

Muhlenberg College

Risk Protocols for Programs Involving Children

(rev. 3.2.12)

These represent minimum requirements for programs involving children within the Muhlenberg environment. **“Children” refers to individuals under the age of eighteen (18) not enrolled as full-time Muhlenberg Students.** The Protocols are organized into the following sections:

I. Recommended Practices for All Programs - (page 2)

II. Special Considerations – (page 3)

This section addresses programs involving Athletic Facilities, Laboratories, Art Studios, Theatre and Scene Shops, Computing Labs, Trexler Library, or Hazardous Areas.

III. Shorter duration and/or Low Frequency Programs - (page 4)

This section addresses any program that is less than six (6) hours and occurs less than three (3) times per semester or summer.

IV. College Sponsored Programs

Programs developed, managed or organized by Muhlenberg staff or students fall under this category. Programs developed, managed or organized in conjunction with community partners also fit within this category. These programs shall undergo a review by a member of President’s Staff and the Treasurer’s Office (Risk Management) in order to be considered College-sponsored.

A. Longer duration programs not involving overnight stays – (page 5)

B. Longer duration programs involving overnight stays – (page 6)

V. Third Party Independently Managed/Organized Programs

This section addresses instances in which a third party is simply making use of the College’s facilities for its independently managed program(s). The College has no vested interest in organizing, managing, sponsoring or participating in such programs.

A. Longer duration programs not involving overnight stays – (page 9)

B. Longer duration programs involving overnight stays – (page 10)

I. Recommended Practices for All Programs.

- Program directors are encouraged to create a full schedule of activities to avoid down time.
- Provide identification (ID tags, t-shirts, etc.) for program participants.
- Provide and review **Key Indicators of Child Sexual Abuse¹** with staff and volunteers including the list of contact numbers for reporting potential abuse incidents.
- Check pertinent facilities to make sure there are not any unsafe conditions such as easy access to hazardous areas, blocked exits, etc.
- Review emergency procedures and contact information with all Staff members.
- Ensure that all Staff understand appropriate child contact.
- Employ at least a few Staff certified in First Aid and CPR.
- Make sure Staff know the locations of all defibrillators, fire extinguishers and emergency exits.
- Parents or legal guardians of children participating in programs should be reminded of the fact that their child may inadvertently be exposed to adult topics and activities that pervade the College environment.
- Alcohol is not permitted at any event/program where children are the focus.
- Program should establish and communicate appropriate behaviors, permissible activities and spatial boundaries with program participants.
- Staff must account for children when utilizing bathrooms and ensure that no children are left alone with adults or with other children of a significantly greater age.
- Transportation - College Trip and Vehicle Transportation Policies must be followed:
 - Programs should include the establishment of a safe and orderly location for direct transfer of child between parent and staff. Programs should include clear instructions for when and where children are to be dropped-off and picked-up.
 - Children are not to be transported in College owned, rented or hired 12-15 passenger vans as per PA law.
 - Third party transportation companies utilized as part of College programs must provide the College with a Certificate of Insurance naming the College as an additional insured. Certificate of Insurance should be reviewed by Treasurer's Office prior to hire.

¹ Document can be obtained from the Treasurer's Office

II. Special Considerations.

- 1) Parents should complete a **Medical and Release Form²** for programs which involve children participating in the following activities:
 - a) Athletics
 - b) Overnight residence
 - c) Meals
 - d) Physical Theatre/Dance activities
 - e) Laboratory and Art studio activities
 - f) Any other activity for which parents should disclose their children's medical conditions and/or history.
- 2) Athletic Facilities
 - a) Two adults must be present if any child or children are making use of the Life Sports Center locker room(s).
 - b) The pool area may only be accessed when a certified lifeguard is on duty.
- 3) Technology labs
 - a) Staff should be cognizant of the fact that computing labs may not employ the same level "parental" controls and restrictions children experience at their home.
- 4) Laboratories, Art studios, and Theatre scene and costume shops
 - a) Programs involving activities in these areas require the presence of an adult familiar with and responsible for the safety protocols specific to these particular areas.
- 5) Computing labs
 - a) Staff need to be familiar with the Electronic Communication Policy which governs the use of all College owned and leased technology.
- 6) Trexler Library
 - a) Supervisors/chaperones should ensure that participants are given instruction as to the acceptable behaviors associated with each level and/or area of the Library.
- 7) Hazardous Areas
 - a) Certain areas of the campus may be considered "off-limits" due to the presence of hazards associated with materials, equipment and/or activities. (e.g. construction areas)

² Document can be obtained from the Treasurer's Office

III. Short Duration – Low Frequency Programs

Defined as programs that are less than six (6) hours in a given day, and do not occur more than twice in a given semester, with the same participants. These programs may be planned and managed in collaboration with community partners.

