Safety and Protection Policy for Saddle Hill Foundation Trust

2021

These resources came from Kids Friendly NZ and have been adapted for Saddle Hill Foundation Trust.



... because all people matter to God

Contents

SAFETY AND PROTECTION POLICY	
CODE OF ETHICS FOR THOSE WORKING WITH CHILDREN	
CODE OF ETHICS IN PASTORAL CARE	
CODE OF CONDUCT FOR THOSE WORKING WITH CHILDREN	8 AND YOUTH
RECRUITMENT AND APPOINTMENT POLICY	9
PROCESS FOR APPOINTMENT OF PAID STAFF:	9
VOLUNTEER APPLICATION FORM	10
VOLUNTEER REFERENCE CHECK FORM	11
POLICE CHECK POLICY	
PROTECTIVE BOUNDARIES POLICIES	13
VULNERABLE CHILDREN'S ACT 2014 OVERVIEW	13
DEFINING AND IDENTIFYING ABUSE AND NEGLECT	14
DEALING WITH DISCLOSURES OF ABUSE	18
RECORDING, RESPONDING AND REPORTING SUSPECTED ABUSE:	19
PROCEDURE FOR RESPONDING TO SUSPECTED CHILD ABUSE	20
CHILD/YOUTH BEHAVIOUR MANAGEMENT POLICY	21
PROTECTING CHILDREN, YOUTH AND ADULTS POLICY	22
POLICY RE CHILDREN/YOUTH WITH SPECIAL NEEDS OR DISABILITIES	24
COMPLAINTS PROCEDURE	24
PHYSICAL SAFETY POLICIES	26
SUPERVISION POLICY for SUNDAY MORNING PROGRAMMES	27
CHILDREN'S/YOUTH MINISTRY: CHILD/YOUTH INFORMATION AND CONSENT SHEET	27
HEALTH AND SAFE ENVIRONMENT POLICY	28
ON-SITE RISK ASSESSMENT AND MANAGEMENT POLICY	30
OFF-SITE RISK ASSESSMENT AND MANAGEMENT POLICY	30
HAZARD IDENTIFICATION	31
DAILY VENUE/ HAZARD CHECKLIST	32
EMERGENCY RESPONSE PLAN	33
LOCK UP PROCEDURES	34
EXTERNAL CONTRACTOR HEALTH AND SAFETY AGREEMENT:	35
ALCOHOL, SMOKING AND DRUGS POLICY	
USE OF CANDLES POLICY	38
ACCIDENT AND EMERGENCY PROCEDURE	39
FIRST AID PROCEDURES:	40
HYGIENE POLICY	
MEDICATION POLICY	41
MEDICATION CONSENT FORM	
MEDICATION ADMINISTERED RECORD	
REPORTING ACCIDENTS AND INCIDENTS POLICY AND FORM	45
MEDICAL ACTION PLAN - ALLERGIES & MEDICAL CONDITIONS	
COVID 19 HEALTH & SAFETY FOR SHFT/YET YOUTH PROGRAMMES	
DRIVING & VAN POLICY	
EDUCATION	60
Error! Bookmark not defined.RE	GULAR UPDATES
	64

SAFETY AND PROTECTION POLICY of Saddle Hill Foundation Trust

INTRODUCTION:

This policy exists to ensure the safety and wellbeing of all the children and youth in our care. This policy covers three keys to safe practice:

- APPOINTMENT PROCESS
- SAFETY AND PROTECTION POLICY
- EDUCATION

The policy is also designed to protect leaders, of activities and programmes involving children and youth, from allegations that can arise from careless and unwise behaviour.

In accordance with the Vulnerable Children's Act 2014 (amended) we also have policies to provide information and processes to improve the identification and reporting of child/youth abuse and neglect namely:

- DEFINING AND IDENTIFYING ABUSE AND NEGLECT
- DEALING WITH DISCLOSURES OF ABUSE
- RESPONDING TO, RECORDING, REPORTING SUSPECTED CHILD OR YOUTH ABUSE

We strive to ensure that all staff (paid and unpaid) working with young people have a thorough understanding of these policies and are practising them.

Safety and Protection Mission Statement:

"We will seek to ensure that all people in our care are nurtured and cared for in a safe environment and are protected from any potential harm."

This trust is committed to keeping the law and will therefore operate in accordance with Occupational Safety and Health requirements, the Human Rights Act, the Privacy Act, the Vulnerable Children's Act 2014 and other relevant legislation. This trust is also committed to being an agent of healing and justice and to prevention of abuse: spiritual, emotional (psychological), physical and sexual abuse.

Recruitment and appointment process:

This applies equally to "volunteers" as to any paid worker:

- All those who want to work with children or youth through this church will undergo a suitable screening process including an interview process and reference checks.
- A condition of appointment will be that applicants must respond to questions about whether they have ever committed or been accused of any acts of child/youth molestation or abuse.
- No-one who has sexually abused a child or youth will ever be appointed.

- Appointees must sign a declaration of commitment that divulges any criminal conviction (or pending) and acknowledges willingness to adhere to the Code of Ethics and the Code of Conduct for those working with children and young people.
- Appointees must provide personal contact details.
- Where appropriate, appointees will be given a job description.
- It is compulsory for paid employees to be police checked every three years.
- It is strongly recommended that volunteers working with children be police checked.

Protective boundaries for leaders, children, youth, parents and the trust, endorsed and implemented by this Trust:

- Leaders will abide by the requirements of the leadership of this Trust including
 acceptance of the principles of the Code of Ethics for Pastoral Care and the Code
 of Conduct for those working with children and young people
- Protective strategies are in place to protect children and young people including:
 - "Teaching" in an open environment to which parents and other teachers have free
 - access.
 - Preventing visitors from accessing children without the supervision of an approved
 - leader.
 - Supervising children/youth during all programmes and preventing them from playing in dangerous places.
 - Avoiding being alone with one child/youth unless they are within sight of others.
 - Not touching children/youth on any part of their body that would normally be covered by one piece swimming togs.
 - Not kissing or tickling a child/youth or doing anything that is potentially sexual.
 - Keeping parents fully informed about programmes including starting and finishing times.
 - Being aware of and following the process and procedures for reporting any suspected abuse to the appropriate legal authority [i.e. Child, Youth and Family or Police]
 - Maintaining sensitivity and confidentiality in disclosing sexual abuse.
- ✓ Strategies, policies and procedures are in place to ensure physical, psychological, sexual and spiritual safety of children and youth. See Policy and Procedures Sections. Staff and volunteers are aware of these and receive training in ensuring safety.

CODE OF ETHICS FOR THOSE WORKING WITH CHILDREN AND YOUTH

A Code of Ethics is not about practical guidelines for behaviour. It's a set of values, principles, important standards that cannot be taken for granted.

Ethical guidelines for Children's Workers and Youth Workers

A. How we conduct ourselves towards those in our care

- 1. I will deal truthfully with others. I will encourage open discussion and respect others.
- 2. I will refrain from using 'bad' language (swearing) when associating with children/youth.
- 3. I will respect other people's privacy. Anything shared in confidence will remain confidential unless there is a clear danger to someone. I will let people know about these limits.
- 4. I will recognise that all people are made in God's image. Everyone is special to God and I will not discriminate between them for any reason.
- 5. I will not take advantage of people, either for my own benefit or for the benefit of others.
- 6. I will not become emotionally dependent or intimately involved with anyone that is in my care. I will not abuse, harass or exploit anyone.
- 7. I understand that I can't do everything. I won't try to do things such as formal counselling until I have proven competence in that area. I will refer people to those who do.

B. Accountability to our employer

- 1. I will take a professional approach to my job, always seeking to do the best I can do.
- 2. I will be responsible about the time I spend in ministry, spending neither too much nor too little.

C. Responsibilities to our colleagues

- 1. I will be helpful to other church workers. I will treat them with respect, courtesy and good faith.
- I will appreciate what other people are doing in ministry by remembering them in prayer and encouraging them. I will respect the fact they are busy too and have commitments in other areas.
- 3. If conflicts do occur, I will deal with them sensibly and do something about them. I will ask the appropriate people to help sort things out and seek reconciliation.
- 4. I will do something about colleagues who are not doing their jobs or who are behaving in an unethical way. I will use the appropriate channels to do this.

