1. COVENANT AGREEMENT
   Westminster Presbyterian Church ("Westminster") is a community of faith, working to build and sustain nurturing relationships with all its members. We have committed ourselves in the covenant of membership and in our journey of faith to strive to live as Christ’s faithful disciples by following his teachings and showing his love and justice to all. We are committed to continue to nurture our members and provide a safe and secure environment for all who participate in the ministries and activities sponsored by Westminster.

2. POLICY APPLICABILITY (WHO IS PROTECTED)
   Those protected by this Vulnerable Adult Safety Policy are vulnerable adults who participate in the ministries and activities of Westminster.

3. DEFINITIONS
   For clarity in all Policy references, the terms listed below are defined as follows:

   3.1 Vulnerable Adult
   The words “vulnerable adult” mean any person 18-years old or older of all genders without the developmental or cognitive capacity to give consent or to protect himself/herself/themselves against significant harm or exploitation.

   3.2 Vulnerable Adult Abuse
   The phrase “vulnerable adult abuse” means any act or failure to act that results in the physical, sexual, psychological, emotional mistreatment, neglect, or exploitation (including but not limited to financial exploitation and the misuse of technology) of a vulnerable adult.

   3.3 Activities Sponsored By
   The phrase “activities sponsored by” refers to any event, group, ministry, program, or service provided by or organized under the auspices of Westminster.

   3.4 Paid Staff
   The words “paid staff” mean any person compensated for work by Westminster including but not limited to Teaching Elders (clergy), full-time staff members, part-time staff members, temporary workers, interns, and independent contractors.
3.5 **PCSM**
   The acronym “PCSM” means the Church’s Personnel Committee for Staff and Ministers.

3.6 **Policy**
   The word “Policy” will mean this *Vulnerable Adult Safety Policy*.

3.7 **Response Team**
   The words “Response Team” will mean a team organized and functioning as provided in Section 5.2.

3.8 **Volunteer**
   The word “volunteer” means one who offers of his/her/their own free will and without expectation of compensation to provide leadership and care for members who participate in activities sponsored by Westminster. The term “volunteer” includes but is not limited to Deacons, Member2Member leaders, and Befrienders.

3.9 **Westminster and Church**
   The words “Westminster” and “Church” mean Westminster Presbyterian Church.

4. **REQUIREMENTS**

4.1 **Use of Compliance Agreement Form**
   All paid staff and volunteers working with vulnerable adults will be asked to sign the “Vulnerable Adult Safety Policy Compliance Agreement Form” (see Attachment A) indicating that they have read, understand, and agree to comply with this Policy.

4.2 **Requirements for Volunteers**
   Volunteers working with vulnerable adults must:

   **A. Age:** Be at least 18 years of age in order to serve in an adult volunteer role.

   **B. Training:** Attend orientation/training meeting(s) necessary to learn characteristics of a vulnerable adult and how to work with them, to review this Policy, and to learn the work of the specific program for which they are volunteering. Training will include items listed in Attachment E.

   **C. Provide Required Information:** Complete and submit a Vulnerable Adult Volunteer Application Form (see Attachment B). This form must be completed every five years. In the interim years, volunteers will be required to complete a Vulnerable Adult Volunteer Short Form (see Attachment C), verifying that the information provided in their Application is still accurate and truthful.
D. **Criminal Background Check:** Submit to a criminal background check upon request by the Associate Pastor for Congregational Care.

4.3 **Disqualified Persons**
A person with a disqualifying factor may be prohibited from working with vulnerable adults as provided in this section.

A. **Who Decides:** What constitutes a disqualifying factor that will keep a person from working with vulnerable adults will be determined by the Senior Pastor/Head of Staff, Executive Associate Pastor, or Associate Pastor for Congregational Care on a case-by-case basis in light of all the surrounding circumstances.

B. **Examples of Disqualifying Factor**
   (1) Any person who is currently under investigation for, has pleaded no contest or guilty to, or been convicted of (a) criminal sexual conduct, (b) neglect of a vulnerable adult, (c) physical abuse, or (d) exploitation will not be permitted to work or volunteer in any activities sponsored by Westminster involving vulnerable adults.
   (2) Generally, convictions for or pleas of no contest or guilty to an offense involving vulnerable adults, violence, dishonesty, illegal substances, indecency, and any conduct contrary to Westminster’s mission will preclude a person from being permitted to work with vulnerable adults.
   (3) Failure to disclose a criminal conviction when requested may be a disqualifying factor.
   (4) Generally, providing false information on any application or form or in response to a verbal inquiry will preclude a person from being permitted to work with vulnerable adults.

4.4 **Use and Storage of Documents**

A. **Forms Retained And Confidential:** All forms filled out by volunteers will be treated as confidential expect as provided in this section. The forms will be kept in secure storage consistent with applicable law.