- 1) Programs need to be reviewed/approved at the departmental level. Programs need not undergo review by President’s Staff member and Treasurer’s Office to be considered College-sponsored unless the program involves higher risks than that of a general academic program.
- 2) Staff are not required to undergo background checks. **[But all college faculty and staff do undergo background checks before being hired, right? So does this apply to community partners only? Can this be clarified?]**
- 3) Parental Consent Forms only need to be utilized if the participants did not have to complete a “field trip form” with their third party group.
- 4) Program/activity must involve at least one Staff person per sixteen (16) children at all times. A different ratio may be appropriate depending upon the activities and age(s) of participants.
- 5) Campus Safety shall be informed of the location of the activities and the number of participants. This may be accomplished by simply having the basic event information added to the R25 system.

IV. College Sponsored Programs

A. Longer Duration Programs on or off campus not involving overnight stays.

- 1) General elements
 - a) Parents or legal guardians of participating children should complete and sign a **Parental Consent Form³**.
 - b) See *Special Considerations* section for **Medical and Release Form⁴** requirements.
 - c) A roster of participants and an itinerary shall be provided to Campus Safety.
 - d) Staff (adult supervisors, chaperones and volunteers)
 - (i) Staff includes, but is not limited to, adults participating in the program as coaches, counselors, directors, leaders or chaperones. Staff may be College employees, Muhlenberg students or representatives from third party partners.

³ Document can be obtained from the Treasurer’s Office

⁴ Document can be obtained from the Treasurer’s Office

(ii) All Staff should have undergone the following background checks within the last three (3) years before being eligible to participate in programs involving children. Results of checks should be presented to Treasurer's Office for review prior to conducting any program or activities. The Human Resources Office can run these checks for Muhlenberg employees, students, and volunteers. Expenses for such checks will be billed to the applicable department.

- a) PA Child Abuse History Clearance
- b) PA Criminal Background Check

(iii) Staff should be familiar with emergency exits and reporting areas in the event of a building evacuation.

e) Program/activity should involve at least one Staff person per ten (10) children at all times. A different ratio may be appropriate depending upon the activities and age(s) of participants.

(i) A minimum of two adult Staff should be present with children during all programming times, including check-in and check-out times.

(ii) Staff is not to have any direct or electronic contact with participating children other than contacts necessary and limited to the program.

2) Off-Campus

(a) College faculty, staff and/or students with a desire to participate in such a program should gather information regarding the program and the associated safety aspects. Information can be gathered using the **Program Questionnaire**⁵ form. The information should then be forwarded to the appropriate member of President's Staff and the Treasurer's Office for review.

(b) Programs only need to be reviewed once in a given fiscal year.

(c) Programs reviewed and approved in prior fiscal year need not undergo a full review. Accordingly, a College employee or student should simply request information regarding any changes in programming, etc.

B. Longer Duration Programs involving overnight stays.

1) Parents or legal guardians of participating children should complete and sign a **Parental Consent Form**⁶.

2) See *Special Considerations* section for **Medical and Release Form**⁷ requirements.

⁵ Document can be obtained from the Treasurer's Office

⁶ Document can be obtained from the Treasurer's Office

⁷ Document can be obtained from the Treasurer's Office

- 3) A roster of participants and an itinerary shall be provided to Campus Safety.
- 4) Staff (adult supervisors, chaperones and volunteers)
 - (a) Staff includes, but is not limited to, adults participating in the program as coaches, counselors, directors, leaders or chaperones. Staff may be College employees, Muhlenberg students or representatives from third party partners.
 - (b) All Staff must have undergone the following background checks within the last three (3) years before being eligible to participate in programs involving children. Results of checks should be presented to Treasurer's Office for review prior to conducting any program or activities. The Human Resources Office can run these checks for Muhlenberg employees, students, and volunteers. Expenses for such checks will be billed to the applicable department.
 - (i) PA Child Abuse History Clearance
 - (ii) PA Criminal Background Check
 - (c) Staff should be familiar with emergency exits and reporting areas in the event of a building evacuation.
- 5) Program/activity should involve at least one Staff person per ten (10) children at all times. A different ratio may be appropriate depending upon the activities and age(s) of participants.
 - (a) A minimum of two adult Staff must be present with children during all programming times, including check-in and check-out times.
 - (b) Staff is not to have any direct or electronic contact with participating children other than contacts necessary and limited to the program.
- 6) Off-Campus
 - (a) College faculty, staff and/or students with a desire to participate in such a program should gather information regarding the program and the associated safety aspects. Information can be gathered using the **Program Questionnaire**⁸ form. The information should then be forwarded to the appropriate member of President's Staff and the Treasurer's Office for review.
- 7) Spaces and Places
 - (a) College-Owned Housing
 - (i) Residential Services and Campus Safety offices should review plans for any programs involving overnight stays in order to ensure that adequate safety and security measures are employed. Such plans should be reviewed and approved prior to any requests for facilities reservations.