D. How we take care of ourselves

- 1. I will make sure I eat properly, get enough sleep and stay reasonably fit.
- 2. I will make sure I am always accountable to someone in ministry.
- 3. I will make sure I have a support network in place.
- 4. I will make sure I participate in opportunities for spiritual growth.
- 5. I will make sure I participate in opportunities for in-service training.
- 6. I will make sure I have times of recreation, refreshment and renewal.

CODE OF ETHICS IN PASTORAL CARE

Saddle Hill Foundation Trust was set up from East Taieri Church and as such adheres to this PCANZ Code of Ethics

- 1) The PCANZ, as a part of the church of Jesus Christ, is committed to conducting itself in accordance with the Gospel so that all people are treated with honesty, transparency, dignity, and respect.
- 2) People representing or working for the PCANZ ("the Church") are required to abide by this Code of Ethics. This includes ministers, employees, and volunteers.[1]
- 3) This Code is to be read in the context of, and along with, the *Book of Order* and the Church's *Conditions of Service Manual*. It reflects the standards of conduct expected because of the special relationships of pastoral care and ministry in which the Church is engaged. It is supported by subordinate documents that address particular areas of practice within the church.
- 4) People representing or working for the Church will:

4.1 Demonstrate high ethical standards of behaviour at all times.

This recognises obligations of truthfulness and confidentiality towards people the Church deals with, together with an acknowledgement that it is unacceptable to subject people to exploitation, harassment, or abuse, whether financial, sexual, physical, psychological, spiritual, cultural or otherwise in any discriminatory way, nor to take advantage of any vulnerability of others. All dealings with others will be characterised by compassion and natural justice.

4.2 Demonstrate appropriate levels of competence commensurate with the role and task undertaken.

This recognises obligations of using appropriate supervision; regular opportunities for spiritual growth; stewardship of time and talents; personal upskilling and recreation; awareness of strengths and limitations; collegiality and respect for others within the Church; recognition and respect for boundaries; and the need to ensure the health, safety, and wellbeing of those with whom the Church interacts is protected and enhanced.

4.3 Comply with the laws and usages of the Church and the laws of the communities in which the Church operate.

CODE OF CONDUCT FOR THOSE WORKING WITH CHILDREN AND YOUTH

A code of conduct gives practical guidelines for those working with children and vouth

Leader's responsibilities towards children

- 1. Ensure the safety and wellbeing of all children/youth in your care.
- 2. Make certain that all activities are undertaken with sufficient suitably qualified staff and approved resources.
- 3. Treat all children/youth as individuals, with dignity and sensitivity, avoiding favouritism, respecting their culture, their home background, their age and their physical and mental abilities.
- 4. Neglect, harassment, bullying, sarcasm, and bad language are unacceptable, as is any degree of physical, emotional, mental or spiritual abuse,
- 5. Respect children's/youths' privacy at all times, particularly where activities include sleeping, changing of clothing, bathing and ablutions.
- Remain in sight of others, even if out of hearing, when dealing with an individual child or youth. Avoid unaccompanied and unobserved activities and inappropriate physical contact.

Leader's responsibilities towards parents/guardians

- 1. Take the time to know all parents/guardians.
- 2. Keep parents/guardians informed, inviting them to participate in or observe the programmes being provided.
- 3. Find out if children/youth have any special needs or medical requirements.
- 4. Obtain written consent from parents/guardians prior to undertaking activities off church premises.

Leader's responsibilities to the Trust

- 1. Conduct yourself in a manner in keeping with Christian principles and ethics.
- 2 Be a healthy role model.
- 3. Be educated in the recognition of the warning signs and symptoms of abuse.

Leader's responsibilities to self

- 1. Keep contact with the Executive Officer or person in charge for support and advice
- 2. Avoid placing yourself and your co-workers in compromising situations and protect yourself from actions that may be misconstrued.
- 3. Support your colleagues and develop good relationships with them.
- 4. Report to the Executive Officer or person in charge any anxieties you have regarding questionable behaviour of any person participating in children's/youth programmes. This is to safeguard the integrity of leaders from potential accusations of abuse.

RECRUITMENT AND APPOINTMENT POLICY

Process for Appointment of Volunteer Staff

- 1/ The Children's/Youths' Ministry team may be approached by volunteers or will approach volunteers as required. All volunteers will be asked to complete an APPLICATION FORM, including supplying two referees and declaring that they do not have a criminal conviction, as well as a POLICE CHECK FORM.
- 2/ Applications will be processed by the Children's/Youth Ministry Leader with recommendations sent to the Ministry Leadership Team for approval. The process will be confidential to the parties involved.
- 3/ Pastoral care of situations where people are turned down for leadership, and the hearing of complaints about unfairness in appointment processes, will be dealt with by the Ministry Leadership Team.
- 4/ All persons dealing regularly with children or young people in a church- appointed position will receive orientation training in:
- Safety and Protection policy and Code of Ethics guidelines for this church.
- Job description clear understanding of their 'duty of care'
- Code of conduct clear understanding of responsibility, limits of responsibility and expectations of their work and behaviour
- Warrant of Fitness Training Course every 3 years

PROCESS FOR APPOINTMENT OF PAID STAFF:

- 1/ After wide consultation and assessment of needs, a job description for a paid position will be developed by the Ministry Leadership Team and approved by the SHFT Board.
- 2/ The job will usually be advertised. Applicants will supply a CV and two or three referees which will be checked.
- 3/ Interviews will be held with the shortlisted applicants (no more than 3) and a recommendation will be made from the interviewing group to the SHFT Board for final approval.
- 4/The successful applicant will complete the police check procedure as outlined in this policy. He/she will also read and agree to the Safety and Protection policy, the Code of Ethics guidelines and the Code of Conduct for this church. The offer of appointment is conditional on the results of the police check and time must be allowed for this.

VOLUNTEER APPLICATION FORM

To work with children or young people At Saddle Hill Foundation Trust

Position applied for:
Name:
Address:
Phone: Email:
Name and contact details of two referees 1.
2.
(It would be helpful if one of these understood your Christian involvement and one knew you in an employment situation. If you are new here, please make one of these the minister or leader of your previous congregation)
Briefly describe what experience you have had working with children/young people:
I have/have not been convicted of any criminal offence involving violence or sexual abuse.
I will attend a PCANZ Warrant of Fitness Training Course every three years.
Signature:

VOLUNTEER REFERENCE CHECK FORM

Referee telephone check (at least two referees should be contacted prior to appointment)

Applicant:
Check done by:
Date:
Position applied for:
Referee Name:
Address:
Telephone:
Relationship to applicant:
How long has known applicant:
Suitability for position:
Communication effectiveness:
Related experience:
Strengths/Weaknesses:
Reliability/Trustworthiness:
Any concerns:
Relevant details about applicant's background:



POLICE CHECK POLICY

Anyone who works with children, youth and families must undergo a police check prior to their appointment.

The mandate for this comes from the minutes of General Assembly 2006 section 06.047 h

The rationale for this mandatory requirement for a police check for lay workers in positions with pastoral responsibilities is that it is one way in which the Church can minimise, though not necessarily eliminate, the likelihood of more vulnerable members of society being put at risk by individuals whose behaviour may be detrimental to others' safety and wellbeing.

The requirement for police checks to be done does not exempt Sessions/Parish Councils/Trusts and Presbyteries/UDCs from working through thorough recruitment and appointment processes.

Sessions/Parish Councils/Trusts and Presbyteries/UDCs should, as part of the application process, obtain appropriate consents and declarations from all prospective appointees.

(See "Sample declaration form for prospective lay workers"). If applicants are not willing to sign this form then they should not be interviewed or appointed.

Applicants should be asked to supply the names and contact details of 2-3 people who may be approached as confidential referees. Sample questions for referees and further information is available from the Presbyterian website: www.presbyterian.org.nz under employment.

Following an interview, the successful applicant should be asked to fill in an official consent form for police check.

The police check process takes time: a month needs to be allowed from the date of submitting the application online. It may be done more quickly but your time frame must allow the month.

If an offer of appointment is made prior to the results of the police check being known the offer can only be conditional and is subject to the result of the police check.

If the police check does reveal that a person has criminal convictions that need not automatically preclude the person being appointed.

