by church leadership. Parents must be notified well in advance of the outing and written parental approval must be obtained for every participant, without exception. If using private vehicles, additional releases may be needed. At least two adults shall be available to supervise the event and leaders of both genders should be available if working with a co-ed group.

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#### Nursery Care Givers, Church School Teachers, Youth Workers (cont.)

7. If an event requires that a leader drive children or youth, the leader must hold a valid driver's license and be adequately insured. Seat belts must be available for all passengers. When driving young children, approved child restraints or car seats must be available and used as required by law. The same holds true for any vehicle offered by parents/care-givers for transporting children. Leaders must not have any alcohol or drugs in their system when driving. Leaders should avoid being alone with a single child in the car unless under extreme circumstances, such as driving a child home in an emergency.
8. Church School Teachers and Youth Workers should avoid one-on-one interaction in an isolated setting with children and youth. If a child or adolescent requests to speak privately with an adult, it should be done out of earshot but within view of another adult or in a public place. It is inappropriate for a Church School Teacher or Youth Worker to suggest a private meeting with an individual child.
9. Encourage parents of young children to take them to the washroom before Church School. If a child needs to use the washroom during Church School, he or she should be escorted by an adult. It is best if the adult remain outside the washroom with the door open. An adult should not enter a cubicle with a child and close the door. If a very young child or a child who has a disability or who is ill requires more toileting assistance, a second adult must be present in or at the door of the washroom.
10. In general, physical contact should occur only at the child's initiation and never without the child's permission. Any physical contact with children or youth must be of a non-sexual nature and appropriate to the situation. Appropriate contact includes:
  - bending down to the child's eye level, speaking kindly, and listening attentively
  - Gaining permission before hugging a child and respecting his or her right to refuse a hug
  - Taking a child's hand and leading him or her to an activity
  - Comforting a child by placing an arm around his or her shoulder and giving a gentle squeeze from the side
  - Praising or welcoming a child by holding the child's two hands in yours
  - Patting the child on the head, hand, back, or shoulder in affirmation
  - Holding a preschool child who is crying, provided that he or she wants to be heldInappropriate contact includes:
  - Kissing, or coaxing a child to kiss you
  - Extended hugging or tickling
  - Touching any area of the body normally covered by a bathing suit, specifically the buttocks, thighs, breasts or groin areas
  - Carrying older children, having them sit on your lap, or having them rub up next to you.
11. Physical or verbal force should not be used to discipline children. Gentle physical restraint is appropriate only if a child is in danger of causing damage or injuring himself/herself or others.
12. Sexual contact of any type with a child or youth is always inappropriate regardless of who initiates it. If a youth initiates inappropriate physical or sexual contact with a leader, it is the responsibility of the leader to stop such contact immediately, explain the necessary boundaries to the youth, then reestablish and maintain the appropriate boundaries. Any interaction in which a boundary may have been crossed shall be documented and reported to a supervisor. Note that it is far less likely that inappropriate physical or sexual contact will occur when others are present. To avoid any inappropriate contact, or allegations of inappropriate contact, leaders must try to avoid being alone with a child or youth at all times. **cont. ⇨**



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#### **Nursery Care Givers, Church School Teachers, Youth Workers (cont.)**

13. Jokes, innuendoes, or compliments of a sexual nature are always inappropriate and strictly forbidden. Be cautious when children or youth are asking questions or seeking advice around topics of a sexual nature. This is particularly true when some may deliberately draw the leader on. As a guideline, do not say or do anything you would not want to see reported in the newspaper or on TV. Do not say or do anything that you would not want your family to find out about, and do not say or do anything that you would not want the participant's family to find out about.
14. In overnight situations, no adult/leader should sleep in the same space as a participant. Sleeping and changing areas should be segregated by gender. Leaders and participants should change in separate areas so that one is never naked in the presence of the other.
15. There may be times when a Church School or Youth Group Leader suspects that a child has been a victim of parental abuse or neglect, or is at risk of being subject to abuse or neglect, or where a child or youth discloses such abuse to the leader. In these situations, the leader is required by law to report the case to the local Ministry of Children and Family Development (MCFD) office. This requirement cannot be delegated to anyone else. The person who becomes aware of abuse or neglect or who suspects that the risk for abuse or neglect is present must call the MCFD or the police.
16. If a child discloses neglect or abuse the following steps should be followed:
  1. Believe in the child and take his or her disclosure seriously.
  2. Listen openly and calmly to the child but do not ask leading questions.
  3. Reassure the child that you will do your best to get the right kind of help.
  4. Record the facts. Write down the child's name, address, telephone number, the time and place of the conversation, and what the child told you in his or her own words.
  5. Report the disclosure to the MCFD or to the police.
  6. Tell your supervisor and the clergy that you have made such a report to the MCFD. This helps them to prepare for potential repercussions from the report.