⁸ Document can be obtained from the Treasurer's Office

- (ii) Programs involving overnight stays by participants under the age of 14 should include a curfew/lights-out time. Designated supervisors and/or chaperones should conduct a roll call or bed check at time of such curfew/lights-out or at a designated evening time for camps exclusively involving children age 14 and older. Hourly hall checks are *recommended* between lights-out and 3 a.m.
 - (iii) Staff should be familiar with emergency exits and reporting areas in the event of a building evacuation. These items should be reviewed with all overnight guests.
 - (iv) Staff must contact Campus Safety immediately if any child is unaccounted for at roll call.
 - (v) Staff must account for children when utilizing bathrooms and showers and ensure that no children are left alone with adults or with other children of a significantly greater age.
- (b) Sleeping
- (i) Female Staff should conduct the bed checks for female participant rooms and male Staff are to check male participant rooms.
 - (ii) Children age eight (8) and under should sleep on the bottom bunk of bunk beds.

V. Third Party Independently Managed/Organized Programs

A. Longer Duration Programs *not* involving overnight stays

- 1) Third parties must first complete a **Conference and Event Services Application⁹**. The Application requires third parties to describe the safety and wellness protocols that will be utilized throughout their program. College representatives will review the Application to ensure that acceptable safety measures are part of the proposed program.
 - (i) Program/activity should involve at least one Staff person per ten (10) children at all times. A different ratio may be appropriate depending upon the activities and age(s) of participants.
 - (ii) A minimum of two adult Staff should be present with children during all programming times, including check-in and check-out times.
 - (iii) Third parties should develop and follow a detailed program itinerary.
- 2) Third parties conducting programs involving children on College property must provide a Certificate of Insurance naming the College as an additional insured. Certificate must show evidence of general liability and sexual molestation

⁹ Application can be accessed via the College website or at Seeger's Union.

coverage. The College reserves the right to evaluate the limits and carriers presented on such Certificates and may require third parties to increase limits or add coverage(s) depending upon the nature of the proposed program/activities.

- 3) Third party should provide written assurance that all adults participating in program have passed the following background checks:
 - (i) PA Child Abuse History Clearance
 - (ii) PA Criminal Background Check
- 4) Campus Safety shall be informed of the location of the activities and the number of participants. This may be accomplished by simply having the basic event information added to the R25 system.
- 5) Staff should be familiar with emergency exits and reporting areas in the event of a building evacuation.
- 6) College staff will orient third party Staff with on-campus safety aspects relevant to the program. Said safety aspects will include the locations of emergency exits, defibrillators, fire extinguishers and alarms as well as emergency contact information.
- 7) Third parties are to be given a copy of the Risk Protocols for Programs Involving Children. Third parties should provide written acknowledgement of receipt of the Protocols
- 8) Third parties should be encouraged to review protocols for College Managed/Organized Programs contained in this document.

B. Longer duration programs involving overnight stays

- 1) A roster of participants and an itinerary shall be provided to Campus Safety.
- 2) Staff should be familiar with emergency exits and reporting areas in the event of a building evacuation.
- 3) Program/activity should involve at least one Staff person per ten (10) children at all times. A different ratio may be appropriate depending upon the activities and age(s) of participants.
- 4) A minimum of two adult Staff must be present with children during all programming times, including check-in and check-out times.
- 5) Third parties must first complete a **Conference and Event Services Application¹⁰**. The Application requires third parties to describe the safety and wellness protocols that will be utilized throughout their program. College representatives will review the Application to ensure that acceptable safety measures are part of the proposed program.

¹⁰ Application can be accessed via the College website or at Seeger's Union.