The operative regulations in the Book of Order are 86A and 86B, as amended by the 2002 General Assembly.

PROTECTIVE BOUNDARIES POLICIES

Including:

- Policies to ensure Physical, Psychological and Sexual Safety
- Policies for identifying abuse, dealing with disclosures of abuse and recording, responding and reporting child/youth abuse
- Child/youth management policies

VULNERABLE CHILDREN'S ACT 2014 OVERVIEW

The amended act which comes into force on 1 July 2015 requires organisations to ensure that those working with children and youth (paid and unpaid workers) understand the nature of abuse and neglect in children/youth.

In addition to developing a **Safety and Protection policy** (a legislation passed by General Assembly in 2004), Churches must now also develop policy for:

- Defining and Identifying Abuse and Neglect
- Dealing with Disclosures of Abuse
- Recording, Reporting and Responding to Suspected Child or Youth Abuse

The overarching purpose of all child/youth protection policies is to provide information and processes to improve the identification and reporting of child/youth abuse and neglect.

All staff (paid and unpaid) working with young people must have a thorough understanding of this policy and be seen to be practising this policy.

DEFINING AND IDENTIFYING ABUSE AND NEGLECT

The Children, Young Persons and their Families Act, 1989, defines child abuse as "...the harming (whether physically, emotionally, sexually), ill-treatment, abuse, neglect, or deprivation of any child or young person".

Physical Abuse

Physical abuse is a non-accidental act on a child or young person that results in physical harm. This includes, but is not limited to, beating, hitting, shaking, burning, drowning, suffocating, biting, poisoning or otherwise causing physical harm to a child or young person. Physical abuse also involves the fabrication or inducing of illness.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child or young person such as to cause severe and persistent adverse effect on the child's/youth's emotional development. This can include a pattern of rejecting, degrading, ignoring, isolating, corrupting, exploiting or terrorising a child or young person. It may also include age or developmentally inappropriate expectations being imposed on children/youth. It also includes seeing or hearing about the ill treatment of others.

Sexual Abuse

Sexual Abuse involves forcing or enticing a child or young person to take part in sexual activities (penetrative and non-penetrative, for example, rape, kissing, touching, masturbation) as well as non-contact acts such as involving children/youth in the looking at or production of sexual images, sexual activities and sexual behaviours.

Staff should be aware of their 'duty of care' which precludes developing a sexual relationship with or grooming of a child/youth. A sexual relationship between an adult and a child/youth will always be wrong, unequal and unacceptable.

Neglect

Neglect is the persistent failure to meet a child's/youth's basic physical and/or psychological needs, causing long term serious harm to the child's/youth's heath or development. It may also include neglect of a child's/youth's basic or emotional needs. Neglect is a lack of action, emotion or basic needs.

Indicators of Abuse

There may be **physical indicators** that a child/youth is being emotionally abused. Some examples of this are:

- Bed-wetting or bed soiling that has no medical cause
- Frequent psychosomatic complaints (eq. Headaches, nausea, abdominal pains)
- Prolonged vomiting or diarrhoea
- Has not attained significant developmental milestones
- Dressed differently from other children/youth in the family
- Has deprived physical living conditions compared with other children/youth in the family

There may also be **indicators in a child's/youth's behaviour** that could indicate emotional abuse. Some examples of this are:

- Suffers from severe developmental gaps
- Severe symptoms of depression, anxiety, withdrawal or aggression
- Severe symptoms of self-destructive behaviour self harming, suicide attempts, engaging in drug or alcohol abuse
- Overly compliant; too well-mannered; too neat and clean
- Displays attention seeking behaviours or displays extreme inhibition in play
- When at play, behaviour may model or copy negative behaviour and language used at home

There may be **indicators in adult behaviour** that could indicate emotional abuse. Some examples of this are:

- Constantly calls the child/youth names, labels the child/youth or publicly humiliates them
- Continually threatens the child/youth with physical harm or forces the child/youth to witness physical harm inflicted on a loved one
- Has unrealistic expectations of the child/youth
- Involves the child/youth in "adult issues", such as separation or access issues
- Keeps the child/youth at home in a role of subservient or surrogate parent

There may be **physical indicators** that a child/youth is being physically abused. Some examples of this are:

- · Unexplained bruises, welts, cuts, abrasions
- Unexplained burns
- Unexplained fractures or disclosures

There may also be **indicators in a child's/youth's behaviour** that could indicate physical abuse. Some examples of this are:

- Is wary of adults or of a particular individual
- Is violent to animals or other children/youth
- Is dressed inappropriately to hide bruises or other injuries
- May be extremely aggressive or extremely withdrawn
- Cannot recall how the injuries occurred or gives inconsistent explanations

There may be **indicators in adult behaviour** that could indicate physical abuse. Some examples of this are:

 May be vague about the details of the cause of injury and the account of the injury may change from time to time

- May blame the accident on a sibling, friend, relative or the injured child
- Shakes an infant
- Threats or attempts to injure a child/youth
- Is aggressive towards a child/youth in front of others
- May delay in seeking medical attention for a child/youth

There may be **physical indicators** that a child/youth is being sexually abused. Some examples of this are:

- Torn, stained or bloody underclothing
- Bruises, lacerations, redness, swelling or bleeding in genital, vaginal or anal area
- Blood in urine or faeces
- Sexually transmitted disease
- Unusual or excessive itching or pain in the genital or anal area

There may also be **indicators in a child's/youth's behaviour** that could indicate sexual abuse.

Some examples of this in children are:

- Age-inappropriate sexual play with toys, self, others
- Bizarre, sophisticated or unusual sexual knowledge
- Comments such as "I've got a secret", or "I don't like Uncle"
- Fire lighting by boys
- Fear of certain places e.g., bedroom or bathroom

Some examples of this in older children/youth are:

- Eating disorders
- · Promiscuity or prostitution
- Uses younger children in sexual acts
- Tries to make self as unattractive as possible

There may be **indicators in adult behaviour** that could indicate sexual abuse. Some examples of this are:

- May be unusually over-protective of a child/youth
- Is jealous of a child's/youth's relationships with peers or other adults or is controlling of the child/youth
- May favour the victim over other children/youth
- Demonstrates physical contact or affection to a child/youth which appears sexual in nature or has sexual overtones

There may be **physical indicators** that a child/youth is being neglected. Some examples of this are:

- Inappropriate dress for the weather
- Extremely dirty or unbathed
- Inadequately supervised or left alone for unacceptable periods of time
- Malnourished
- May have severe nappy rash or other persistent skin disorders or rashes resulting from improper care or lack of hygiene

There may also be **indicators in a child's/youth behaviour** that could indicate neglect. Some examples of this are:

- Demonstrates severe lack of attachment to other adults
- Poor school attendance or school performance
- Poor social skills
- May steal food
- Is very demanding of affection or attention
- Has no understanding of basic hygiene

There may be **indicators in adult behaviour** that could indicate neglect. Some examples of this are:

- Fails to provide for the child's/youth's basic needs, such as housing, nutrition, medical and psychological care
- Fails to enrol a child/youth in school or permits truancy
- Leaves the child or under age youth home alone
- Is overwhelmed with own problems and puts own needs ahead of the child's/youth's needs

DEALING WITH DISCLOSURES OF ABUSE

Only a minority of children/youth actively disclose abuse. Most child or youth abuse is disclosed accidently or though observation by an adult of a child's/youth's behaviour, words and physical appearance.

When a child/youth does disclose abuse, this needs to be taken very seriously. It is important that any disclosure is dealt with appropriately, both for the wellbeing of the child/youth and also to ensure that your actions do not jeopardise any legal action against the abuser.

There are a number of basic 'rules' that should be followed to ensure the safe handling of any disclosures of abuse from a child/youth:

- Don't panic.
- Remember that the safety and well-being of the child/youth come before the interests of any other person.
- Listen to the child/youth and accept what they say.
- Look at the child/youth directly, but do not appear shocked.
- Don't seek help while the child/youth is talking to you.
- Reassure them that they did the right thing by telling someone.
- Assure them that it is not their fault and you will do your best to help.
- Let them know that you need to tell someone else.
- Let them know what you are going to do next and that you will let them know what happens.
- Be aware that the child/youth may have been threatened.
- Write down what the child/youth says in their own words record what you have seen and heard also.
- Make certain you distinguish between what the child/youth has actually said and the inferences you may have made. Accuracy is paramount in this stage of the procedure.
- Tell your manager or supervisor as soon as possible and the Recording Reporting Abuse procedure will be followed
- After making the referral to Child, Youth and Family or the Police, look after yourself. Discuss the matter with your manager, supervisor or relevant person.