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#### **Ministry Guidelines: Conducting Pastoral Care or Individual Counseling**

In times of crisis or uncertainty, people will often turn to the Church for support and understanding. Pastoral Care represents an important and rewarding ministry for those involved. However, it is important to recognize that in times of crisis, people become more vulnerable than they would otherwise be and that a caregiver may potentially have a great deal of influence over an individual's attitude and behavior. Caregivers in these circumstances must be particularly aware of their own biases and, regardless of their intentions, must do their best not to unduly influence the person seeking care.

When a caregiver meets repeatedly and/or regularly with an individual to help address difficulties or uncertainties in his or her life, the relationship might be more accurately defined as a counseling relationship. The degree of influence is likely to be even greater in counseling situations, therefore the caregiver needs to be particularly aware of the potential power imbalance in the relationship and be extra vigilant in maintaining appropriate boundaries.

The guidelines shown below should be followed when conducting pastoral care or individual counseling:

1. Caregivers should strictly avoid counseling people to whom they are personally close or with whom they have a working relationship.
2. Caregivers should be aware of their own level of competence and avoid working in areas for which they are unqualified.
3. Caregivers should meet with a supervisor on a regular basis to discuss their work since isolation can lead to a loss of perspective and good judgment.
4. Caregivers should never allow any form of sexual or intimate contact with those whom they counsel regardless of invitation or consent. This includes, but is not limited to, all forms of overt or covert seductive speech, gestures and behaviors as well as intimate or explicitly sexual contact.
5. Pastoral care and counseling relationships are for the benefit of the person being cared for. They should be entered into only with agreement from the person seeking care, and should be continued only as long as it is reasonably clear that the person is gaining some benefit from the relationship.
6. If the caregiver becomes unable or unwilling to continue the relationship, he or she should endeavor to arrange for the person to see another caregiver.
7. Caregivers must treat all information and communications obtained in meetings as strictly confidential and should not disclose them to anyone except where required by law or where given written consent by the individual(s) involved. When discussing the details of a particular situation with a supervisor, the identity of the people involved must be protected.

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### Conducting Pastoral Care or Individual Counseling (cont.)

8. Caregivers should not agree to ongoing counseling of a person under the age of 18 without the knowledge and written consent of the youth's parent or guardian. In those situations where a minor has specifically requested counseling without his or her parents' knowledge, the caregiver should seek approval from his or her supervisor before beginning counseling. The supervisor should speak with the youth directly before granting approval.
9. When possible and where confidentiality permits, counseling should take place in a church office with a window in the door. It is best to have another adult close by while counseling takes place.
10. Counseling relationships should involve some form of record keeping. At a minimum, the caregiver should record: the date, the number of the session, who was present, and the session focus. This helps the caregiver to maintain objectivity, judge an individual's progress over time, and, in the case of litigation, recall accurately what occurred during the sessions. These records must be stored in a locked cabinet, in a secure location to which only authorized persons have access.



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#### **Ministry Guidelines: Ministering to the Elderly**

Most of us are familiar with the physiological changes that accompany aging. Pain and stiffness in joints can result in loss of manual dexterity and decreased mobility. Hearing often deteriorates, making communication more difficult. In later stages of life, cognitive ability may decrease, resulting in difficulties with memory or periods of confusion and disorientation. In addition, significant emotional changes are likely to occur as people begin to face end of life issues including: the inability to perform tasks that they once did, loss of significant life-long friends or companions, possible regrets over mistakes made or opportunities missed, and the inevitable facing of one's own mortality.