- 6) Third parties conducting programs involving children on College property must provide a Certificate of Insurance naming the College as an additional insured. Certificate must show evidence of general liability and sexual molestation coverage. The College reserves the right to evaluate the limits and carriers presented on such Certificates and may require third parties to increase limits or add coverage(s) depending upon the nature of the proposed program/activities.
- 7) Third party should provide written assurance that all adults participating in program have passed the following background checks:
 - (a) PA Child Abuse History Clearance
 - (b) PA Criminal Background Check
- 8) Third parties should develop and follow a detailed program itinerary.
- 9) Program/activity should involve at least one Staff person per ten (10) children at all times. A different ratio may be appropriate depending upon the activities and age(s) of participants.
 - (a) A minimum of two adult Staff must be present with children during all programming times, including check-in and check-out times.
- 10) College staff will orient third party Staff with on-campus safety aspects relevant to the program. Said safety aspects will include the locations of emergency exits, defibrillators, fire extinguishers and alarms as well as emergency contact information.
- 11) Third parties are to be given a copy of the Risk Protocols for Programs Involving Children. Third parties should provide written acknowledgement of receipt of the Protocols
- 12) Third parties should be encouraged to review protocols for College Managed/Organized Programs contained in this document.
- 13) Spaces and Places - College-Owned Housing
 - (a) Residential Services and Campus Safety offices should review plans for any programs involving overnight stays in order to ensure that adequate safety and security measures are employed. Such plans should be reviewed and approved prior to any requests for facilities reservations.
 - (b) Programs involving overnight stays by participants under the age of 14 should include a curfew/lights-out time. Designated supervisors and/or chaperones should conduct a roll call or bed check at time of such curfew/lights-out or at a designated evening time for camps exclusively involving children age 14 and older. Hourly hall checks are *recommended* between lights-out and 3 a.m.
 - (c) Staff should be familiar with emergency exits and reporting areas in the event of a building evacuation. These items should be reviewed with all overnight guests.
 - (d) Staff must contact Campus Safety immediately if any child is unaccounted for at roll call.

- (e) Staff should account for children when utilizing bathrooms and showers and ensure that no children are left alone with adults or with other children of a significantly greater age.
- (f) Sleeping
 - (i) Female Staff should conduct the bed checks for female participant rooms and male Staff are to check male participant rooms.
 - (ii) Children age eight (8) and under should sleep on the bottom bunk of bunk beds.

Muhlenberg College

Children's Program Questionnaire

The questionnaire is designed to help gather information regarding third party children's programs that take place off-campus. The purpose is to ensure that Muhlenberg is partnering with community organizations conducting safe and well managed programs for children.

Please answer the following questions:

1. Are staff and volunteers required to undergo background checks? If so, how often are background checks conducted for an individual?
2. Would Muhlenberg students or staff be required to undergo background checks in order to participate in the program(s)?
3. Does the organization have protocols designed to minimize potential for child abuse/molestation? If so, please describe.
4. Does the organization employ standards for appropriate interactions with children? If so, are all staff and volunteers trained regarding these standards?
5. Does the organization maintain insurance coverage for sexual molestation?
6. Does the organization have procedures or guidelines for reporting inappropriate behavior or contact with children?
7. What is the typical ratio of children to staff during children's programs?
8. What activities are involved in the children's programs?
9. Does the organization have first aid/CPR trained staff present during children's programs?
10. Have there been any incidents involving inappropriate contact or interactions with children?

Key Indicators of Child Sexual Abuse

Employees, students and volunteers of the College should review the following list of Indicators.

Anyone witnessing suspicious behavior is encouraged to report it promptly. Reports can be made to Campus Safety at 484-664-3112 or Allentown Police at 911. Reports can also be made to the PA Department of Public Welfare at 800-923-0313.

Behavioral indicators:

- inappropriate knowledge of sexual acts
- sexual play or sexually explicit drawings
- Age-inappropriate behavior including seductive or masturbatory actions
- Unexplained late arrivals and absences from activities
- Wearing two or more sets of clothing at the same time (“double dressing”) and inappropriate dress for weather conditions
- Significant changes in weight
- Overt changes in signs of affection
- Significant personality changes (a shy child becomes outspoken and vice versa)

Observable physical indicators:

- difficulty walking or sitting
- torn clothing
- stained or bloodied underwear
- pain or itching in genital area
- marked changes in weight

Suspicious behavior by adults:

- Close personal interactions with children such as touching, embracing, and sharing intimate moments
- Special one-on-one relationships with particular children
- Abnormal relationships with employee peer group
- Private interactions with children that could lead to “he-said-she-said” situations
- Relationships best described as socializing with children, particularly if adults are meeting with children off-campus
- Joke-telling that includes off-color material or remarks
- Flirtatious behavior with students