Important Notes:

The same action should be taken if the allegation is about abuse that has taken place in the past, as it will be important to find out if the person is still working with or has access to the children or youth

Dealing with an allegation that a professional, staff member, foster carer or volunteer has abused a child/youth is difficult but must be taken seriously and dealt with carefully and fairly.

RECORDING, RESPONDING AND REPORTING SUSPECTED ABUSE:

Any issues of suspected child/youth abuse must be taken seriously and handled in an appropriate manner that ensures the child's/youth's safety.

Only a minority of children or youth actively disclose abuse. Most child/youth abuse is disclosed accidently or though observation by an adult of a child's/youth's behaviour, words and physical appearance

Any staff, parent, caregiver, volunteer (or any other persons that may spend time with the children or youth) who suspects abuse or has any concerns must discuss this with the supervisor of the programme and/or the minister of the church.

In the case of a leader, staff member, supervisor or volunteer being involved in the action or suspicion, then any parent, caregiver, volunteer, other staff person (or other persons that may spend time with the children or youth) should contact the supervisor and/or minister of the church.

It is the responsibility of the supervisor and/or the minister of the church to take any action and to ensure that the correct procedure for recording and responding to concerns is followed.

It is always preferable that the parent/caregiver is involved and/or informed of any concerns but the supervisor's and/or minister's first priority will always be ensuring the safety of the child/youth, and this may require the supervisor and/or minister to immediately contact CYF or Police if they have concerns about the child's/youth's immediate safety.

PROCEDURE FOR RESPONDING TO SUSPECTED CHILD/YOUTH ABUSE

Abuse suspected or disclosed

CONSULT in confidence

(manager, minister, co-workers as appropriate and outside agencies)

and

RECORD

(give details of what you saw and heard or suspect with dates)

If your suspicions are not confirmed as significant, continue to:

MONITOR the situation closely in consultation with others.

<u>If your concerns are confirmed:</u>

REPORT the suspected abuse to CYF (Children, Youth and Families), Police or another appropriate agency and

INFORM the church management of your actions so that you gain **SUPPORT**

CHILD/YOUTH BEHAVIOUR MANAGEMENT POLICY

Children/youth attending respect each person (child or adult) they have contact with.

'LOVE YOUR NEIGHBOUR AS YOU LOVE YOURSELF' Matthew 19:19

Children's/youths' behaviour, and response of leaders and helpers to this behaviour, is guided by this Scriptural principle.

1. Examples of Unacceptable Behaviour

Physically and verbally hurting another person.

Damaging or defacing property or equipment.

Inappropriate language

Not listening to caregivers

Handling of Unacceptable Behaviour

Explain to the child why their behaviour is unacceptable (cite the rule to remind them of the behaviour guideline).

Show them the proper way to behave.

Praise the proper behaviour when it occurs.

If this does not change the behaviour or the behaviour is sufficiently serious, the leader will:

- Call the parents, explain the problem and have the parents come to pick up the child/youth.
- Provide comfort and reassurance, if appropriate, to the other children.
- Reinforce what is acceptable behaviour

Handling Persistent Unacceptable Behaviour

Keep a record of incidents

Inform parents of incidents and actions taken.

Seek advice.

2. <u>Disciplining Principles</u>

Always focus on the behaviour not the person.

Maintain the child's self esteem at all times.

Never smack.

Do not shout.

Maintain confidentiality.

PROTECTING CHILDREN, YOUNG PEOPLE AND ADULTS' POLICY

None of the following behaviours are acceptable:

Physical Abuse

Physical abuse is a non-accidental act on a child that results in physical harm. This includes, but is not limited to, bullying, beating, hitting, shaking, burning, drowning, suffocating, biting, poisoning or otherwise causing physical harm to a child. Physical abuse also involves the fabrication or inducing of illness.

Emotional Abuse

Emotional abuse is the persistent emotional ill treatment of a child such as to cause severe and persistent adverse effect on the child's emotional development. This can include a pattern of rejecting, degrading, ignoring, isolating, corrupting, exploiting or terrorising a child. It may also include age or developmentally inappropriate expectations being imposed on children. It also includes seeing or hearing about the ill treatment of others. It may also include discrimination on the grounds of cultural practices, ethnicity, gender or sexual orientation.

Sexual Abuse

Sexual Abuse involves forcing or enticing a child or young person to take part in sexual activities (penetrative and non-penetrative, for example, rape, kissing, touching, masturbation) as well as non-contact acts such as involving children in the looking at or production of pornography such as sexual images, sexual activities and sexual behaviours.

Those in the Trust (voluntary and paid) with responsibility for children and young people should be aware of their 'duty of care' which precludes developing a sexual relationship with or grooming of a child. A sexual relationship between a leader and a child will always be wrong, unequal and unacceptable.

Neglect

Neglect is the persistent failure to meet a child's basic physical and/or psychological needs, causing long term serious harm to the child's health or development. It may also include neglect of a child's basic or emotional needs. Neglect is a lack of action, emotion or basic needs.

To protect both children and adults the following procedures are followed:

- Leaders and helpers attend a PCANZ Warrant of Fitness Course
- We have sufficient teachers/caregivers/leaders for the number of children and restrict the number of children if the child/adult ratio is inappropriate. This ratio varies depending on the situation of risk.
- Teaching is conducted in an open environment to which parents have free access.
- Visitors are not allowed access to children without the supervision of an approved worker.

Protection of Children from Other Children:

Some children may exhibit inappropriate behaviour towards other children in the group eq.

- a) Emotional abuse eq. Taunting
- b) Physical abuse eg. Bullying
- c) Sexual abuse

No form of physical, psychological or sexual abuse is acceptable.

Where any child persistently abuses other children his/her parents will be asked to withdraw the child from the programme.

To Help Protect Adults Working With Children:

- We provide sufficient support mechanisms and resources, material, financial and human, to minimize risk.
- We provide legal advice and protection for all staff.
- We provide training in how best to interact with children including:
- a) Clear perception of leadership role
- b) Boundary issues
- c) Leaders are required to attend at PCANZ Warrant of Fitness Course

POLICY RE CHILDREN/YOUTH WITH SPECIAL NEEDS OR DISABILITIES

Children or youth with special needs will be included in the programme, providing that the supervisor is confident that the child's/youth's needs can be catered for without negatively affecting the other children/youth.

Full information about the child's/youth's requirements including medication, diet and supervision, must be obtained from the parents in legible writing and included with the child's/youth's enrolment form.

It is the coordinator's responsibility to ensure that all staff and volunteers are fully aware of the child's/youth's requirements and they feel confident to provide the necessary care.

If the child/youth require further special aids, for example modified facilities, extra staff or staff training, the Coordinator will consult with a member of the SHFT Board who will consult with the parents/caregivers to decide if the programme can cater for the child/youth.

Each case will be considered individually and every effort will be made to include the child/youth within the limits of the resources of the programme.

COMPLAINTS PROCEDURE

Parents wishing to lodge a complaint are asked to speak to the supervisor of the programme.

If the supervisor is unable to deal with the complaint immediately, she/he will make an appointment with the parent.

The supervisor will attempt to rectify the problem, but if a mutual agreement is not reached, a member of the SHFT Board will be called in and consulted.

If the complainant feels it is inappropriate to lodge the complaint with the supervisor of the programme, he/she may lodge a complaint with a member of the SHFT Board, who will call a meeting between the complainant and supervisor to attempt to resolve the issue.

All complaints are recorded and copied to the Saddle Hill Foundation Trust board.

Complaints are usually few and minor and can be dealt with on the spot by chatting to the staff involved. Parents are encouraged to voice any queries or concerns they have.

PHYSICAL SAFETY POLICIES

SUPERVISION POLICY for SUNDAY MORNING PROGRAMMES

It is desirable that two leaders/ helpers are present at all times so that there is always someone with a group if a leader has to leave the room for any reason. If possible, the helper will be the opposite gender to the leader.