All this being said, we need to remember that many people remain active and contributing members of their community well into their eighties and nineties. Often, these people possess life experiences, gifts, and wisdom that make them a joy to minister to, as well as significant resources for ministering to others. The following should be kept in mind while working with the elderly:

1. Approach each person as an individual with dignity and respect. Do not prejudge an elderly person's interests or abilities. Physical difficulties may not be indicative of interest or mental acuteness.
2. Elderly people often hold clergy and other church personnel in extremely high regard, particularly if they were taught at an early age not to question the Church. Extra caution must be used not to exert undue influence in these situations, particularly in the area of financial giving.
3. It is recommended that all donors should seek independent financial and legal counsel before making any significant contributions to the Church. Elderly people should also be encouraged to speak with their family before making significant contributions in order to avoid allegations of undue influence or abuse of trust.
4. Be aware of signs that an elderly person may not be caring for him or herself as he or she should, and may require additional community resources or assistance. Signs of personal neglect include, but are not limited to: a decrease in personal hygiene, wearing the same clothes all the time, particularly if they are stained or soiled, and periods of confusion, disorientation, or loss of memory.
5. If you become concerned about the well being of an elderly person, speak to your supervisor about trying to initiate contact with a family member in order to discuss the situation and recommend possible courses of action.
6. When meeting elderly people in their homes, be sure to arrange the visit in advance and do not overstay your welcome.
7. People visiting elderly people should be aware of their own level of competence and avoid working in areas for which they are unqualified.



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#### **Ministry Guidelines: Conducting In-Home Visits**

There is a wide variety of reasons and circumstances that make meeting people in their own homes a necessary part of the Church's ministry. When visiting shut-ins, preparing people for baptism, welcoming newcomers, conducting stewardship or planned giving campaigns, or responding to pastoral crises, it is often necessary and desirable to go to someone's home.

However, visiting people in their own homes presents its own set of challenges. Homes, by their nature, are private environments. A person tends to be more comfortable and relaxed in his or her own environment, and this increased degree of relaxation may, in fact, make him or her more vulnerable. Conversely, because the person being visited is better able to control the situation in his or her own environment, he or she may hold a higher degree of power than the visitor. Visitors should be aware that they are potential victims of abuse when visiting someone's home and should take the necessary steps to protect themselves.

The following guidelines are meant to protect both parties in these situations – the visitor and the visited.

1. Always arrange the visit in advance. Establish a starting time and approximate ending time, as well as a clear purpose for the visit so that the individual knows exactly what to expect.
2. Make another person (secretary, spouse, colleague) aware of where you are going and when you can be expected to return.
3. Be respectful of people's time and do not overstay your welcome. When visiting a shut-in or someone who is ill, be particularly conscious of how they are feeling and avoid over-tiring them.
4. Keep the pastoral purpose of your visit in mind at all times. Do not attempt to unduly persuade or influence the person, particularly if he or she seems confused. Never offer advice about medication or medical treatment, and avoid arguing with, or agitating the person you are visiting.
5. Stay in the most public areas of the home – the living room, family room, or kitchen. Avoid entering a person's bedroom unless a 3rd party is present in the home.
6. Choose a seat at a comfortable distance from the person you are talking to, avoid sitting next to them on a couch or sofa. Do not invite, initiate, or tolerate any unwanted or inappropriate physical contact.
7. Visitors should never engage in any form of sexual impropriety with those whom they are visiting. Sexual impropriety includes, but is not limited to, all forms of overt or covert seductive speech, gestures and behaviors as well as explicitly sexual contact.
8. Do not agree to meet anyone in his or her own home if you sense your own personal safety may be compromised or if you feel that there is the potential that a boundary may be crossed. If a person whom you do not know well asks for a meeting and you are at all suspicious, arrange to meet him/her at the church offices, a coffee shop or a restaurant until you know him/her better.

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#### Conducting In-Home Visits (cont.)