Muhlenberg College
Program/Activity Parental Consent Form

Participant Name: _____ Age: _____

Address: _____

Phone Number: _____

Emergency Contact Information

Name: _____

Phone Number: _____

Informed Consent/Assumption of Risks

My child desires to participate in the _____ (“Activity”). The details of the Activity have been described to me and all of my questions have been answered to my satisfaction. I attest that my child is in good physical health and fully capable of participating in all aspects of the Activity. I hereby acknowledge that my child is participating the Activity which may involve a significant risk of bodily injury ranging in severity from minor to long-term catastrophic up to and including death, or damage to property and others. I hereby expressly assume all of the risks associated with my child’s participation and agree to release, discharge, and hold harmless Muhlenberg College, its officers, agents and employees and anyone connected with the Activity from all causes, liabilities, damages, actions, negligence, debts, claims or demands whatsoever on account of any injury or accident incurred as a result of my child’s participation in the Activity. Further, all medical expenses resulting from injury or accident during the Activity will be the responsibility of the participant and/or their parent or guardian.

I have read and executed this document with full knowledge of its significance.

Parent or Guardian signature

Date

Consent for Medical Treatment

Permission of a parent or legal guardian must be obtained before medical treatment of any kind can be rendered to persons under 18 years of age. This consent form must be signed by a parent or legal guardian as evidence of your consent for treatment of the participant.

_____ I grant permission to Muhlenberg College and/or its designees or representatives to administer first aid care as may be necessary for my son/daughter.

_____ I refuse permission to Muhlenberg College and/or its designees or representatives to administer first aid care as may be necessary for my son/daughter.

Signature of Parent/Guardian

Date

Muhlenberg College
Medical and Release Form

Participant Name _____

Address _____

City _____ State _____ Zip Code _____

Telephone (_____) _____ Birth Date _____

(if under 18, please see parent

consent for treatment, page 2

➤ Medical History (check if any of the following apply):

- | | | |
|--|---|--|
| <input type="checkbox"/> asthma | <input type="checkbox"/> other respiratory problems | <input type="checkbox"/> recurring headaches |
| <input type="checkbox"/> bronchitis | <input type="checkbox"/> back problems | <input type="checkbox"/> high blood pressure |
| <input type="checkbox"/> diabetes | <input type="checkbox"/> overweight problems | <input type="checkbox"/> low blood pressure |
| <input type="checkbox"/> heart problems | <input type="checkbox"/> excessive menstrual cramps | <input type="checkbox"/> hypothermia |
| <input type="checkbox"/> fainting | <input type="checkbox"/> difficulty with heat or cold | <input type="checkbox"/> convulsions |
| <input type="checkbox"/> frequent diarrhea | <input type="checkbox"/> frequent constipation | <input type="checkbox"/> frequent sore throats |
| <input type="checkbox"/> hearing impairment | <input type="checkbox"/> insomnia | <input type="checkbox"/> sleep walking |
| <input type="checkbox"/> vision impairment (other than use of corrective lenses) | | |

➤ If any of the above items are checked, please elaborate and note whether any special accommodations are required _____

➤ Please list all food allergies, noting the type of reaction _____

➤ Please list all medication allergies, noting the type of reaction _____

➤ Please list all environmental allergies, noting the type of reaction _____

➤ Please list any medications taken regularly: _____

➤ Date of most recent tetanus immunization _____

If it has been longer than 10 years, or if you are not sure how long it has been,
you need to be re-immunized before taking this trip.

- Please list any other medical limitations that might affect your child's ability to participate in this Activity.

Emergency Contact:

Name: _____ Address: _____

Phone number: _____ Relationship: _____

To the best of my knowledge, the above information is true and correct as it relates to my ability to participate in the _____ (the "Activity"). I will notify Muhlenberg College if any additional relevant medical information comes to light subsequent to my submitting this form.

I acknowledge that Muhlenberg College does not provide fire, burglary, theft or other kinds of insurance to cover my personal property. Accordingly, I hereby assume full responsibility for all personal property brought by or for my child to the Activity and hereby voluntarily release Muhlenberg College and its officers, trustees, employees, program directors and agents of and from all liability, causes of action, claims and demand, damages and costs (including attorney fees) arising or resulting from the theft, loss or damage of such items of personal property.

In consideration of the efforts put forth by Muhlenberg College to provide me with the opportunity to participate in the Activity, and intending to be legally bound, I do hereby remise, release and forever discharge, and agree to indemnify, defend and save harmless, Muhlenberg College and its officers, trustees, employees, program directors and agents of and from all liability, causes of action, claims and demand, damages and costs (including attorney fees) arising or resulting directly or indirectly from my child's participation in the Activity.

THE UNDERSIGNED HAS/HAVE READ THE ABOVE WAIVER AND RELEASE, UNDERSTAND THAT HE/SHE/THEY HAS/HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT VOLUNTARILY.

Parent or Guardian Signature _____ Date _____

Print Name _____