Staff are aware of who is at the programme and where children/youth are at all times.

Children/youth must ask permission from the leader to leave the room to either return to church or use the toilets.

The approved ratio of children/youth to leader is 1:10 and 1:8 for trips or 1:6 for water and swimming activities.

All staff and volunteers counted for the child or youth/staff ratio are 14 years of age or older.

The management and overall leadership is carried out by an adult (20 years or over).

On Sunday mornings, parents are responsible for their children/youth until they leave the church service for their programme when the leaders will take over. When children/youth come to church unaccompanied by an adult, the leader will try to arrange another family or an adult 'buddy' for them to sit with during church.

Officially children's/youth ministry leaders' responsibility for the children/youth finishes when people appear in the Fellowship Centre for morning tea, indicating that the service has ended. Children/youth will be released for their morning tea too and this is the time when parents pick up responsibility. Supervision of indoor and outdoor play activities after church are the parents' responsibility.

Kidzown leaders will keep an eye on any unaccompanied children. If they are not collected, a responsible person will stay with the child while contact numbers are rung and transport home arranged.

CHILDREN'S/YOUTH MINISTRY: INFORMATION AND CONSENT SHEET

Name of child/youth: _	 	
Date of birth:	 	

Name of parent (s)	
Name(s) of siblings:	
Name of School:	
School year:	
Address:	
Tel. no:	
Mobile:	
Emergency tel. no:	
E-mail address:	
Details of any known allergies (including any	medication):
Please provide:	
Details of medical or other support that may activities:	be required for your child's/youth's participation in
Details of any information you feel would be helpful for	
Is there any person who MAY NOT collect yo	ur child/youth, that we need to be aware of?
I understand that my child/youth is n	ot allowed to leave the programme unaccompanied
and I will collect him or her at the end	d of the church service.
 I understand that my child will not be without my written consent. 	taken from the church building (eg on an outing)
• I give permission for my child's/youth	n's details to be stored by the Church (this may be on
computer) for children's/youth's minis	stry and associated use.
 Should there be any change to the de- responsibility to inform the leader. 	tails given on this form, I understand that it is my
In the unlikely event of illness or acci	dent I give permission for emergency first aid or
medical treatment to be given. In an	emergency and if I am not contactable, I am willing
for my child/youth to receive hospital	/medical treatment. I understand that every
reasonable effort will be made to con-	tact me as soon as possible.
Signed (narent/guardian):	Date:

HEALTH AND SAFE ENVIRONMENT POLICY

We aim to provide a safe and healthy environment at all times by ensuring:

• All surfaces and table tops are cleaned before and after food is served.

- Rubbish and discarded food is placed in the appropriate bins
- Cleaning agents and medicines are kept in cupboards inaccessible to children/youth.
- Disinfecting of equipment is carried out frequently.
- Safety plugs are placed on unprotected power points.
- Electrical cords and appliances are regularly checked for safety.
- Fire and smoke alarms are installed.
- Adequate lighting is supplied.
- Floor coverings are firmly attached.
- Pathways are not obstructed by vegetation.
- Outdoor play areas are barked.
- There are no poisonous plants.
- Water for hand washing is at 50 degrees C.
- First Aid kit which is checked and replenished regularly is easily accessible at the church and on trips and key staff are trained in first aid.
- All areas are well supervised at all times.
- Gates and fences are child-proof.
- Play equipment is inspected regularly.
- Fire extinguisher and fire alarms are inspected regularly and earthquake procedures and fire drills are communicated and practiced.
- A child/youth abuse management policy is in place.
- Children/youth are encouraged to dress appropriately for outdoor excursions.
- Sick children/youth are sent home.
- Staff are aware of children's/youths' medical problems, medication, allergies and disabilities.
- Children/youth wash their hands after going to the toilet and before all meals.
- Staff are aware of safety guidelines.
- Permission is gained in writing to take children/youth on trips.
- Children/youth are seated safely when using public and other means of transport.
- Children/youth are instructed clearly before commencing trips or other projects.

NB: Some of these policies apply to situations beyond Sunday mornings but have been included for any future programmes and activities.

ON-SITE RISK ASSESSMENT AND MANAGEMENT POLICY

The Children's/Youths' Programme Coordinator is required to check the premises (indoors and outdoors) each day for risks using the hazard check list. Identified risks are to be reported to children/youth and staff immediately and minimized as far as possible.

Risks requiring maintenance are to be reported to the SHFT Executive within 24 hours.

All staff will take responsibility for reporting potential hazards to the Coordinator as they arise.

OFF-SITE RISK ASSESSMENT AND MANAGEMENT POLICY

For off-site excursions, the Children's/Youths' Programme Coordinator is required to assess the risks of the venue/facilities, develop strategies to minimise them and draft an emergency management plan in the event of an accident happening, using the RAMS form.

The RAMS form is to be filed in case it needs referring to at a later date by staff or Worksafe NZ.

HAZARD IDENTIFICATION

Date:

Hazard		Action		Review
Hazard	Where or What Task	Action	Does the action eliminate, isolate or minimize the risk?	Date of last review

Signature:	

DAILY VENUE/ HAZARD CHECKLIST

To be checked and signed by a member of the team before programme starts. Please hand into the office or slide underneath the window if the office is unattended.

Let the SHFT Executive Officer know if there are any hazards that can't be eliminated or minimised.

Signed_______(Name)_______Date_____

Toilets	Rooms	First Aid Kit	Equipment	Outside
Check Toilet	Check floors for	Check that it is	Ensure all	Check for any
Paper Supplies	spills	where it should	equipment	rubbish or
		be in the	being used is	broken
		kitchen	safe	equipment
Ensure toilets	Check for any	Check that		
are clean	hazardous	there is an		
	materials or	icepack in the		
	equipment	small kitchen		
		fridge, freezer		
		compartment		
Ensure floors	Check fire exits			
are dry	are clear from			
	obstruction			
	Check that			
	furniture is			
	stacked safely			
	Remove any			
	rubbish			
	Check safety			
	plugs are in			
	electrical sockets – there			
	are spares in the office if			
	required			
	Remove any			
	falling hazards			
	ie: flowers on			

Note and hazards identified:

top of flower stands

EMERGENCY RESPONSE PLAN

It is important that all staff, volunteers and facility users at the Hub/Kinmont Hall are aware of the evacuation procedures in the event of a fire or earthquake.

OUR RESPONSE

In the event of a fire:

• We will immediately leave through exterior doors and assemble on the school field.

Staff member, programme leader or principal Hub user to delegate tasks including:

- Press 7 and 9 on alarm pad if alarm hasn't sounded. AEC Monitoring will phone 111. If it is not possible to activate the alarm phone 111 immediately.
- Evacuate people out of nearest exit and take roll of participants (if applicable e.g. if it involves children or youth for which a roll exists).
- Check additional rooms e.g. bathrooms, for participants.
- Activate fire extinguisher if needed.
- Join group at evacuation point and report building is empty.
- No one may leave the muster zone until instructed to do so by ministry leader, service leaders or user group leader.

MEANS OF ESCAPE TO BE MONITORED

Checks of the means of escape will be undertaken at regular intervals to ensure that:

- They are kept clear of obstacles at all times.
- Exit doors are not locked, barred, or blocked so as to prevent occupants from leaving the building at any time.
- Smoke control and fire stop doors are kept closed.
- Passageways which are designed specifically for means of escape from fire are not used as places of storage or places where refuse is allowed to accumulate.
- Flammable liquids or materials shall not be stored near or within any part of the building used as a means of escape from fire.

In the event of an earthquake: Stay inside the building until it is safe to exit.

CHILDREN AND YOUTH

- We will keep children and youth at the programme until able to be released to a parent (or person designated by the parent).
- We will hold an up-to-date record of names and numbers of guardians/carers to be contacted in the event of an emergency.

• It may be necessary to close the programme if we are unable to provide support to children/youth. Leaders are to remain with children/youth until released into care of parent (or person designated by parent.) If the site needs to be evacuated, we will leave a notice where practical, detailing when we left and the names of those who came with us.

LOCK UP PROCEDURES

It is important that there are consistent procedures for securing the premises, confidential material and safety of staff when locking up.