9. When first arriving at a person's home, assess the situation for anything that may be out of the ordinary. Do not continue if the person is inappropriately dressed, under the influence of alcohol or drugs, or if a person or animal acts in a threatening or aggressive manner, or if the animal is not properly restrained.
10. If the person acts strangely, says or does things that make you feel unsafe or uncomfortable, or initiates inappropriate physical contact, tell them to stop, then, reestablish and maintain appropriate boundaries. If the behavior continues, excuse yourself and leave, document what happened, and report it to your supervisor. Do not stay in a potentially dangerous or compromising situation!
11. Do not take the person away from the home for a walk or in your car unless specifically arranged in advance as part of the visit and approved, in advance, by your supervisor. If driving a person to appointments or errands is part of the stated ministry, drivers must hold a valid driver's license and insurance. Seat belts must be available for all passengers. Drivers must not have any alcohol or drugs in their system when driving. If possible, driving ministries should be team ministries to avoid being alone in a car with a vulnerable person.
12. Visitors must treat all information and communications obtained while visiting as strictly confidential and should not disclose them to anyone except where required by law or where given written consent by the individual(s) involved. When discussing the details of a particular situation with a supervisor, the identity of the people involved must be protected.
13. Except where the stated purpose of the visit is stewardship or planned giving, it is best not to accept gifts or donations when making in-home visits. Encourage the person to make his or her donation using the offering plate or by mailing it directly to the Church. If the person insists on giving you something while you are there, provide a written receipt. Explain that the church will issue an official receipt at the appropriate time.
14. It is recommended that all donors should seek independent financial and legal counsel before making any significant contributions to The Church. People should also be encouraged to speak with their family before making significant contributions in order to avoid allegations of undue influence or abuse of trust.
15. Be aware of signs that a person may not be caring for him/herself as he or she should, and may require additional community resources to assist him or her. Signs of personal neglect include, but are not limited to: a decrease in personal hygiene, wearing the same clothes all the time, particularly if they are stained or soiled, and periods of confusion, disorientation, or loss of memory.
16. If you become concerned about the well being of a person whom you are visiting, speak to your supervisor about trying to initiate contact with a family member in order to discuss the situation and recommend possible courses of action. Keep in mind that a conversation of this nature with a family member may be perceived by the person whom you are visiting as a betrayal of trust and breach of confidentiality. Care and discretion must be exercised in such situations.
17. Persons who make in-home visits to the same person on a regular basis should be aware of their own level of competence and avoid working in areas for which they are unqualified.





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## Ministry Guidelines: Conducting Hospital or Care Facility Visits

People in a hospital or nursing home may be in unfamiliar surroundings. They may be experiencing considerable pain, uncertainty, or fear over their condition. They may be affected by anesthesia or another medication. People in these situations become more vulnerable because they may not be completely themselves.

Additional care must be taken when ministering to them, as outlined below:

1. Upon arrival at the hospital or nursing home, check with a nurse or attendant to determine if the person is able to receive visitors and to make them aware of your presence.
2. Find out about institutional rules and procedures and follow them closely. For example, some hospitals may require the use of security badges for regular visitors. Some areas of the hospital may have strict hand washing or other policies in place.
3. If you are a regular hospital visitor and your hospital has an on-site chaplain, make yourself known to this person. Use this person as a resource when appropriate. The hospital chaplain will be aware of any procedures or issues specific to his or her hospital.
4. Be prepared to listen to the situation or diagnosis with the individual you are visiting but refrain from giving opinions or advice. Never pass judgment on the nature or quality of medical care being provided. However, in some extraordinary circumstances it may seem the patient needs an advocate. Such action can only be done with the patient's permission.
5. Be prepared to meet with friends or family members who may be visiting at the same time as you are. Keep in mind that these people may or may not hold the same religious beliefs as the person you are visiting.
6. Discussions with a patient, their family, or friends should be held in strict confidence. Visitors must treat all information and communications obtained while visiting as strictly confidential and should not disclose them to anyone except where required by law or where given written consent by the individual(s) involved. When discussing the details of a particular situation with a supervisor, the identity of the people involved must be protected.
7. If a nurse or doctor comes to engage the patient in discussion or treatment, excuse yourself to a waiting area until the conversation is finished, unless specifically requested to remain by the patient or the health care professional.
8. If a patient requires assistance to use the washroom, or to get out of bed, seek the help of a nurse or orderly. Never attempt to help the person on your own.
9. Do not take the person away from the hospital or nursing home for a walk or in your car unless specifically arranged in advance as part of the visit and approved, in advance, both by your supervisor and the appropriate authorities at the hospital or nursing home. If driving a person to appointments or errands is part of the stated ministry, drivers must hold a valid driver's license and insurance. Seat belts must be available for all passengers. Drivers must not have any alcohol or drugs in their system when driving. If possible, driving ministries should be team ministries to avoid being alone in a car with a vulnerable person.
10. People making hospital or nursing home visits should be aware of their own level of competence and avoid working in areas for which they are unqualified.