B. **Circumstances Warranting Disclosure:** In response to a report of suspicious or inappropriate activity, all pertinent information will be made available to the Response Team and appropriate legal authorities.
5. REPORTING AND RESPONSE TO ALLEGATIONS OF SUSPICIOUS OR INAPPROPRIATE ACTIVITY

All allegations of suspicious or inappropriate activity with a vulnerable adult will be regarded as serious and must be reported as provided in this section and in compliance with applicable law. Appropriate consideration will be given to the rights and privacy of both the alleged victim and the person being accused.

5.1 Initial Reporting of Suspicious or Inappropriate Activity

A. Immediate Reporting: Paid staff and volunteers who know or have reason to believe a vulnerable adult has been the subject of vulnerable adult abuse must report the information to an appropriate paid staff person. Appropriate paid staff persons include (1) the Associate Pastor for Congregational Care, (2) the Senior Pastor/Head of Staff, (3) the Executive Associate Pastor, or (4) the Chair of PCSM.

B. Incident Report Form: The person reporting the alleged will also document the date, time, and circumstances involved by filling out an “Incident Report Form” (see Attachment D) as soon as possible after making a report.

C. Notification of Senior Pastor/Head of Staff: The paid staff person receiving the report will immediately notify the Senior Pastor/Head of Staff, who will inform Westminster’s legal counsel and insurance carrier.

D. Determination of Further Action: The appropriate paid staff will review all reports of suspected vulnerable adult abuse, working with the advice and recommendations from Westminster’s legal counsel and insurance carrier. The Senior Pastor/Head of Staff will make the final determination as to what, if any, further action will be taken. If it is determined there is reasonable cause to suspect vulnerable adult abuse, paid staff will follow the procedures in Section 5.2. Even if the allegation is not sustained, the Senior Pastor/Head of Staff has the option to recommend another appropriate action, which could include removal from the program, a review of the process in that program, further education, disciplinary action, or termination of employment or volunteer service.

E. Accused to Refrain from Further Participation: Anyone accused or suspected of vulnerable adult abuse will be required to refrain from participating in all activities with vulnerable adults until the situation is resolved. Care will be taken to handle the matter as discreetly as possible, consistent with applicable law.
5.2 Response to Suspected Allegations of Abuse or Neglect

A. **Required Reporting:** Individuals who are mandated reporters under Minnesota Maltreatment of Vulnerable Adults Act, including paid staff, who have reason to believe a vulnerable adult has been the subject of vulnerable adult abuse within the preceding three years, must immediately contact the appropriate authorities. A person making a report in good faith has immunity from civil or criminal liability related to the report. Westminster shall not retaliate against any person who in good faith reports suspected vulnerable adult abuse.

B. **Response Team**

1. A Response Team will be assigned to take further action. The team will consist of (a) the Senior Pastor/Head of Staff or Executive Associate Pastor, (b) the Chair of Personnel Committee for Staff and Ministers (PCSM), (c) at least two members of Session appointed by the Senior Pastor/Head of Staff or Executive Associate Pastor, (d) legal counsel, and (e) others as deemed appropriate (for example, mental health professional).

2. The Response Team will promptly ensure that appropriate contact and cooperation is made, as required by law, with local and state civil and criminal authorities. Appropriate contact and cooperation must also occur with the Presbytery of the Twin Cities Area or the Presbyterian Church (U.S.A.) consistent with the Constitution of the Presbyterian Church U.S.A., Book of Order (Section D – 10.0000 et seq.).

3. If it will not put the vulnerable adult in jeopardy, is appropriate under the law, and is appropriate under the guidance of Westminster’s legal counsel and insurance carrier, the Response Team will notify the vulnerable adult’s guardian.

4. If appropriate under the law, under the guidance of Westminster’s legal counsel and insurance carrier, the Response Team may also:
   
   5. Interview all appropriate persons.
   
   6. Maintain documents of all efforts to investigate and address the situation.
   
   7. Appoint a spokesperson who will present a clear position statement of Westminster regarding vulnerable adult abuse, including but not limited to policies and established safeguards. This person will be the only one communicating to the press. The spokesperson will also give information to the congregation as appropriate.

5.3 Counseling

When appropriate, the Teaching Elders may provide appropriate counseling.
6. POLICY MANAGEMENT

6.1 Policy Implementation

In fulfilling our commitment in the covenant of membership to strive to live as Christ’s faithful disciples by following his teachings and showing his love and justice to all, every member of the Westminster congregation should help to ensure the implementation of this Policy. Within this framework, the following specific measures will be taken for this Policy to be effective:

A. PCSM Procedures:

(1) The PCSM will ensure that the Policy is distributed to each paid staff who has significant responsibility for supervising paid staff or volunteers who work with vulnerable adults.

(2) The PCSM will ensure that each newly-hired paid staff receives a copy of the Policy.