RESPONSIBILITIES:

The SHFT Executive Officer is responsible for:

- Ensuring people are aware of the procedures when locking up the premises and when working alone
- Providing a policy which outlines the lock up procedures
- Making sure all people are aware of their responsibilities when securing the premises

PROCEDURES:

- Ensure that all external doors are locked when leaving the building
- Ensure that all windows are closed.
- Check that the toilets are vacated, windows are closed and lights are off.
- Ensure Alarm is set (if applicable).

EXTERNAL CONTRACTOR HEALTH AND SAFETY AGREEMENT:

All contractors contracted by Saddle Hill Foundation Trust to carry out work on the Hub premises must comply with the health and safety procedures, and requirements as laid out in the Health and Safety at Work Act 2015.

Saddle Hill Foundation Trust reserves the right to inspect the work at any stage. In the event of failure to comply with the Health and Safety at Work Act 2015, Saddle Hill Foundation Trust may ask that the work be stopped until any such failure has been rectified.

The Trust shall not be liable for any costs or loss sustained by the contractor attributable to rectifying any breaches to these rules.

(Name of Contractor and address)

The Contractor hereby acknowledges that:

Injury Reporting – All notifiable injuries or near miss incidents as defined by statute (including dangerous occurrences product contaminations and potential hazard situations must) be reported to the SHFT Executive Officer and logged in the injury register. Injuries are to be treated by qualified first aiders or experienced medical workers and records of treatment maintained.

Sub Contractors – Contractors are responsible for ensuring that any subcontractors they may appoint may receive a copy of this document and comply with the conditions therein. Sub-contractors working on sites will be supervised by a designated supervisor.

Emergency Evacuations – Contractors must ensure they and their workers are familiar with Saddle Hill Foundation Trust emergency evacuation procedures as displayed throughout the premises and comply with evacuation instructions given by fire wardens in the event of an emergency evacuation.

Access – No action will be taken by you, the contractor, or any of your workers to restrict or obstruct access to and from normal places of work and the passage of people and/or vehicles, unless permission is obtained from the Sadlle Hill Foundation Trust Executive Officer; to emergency apparatus e.g. fire fighting equipment, and emergency exits.

Dust and Fume Control – Contractors must inform the health and safety coordinator of all processes that produce dust or fumes, and all statutory provisions must be undertaken

Hazardous Material – Contractors must inform the SHFT Executive Officer of processes or materials of a hazardous nature connected with the contract works prior to the commencement of such work. The contractor must provide secure storage for any such materials. Any storage must comply with legislative requirements

Warning Signs and Notices – Suitable warning signs must be displayed warning of potential hazards.

Security – All contractors are expected to wear company identity badges whilst on site, and register with reception

Statutory Regulations – Contractors must meet each and every one of the obligations imposed on them by statute, statutory regulations, or local authority bylaws, including amendments and replacements to them

Disclaimer – Saddle Hill Foundation Trust shall under no circumstances be liable for any loss, damages, compensation, cost or injury sustained by a contractor or any other person if such loss, damage, compensation, cost or injury is attributable either wholly or in part to the failure by such persons to observe these rules. The contractor will provide a copy of previous work history upon request

Declaration

I hereby agree that I have read and understand the above conditions, and both my workers and I will comply with all health and safety standards as required.

Signed:	
On behalf of:	
Date:	

ALCOHOL, SMOKING AND DRUGS POLICY

The use of alcohol and drugs, (non-medical), including smoking and vaping causes addiction and diseases and greatly impairs the ability and the judgment of the individual.

Medication should be taken only by the person for whom it has been prescribed. Written consent to administer medication to children (if required) should be sought from parents/guardians.

Saddle Hill Foundation Trust is committed to maintaining an alcohol-free and non-prescription drug free environment within the Hub premises and its grounds. An exception applies where alcohol is used for the purposes of toasts at celebratory events.

All reasonable and practicable steps are to be taken to ensure that no person consumes alcohol within the Hub or its grounds at any time or any day; nor at any official church activity such as worship events, camps, etc

The use of alcohol at Church functions held at other premises is prohibited unless prior approval has been provided by Leadership Team and is only to be consumed in moderation.

Organisations or individuals using church facilities must agree to comply with this alcohol-free policy as a condition of use.

In the case of breaches to this policy, then in the first instance notify the designated leader in charge. The leader is required to report this matter to the SHFT Executive Officer.

All Church buildings are strictly NO SMOKING.

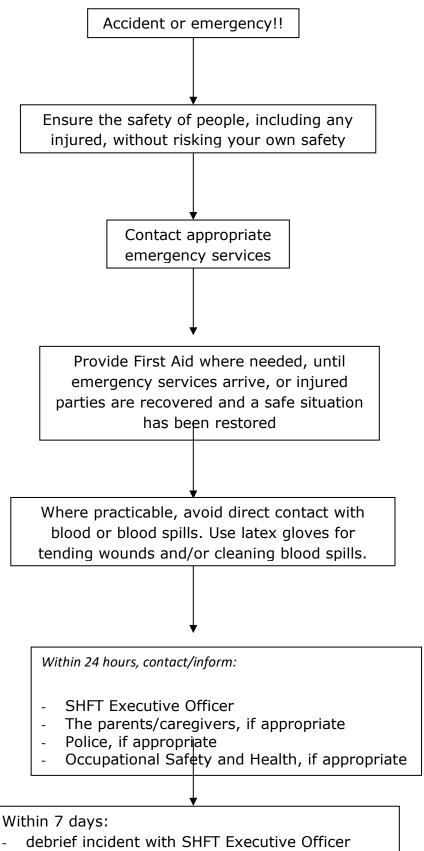
USE OF CANDLE POLICY

Candles are a fire risk.

The Hub/Kinmont Hall premises are valuable and historic buildings. We wish to preserve them and maintain them in their present state.

The use of candles in any situation is prohibited

ACCIDENT AND EMERGENCY PROCEDURE



- complete Incident Reporting Form

FIRST AID PROCEDURES:

A copy of this document should be placed in all first aid kits.

- Wash hands and lower arms thoroughly before and after treating patient.
- Surgical gloves must be worn before dealing with any wound involving blood.
- Gloves and other materials that have come into contact with blood should be placed in a plastic bag, sealed and placed in appropriate rubbish bin.
- Wash wounds
- Cover wound as necessary.
- Record all first aid administered in the First Aid notebook. (One in each kit)

First aid kits are kept:

- 1. In the cleaning cupboard in the kitchen at the Hub
- 2. In each of the Youth East Taieri vans

First Aid Kits are kept up to date by the SHFT Executive Officer. Please let him/her know if supplies are low.

HYGIENE POLICY

- Always Wash Hands before:
 - Preparing food
 - Eating
 - After using the toilet
 - Before and after giving first aid
- Always wear adequate footwear to prevent puncture wounds to feet.
- Ensure cuts and grazes are covered.
- Wear disposable gloves when giving first aid or dealing with faeces or blood. Gloves should be disposed of after one use in an appropriate rubbish bin.
- Blood spills should be mopped up with paper towels, then cleaned thoroughly.
- Soiled instruments should have excess blood or faeces rinsed off in running water, before soaking for twenty minutes in bleach solution.
 - Please use the tub or bucket in the storeroom, or basin in one of the toilet areas.
 - Please do not use the kitchen area for cleaning up blood and faecal matter.

MEDICATION POLICY

In the event of injury, sickness, allergies or stings, children/youth may be given Paracetamol, or Antihistamine. In the event of administering any of these medications leaders are advised to contact parents to alert them of the child's/youth's injury and seek permission to administer the medication. If the parent is uncontactable, the leader may administer the above medication and record the dosage and time it was given.

No other medication will be administered without parent approval. Parents are asked to alert staff to any medical conditions, allergies or medication requirements on the enrolment form.

Parents requiring their children/youth to receive medication should complete the Medication Consent Form.

Any medication administered is to be recorded on the Medication Administered Record, held by the programme leader.

MEDICATION CONSENT FORM

I give consent for medication to be administere	d to:
Please supply details of medication and dosage	etc:
Note: Please hand any medication directly to the	he Programme Supervisor
Signed (parent, caregiver)	Date:

MEDICATION ADMINISTERED RECORD

Details to be completed by Supervisor:

Date	Time	Administered to:	Name of Medication	Dosage	Administered by (2 people)

REPORTING ACCIDENTS AND INCIDENTS POLICY AND FORM

An incident that requires reporting is any event which involves any of the following:

- accident; moderate or serious injuries
- moderate or significant damage to property or equipment
- 'near misses' which may have caused any of the above
- serious or ongoing breach by leaders of our "Code of Conduct"
- behaviour or circumstances which threaten the safety of leaders or programme participants
- complaints
- unresolved disputes
- allegations of misconduct or abuse by our staff and leaders

Incidents and accidents should be reported and recorded in writing by the leader and then to the SHFT Executive Officer within 24 hours

	person reporting ind orted	cident:			-
Person receiving Report:				Date:	
Type of in	ncident <i>(circle)</i>				
Accident	Personal Injury	Safety Concerns	Complaint	Other	
Date/s of	incident:				
Incident/	issue description:				
Who was involved?_					
Where did happen?					
What happened?)				
Names of witnesses?					
	ou respond to/deal wit	th the children/youth			
Give detail	s of follow-up with pa	rents/caregivers			
Has this ty	e of incident? The of incident been in		Yes	off <i>or</i> Ongoing? No No	

If "no", what needs to be done?

Medical Action Plan

Allergies & Medical Conditions

Name of your Child:	Date:
Father's Name:	Phone Number:
Mother's Name:	Phone Number:
Emergency Contact Details Name:	Phone Number:
Doctor's Name:	
Please select your child's medical con ☐ Allergies ☐ Asthma ☐ Other (please be specific):	dition:
please go on to complete the Asthma	The Alternate Medical Condition section

2. Does your child have an Epi-pen?
Yes or No (Please circle one) 3. Please give us instructions on how you would like the Epi-pen administered:
☐ If checked, give epinephrine ONLY if my child does not respond
to antihistamine.
☐ If checked, give epinephrine immediately for ANY symptoms if my child
was exposed to the allergen.
\square If checked, give epinephrine immediately for ANY symptoms if the allergen was likely eaten.
☐ If checked, give epinephrine immediately if the allergen was definitely
eaten, even if no symptoms are noted.
4. What is the Medical Action Plan recommended by your child's Doctor? (What
do you normally do when your child has an episode?)
5. Please give us any other details that we should be aware of, in order to care
for your child's allergic reaction on-site:

Please be informed that our policy on Epi-pens requires that the camp leader know the location of it, and that the pen be stored out of reach of other children.
know the location of it, and that the pen be stored out of reach of other children.
Asthma
1. Please select the Asthma Type that your child experiences:
☐ Allergy-Induced Asthma
☐ Exercise-Induced Asthma
□ Cough-Variant Asthma
□ Night-time Asthma
2. Please indicate the frequency that your child uses his/her inhaler:
□ Daily
☐ Emergency
□ Both
3. Explain your child's Asthma triggers:

4. List the controller medications prescribed to your child, and the usual dosage.
5. Does your child suffer from Asthma attacks? Yes or No (Please circle one)
6. What symptoms are usually present when your child is experiencing an Asthma attack?
7. What is the Medical Action Plan recommended by your child's Doctor? (What do you normally do when your child has an episode?)

8. Please give us any other details that we should be aware of regarding your child's medical condition:
Alternate Medical Condition 1. Please inform us of your child's medical condition:

2. List the medication prescribed to your child, and t	he usual dosage:
3. What is the Medical Action Plan recommended by do you normally do when your child has an episode?	•
4. Please give us any other details that we should be child's medical condition:	e aware of regarding your
*If there is any additional information you would this on a separate page and include it with this form	· ·
Page Break Medication Release Form	
(To be completed by Parent or Guardian) Name of Student:	Age of Student:
Name of Medication:	
Date(s) to be given:	Time(s) to be given:
Dosage: Illness/Condition being treated:	
Additional Instructions or Comments:	

I hereby give authorisation for the staff and volunteers of the Saddle Hill Foundation Trust to administer the above medication according to the above

instructions. I recognise that the staff will not be held liable for any illness or injury resulting from the administration of this medication, and will not be held responsible for reimbursement of medical expenses resulting from such action. I understand that medication must be in the container in which it was prescribed and must be specifically for the child named.

Signature of Parent or Guardian	Date
	

For SHFT Staff Use Only

DATE	TIME	DOSAGE	MEDICATION	ADMINISTERED BY

Health & Safety for Covid 19 and SHFT/YET Youth Programmes

- Everyone will hand sanitise on the way into the building.
- Everyone will sign in and out to record whoever comes into the Hub for contact tracing. Sign in tables will be available in the entrance to the Hub. Clean Pen/Dirty Pen" system to be used. Refer to "Clean Pen/Dirty Pen Policy below.
- Supper will not be provided under Level 2 restrictions where people need to be seated, spaced appropriately and have a single server.
- If people have cough or runny nose they need to stay home and consult their GP or Healthline, regarding whether they should be tested for Covid-19. (No shame in that as a nation we simply need to detect and isolate every case.)
- If a person chooses to attend that is showing Covid-19 or Flu like symptoms, the person will be asked to leave.
- Personal hygiene (hand washing and cough etiquette) and physical distancing where appropriate are our key tools to keep safe.
 - No hugs or handshakes allowed.
- Extra cleaning processes have been established. Refer to "Cleaning & Sanitising Procedure" below.
- A safety briefing will be held with leaders prior to session starting.
- Communicate to parents not to bring their child/ren if they are sick
- Remind children of cough and sneeze etiquette at each programme
- All children to hand sanitise when they arrive and leave and after they go to toilet
- Only use games and activities that don't require lots of hands touching the same piece of equipment
- Children will be signed in by parents upon arrival and an attendance roll will be kept

• Travel off-site is permitted during level 2 as per the Ministry of Transport Covid-19 guidelines (see Transport section at end of this policy). Drivers are to wear face coverings. Vehicles will be cleaned after use using anti-bacterial wipes and disinfectant/sanitising spray. All passengers will be on register as per programme attendance sheets.

Clean Pen/Dirty Pen Procedure:

Separate containers to be provided for clean pens and dirty pens. The dirty pens are to be cleaned with a paper towel and disinfectant and returned to the clean pen container.

Cleaning & Sanitising Procedure:

During this time, we need to be hyper vigilant about cleanliness and personal hygiene, in order to keep our most vulnerable people safe.

If you are using the kitchen, especially for hospitality after services or meetings, please ensure that you practice safe cleaning practices:

Before you enter the kitchen wash your hands with soap and water. If possible, use hand sanitiser once you are in the kitchen. Use gloves where possible. Dispose of gloves in the rubbish bin. Wash hands after removing gloves. After any contamination, ensure that you wash hands and/or replace gloves.

Sanitise the following areas, by using disinfectant spray and wiping with a paper towel or use a clean chux cloth and put it straight into the bucket to be hot washed later – please do not re use cloths:

- All benchtops
- All drawer and cupboard door handles
- Microwave door handle
- Fridge door handle
- Zip tap
- Sink taps
- Lightswitch
- Teapots
- Coffee Plungers
- Coffee Urn tap
- Tables

Please ensure that the dishes in the dishwasher are clean before you empty it.

All used tea towels, hand towels and dishcloths to be left in white bin to be hot washed.

Door handles to be cleaned with sanitiser and paper towels, by a designated person after use.

People with medical conditions and compromised immunity

It is the responsibility of parent/caregiver of programme participants to inform the Key Leader of any underlying condition which mean said participant is considered to be high risk.

The main reason for COVID-19 becoming a severe illness is the presence of underlying medical conditions, especially if these conditions are not well controlled.

Relevant medical conditions include:

- chronic lung disease such as cystic fibrosis, bronchiectasis, chronic obstructive respiratory disease and emphysema, severe asthma that needs multiple medications and medical care
- serious heart conditions such as congestive heart failure
- hypertension that isn't well controlled
- diabetes that isn't well controlled
- chronic kidnev disease
- liver disease.

Conditions and treatments that weaken the immune system include:

- having chemotherapy or radiotherapy
- bone marrow or organ transplantation
- some blood cancers
- immune deficiencies including HIV infection
- immunity weakening medications such as high-dose corticosteroids and disease-modifying anti-rheumatic drugs that treat inflammatory forms of arthritis.

Talk with your GP or other health service provider about whether your medical condition means you are more at risk of severe illness from COVID-19 and how to best manage your condition.

You should continue to access care for your medical condition. Health services such as your GP and hospitals have measures in place to keep both you and staff safe.

How to wash your hands properly

Follow these steps to wash your hands properly:

- 1. Wet hands with running water.
- 2. Apply enough soap to cover wet hands.
- 3. Scrub all surfaces of the hands including the back of hands, between fingers and under nails for at least 20 seconds.
- 4. Rinse thoroughly with running water.
- 5. Dry hands with a clean cloth, single-use towel or blow-drier.

How to use hand sanitiser

The same goes for hand sanitiser, use a sanitiser that contains at least 60% alcohol. Rub it into your hands for at least 20 seconds to ensure full coverage.

When should you wash your hands?

Wash your hands regularly, especially:

- · after blowing your nose, coughing or sneezing
- · after visiting a public space, including public transport, markets and places of worship
- · after touching surfaces outside of the home
- after touching money
- · before, during and after caring for a sick or vulnerable person
- before and after eating.

Always wash your hands:

- after using the toilet
- before and after eating
- after handling rubbish
- · after touching animals and pets
- · after changing babies' nappies or helping children use the toilet
- · when your hands are visibly dirty.

Do I need to use warm water to wash my hands?

No, you can use any temperature of water to wash your hands. Cold water and warm water both kill germs and viruses — as long as you use soap.

Which is better: washing your hands or using hand sanitiser?

Handwashing with soap and water or using hand sanitiser, when done correctly, are both highly effective at killing most germs and viruses. Hand sanitiser is often more convenient when you are outside of the home, but can be expensive or difficult to find in emergency contexts.

Do I need to dry my hands with a towel?

Germs spread more easily from wet skin than from dry skin, so drying your hands completely is an important step. Paper towels or clean cloths are the most effective way to remove germs without spreading them to other surfaces. (https://covid19.govt.nz/covid-19/how-were-uniting/wash-your-hands/)

- Everyone to maintain 1m physical distancing rule
- Cough and sneeze etiquette to be followed

Cough or sneeze into your elbow

It keeps the virus off your hands, so you won't spread it to other people and make them sick too.

Why do it?

Coughing or sneezing into your elbow catches the droplets and stops them getting onto your hands.

Tissues

Put any used tissues in the bin or a bag immediately. Then wash your hands thoroughly. Then dry.

How it spreads

Like the flu, COVID-19 can be transmitted from person to person. The scientific evidence confirms that COVID-19 is spread by droplets. When an infected person coughs, sneezes or talks, they may generate droplets containing the virus. These droplets are too large to stay in the air for long, so they quickly settle on surrounding surfaces. If other people touch these surfaces they may get sick.

Facemasks

For most people facemasks are not recommended. Facemasks play an important role in clinical settings, such as hospitals. For people with symptoms of an acute respiratory infection, there may be benefit in wearing a facemask to reduce the spread of infection to other people.

(https://covid19.govt.nz/covid-19/how-were-uniting/cough-or-sneeze-into-your-elbow/)

Guidelines for Transport: private car, rental vehicles, small passenger services (taxis & rideshare), car share

https://www.transport.govt.nz/about-us/covid-19/?fbclid=IwAR1TZi-7JSK9aUovw3LFHF8iadOLE62EXLa wyuOs79zUhsxV-NAgbEZ794

Level 2 travel between regions:

For travel between all other regions, you can travel, but do it in a safe way and remember to keep a record of your journey.

You should not travel if you: have been requested to self-isolate/quarantine, have symptoms of COVID-19, or are awaiting COVID-19 test results.

You cannot travel, if the travel would breach an order/direction made under the COVID-19 Public Health Response Act 2020 or the Health Act 1956. This will likely be the case if: you have arrived in New Zealand from overseas in the last 14 days, or you have otherwise individually received (from a Medical Officer of Health) a direction under s 70(1)(f) of the Health Act 1956.

Public health measures apply - except for private vehicles.

Physical distancing applies on services departing or arriving in Auckland – except for private vehicles.

Vehicles other than private vehicles should be cleaned regularly in accordance with MOH guidance.

Drivers of small passenger vehicles must wear a face covering, unless exempt. Passengers of small passenger vehicles are not required to wear a face covering, but are encouraged to wear face coverings where practicable. For more information please see the **Ministry of Health's guidance on face**

coverings.

QR codes must be displayed on small passenger services (unless the operator requires all passengers to provide their contact details (name and phone number) to use the service. Passengers are encouraged to scan QR codes using the NZ COVID Tracer App, or manually record their travel.

Saddle Hill Foundation Trust Driving and Van Policy:

Drivers for the Saddle Hill Foundation Trust or YET events and YET vans are to be guided by the following requirements:

Principles:

- 1. The lives of our young people and leaders are extremely valuable and must be protected by the highest standard of driving. Driving competently and safely is essential for all Youth Group activities.
- 2. Drivers must be a good example to young people of how to drive responsibly.
- 3. Drivers must take full responsibility for their own actions.

Driving Policy (which includes using YET vans):

- 1. All YET drivers must hold a full NZ driver's license (we prefer drivers to be over 25 when driving the YET vans but we do have insurance in place for under 25 – please check with SHFT Executive Officer first).
- 2. Drivers are to be free from alcohol, non-medicinal drugs and any medicinal drugs that might impair driving at all times.
- 3. A police check may be required to inform SHFT/YET of any driving convictions. Anyone with a history of criminal driving conviction must complete the following steps before driving for SHFT/YET:
 - a. Discuss with the SHFT Executive Officer their prior convictions.
 - b. Go on a drive with the SHFT Executive Officer to evaluate driving capabilities.
- 4. Saddle Hill Foundation Trust drivers must adhere to the NZ road code (whether you agree with it or not). Drivers are responsible for payment of any traffic infringements incurred by them while driving on YET events or in YET vans.
- 5. Reckless driving of any form must not occur.
- 6. The driver is responsible for all passengers under 18 years old in their vehicle make sure young people behave appropriately. Seat belts must be worn at all times and no overloading (i.e. one youth per seat belt).
- 7. The vehicle used must be road worthy with current WOF, registration and seatbelts and it is the driver's responsibility to check these are current before driving (especially if it is not your vehicle).

- 8. All accidents, near misses (incidents), or irresponsible driving must be reported to the Key Leader who will follow the appropriate steps. In the case of deliberate recklessness, the driver may be asked to stand down from driving at YET for a period of time determined by the SHFT Executive Officer.
- 9. You may be required at times to drive vehicles that are not yours. Please remember this: **they are NOT yours!** When driving someone else's vehicle drive safely with even more care than normal. You will be responsible to pay any excess resulting from any accidents to the vehicle you are driving.
- 10. YET vans are to be used for youth activities when available. When two youth activities occur at the same time use of the vans will be at the discretion of the SHFT Executive Officer. Book vans through the SHFT Executive Officer.
- 11. When using the YET vans make sure the logbook is filled out correctly (if unsure check with the Key Leader) and return the vans to the East Taieri Church upper car park.

I have read and agree to uphold the Saddle Hill Foundation Trust Van Policy.

Signed	
	Date
Name (please print)	
Once completed please return to the SHFT Ex	ecutive Officer

EDUCATION

FOR LEADERS

Those working with children/youth will have a clear understanding of the Safety and Protection policy. As outlined in the Appointment and Recruitment policy, orientation and training in regard to these policies will be carried out with all new staff and at the beginning of each new year. This will be organised by the programme leaders.

FOR CHILDREN, YOUTH, PARENTS, CHURCH MEMBERS

It is the responsibility of the Ministry Leadership Team and the children's/youth ministry leaders, to assure and inform people of the policies in place to protect them.

Leaders will be initially introduced to the Safety and Protection policy when they start any new role in this area.

Children, Youth, Parents and Church Members will be informed that the policies are available from the church office.

REGULAR UPDATES

It is the responsibility of the Church Council and Ministry Leadership Team to ensure that this Safety policy is kept up to date with the latest policies and education/information sessions for all involved.