(3) The PCSM will ensure that this Policy is included in the Westminster Presbyterian Church Staff Member Handbook.

B. Training: This Policy will be incorporated into training sessions for all staff and volunteers who work with vulnerable adults. Training will include topics as listed in Attachment E.

C. Committee Awareness: All Church officers in paid staff positions will work with their committees to bring an awareness of this Policy and its implementation.

D. Responsibility for Implementation: The Associate Pastor for Congregational Care will be responsible to ensure the implementation of the Vulnerable Adult Safety Policy.

6.2 Policy Accessibility

A current copy of this Policy will be made available electronically through a link on Westminster’s website. In addition, paper copies of this Policy will be available upon request and be kept in the Church library.

6.3 Policy Review

The Congregational Care Council will review this Policy and its implementation annually and report to Session its finding and recommendations. Any revisions made to this Policy must be approved by the Session.

7. POLICY APPROVAL

This Policy was approved by the Session on ______________, 2020.
Attachment A:

VULNERABLE ADULT SAFETY POLICY
COMPLIANCE AGREEMENT FORM
Westminster Presbyterian Church, Minneapolis, MN

As a paid staff or volunteer associated with Westminster Presbyterian Church, I hereby acknowledge that I have received a copy (either electronically or on paper) of the Vulnerable Adult Safety Policy. By signing below, I am indicating that I have read, understand, and agree to fully comply with this Policy.

Name (please print): ________________________________________________________________

Signature: _______________________________________________________________________

Date: ___________________________________________________________________________
Attachment B:
VULNERABLE ADULT VOLUNTEER APPLICATION
Westminster Presbyterian Church, Minneapolis, MN

Full Name:

First Middle Last

Address:

Phone: __________________________

Email Address: _____________________________________________________

Driver's License Number: _____________________________

Expiration Date: _____________________________

List Your Age: _______

1. Are you a member of Westminster Presbyterian Church, Minneapolis, MN?

   _____ yes  _____ no  (If no, how long have you attended Westminster?

                    _______________

2. Please list any past experience you have working with vulnerable adults. Include name
   and place of the institution(s) or organization(s).

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

   ________________________________________________________________

Westminster Presbyterian Church
Vulnerable Adult Safety Policy
3. Have you attended the training/orIENTATION meetings to prepare you to work with a vulnerable adult?
   _____yes   _____no

4. Have you read, and do you understand and agree to abide by, the "Vulnerable Adult Safety Policy"?
   _____yes   _____no

5. If asked, will you complete the forms necessary for a criminal background check?
   _____yes   _____no

Volunteer Signature

Date: ____________________________________________________________

Note: If you have any concerns about the requested information, please feel free to speak to any member of the program or ministry staff.
Attachment C:
VULNERABLE ADULT VOLUNTEER APPLICATION SHORT FORM
Westminster Presbyterian Church, Minneapolis, MN

This form is to be completed by Westminster Presbyterian Church volunteers if they have signed a Vulnerable Adult Volunteer Application form within the last 5 years.

I have read the Vulnerable Adult Safety Policy.
Yes ______ No ______

The last time I volunteered with a vulnerable adult activity at Westminster was:
______________________________________________
(mm/dd/yyyy)

I verify that the information that I provided on the Vulnerable Adult Volunteer Application dated ________________________________ is still correct. If any information is not now correct, please provide the currently correct information: ________________________________
______________________________________________
______________________________________________
______________________________________________

Volunteer Printed Name

Volunteer Signature

Date: ________________________________________

Address: ______________________________________

Phone: ________________________________________

Email Address: ______________________________________
Attachment D:

VULNERABLE ADULT SAFETY POLICY INCIDENT REPORT FORM
Westminster Presbyterian Church, Minneapolis, MN

Date of Incident: ________________________________

Time of Incident: __________________

Name of vulnerable adult involved:

______________________________________________________

(A separate form must be completed for each vulnerable adult involved in order to keep the information confidential.)

Address of vulnerable adult:

_____________________________________________________________________________________

_____________________________________________________________________________________

Phone number of vulnerable adult: ________________________________

Name of guardian: ________________________________________________

Location of incident:

_____________________________________________________________________________________

Name of person(s) who witnessed the incident:

Name: ________________________________________________________________

   Phone: __________________________

Name: ________________________________________________________________

   Phone: __________________________

Name: ________________________________________________________________

   Phone: __________________________

Westminster Presbyterian Church
Vulnerable Adult Safety Policy
Please describe the incident as seen/heard and actions taken:

_________________________________________________________________________________________________________

_________________________________________________________________________________________________________

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Printed Name of Person Making Report
_________________________________________________________________________________________________________

Signature of Person Making Report
_________________________________________________________________________________________________________

Date: ___________________________________________

(Use back of this form if needed.)
Attachment E:

VULNERABLE ADULT TRAINING FOR VOLUNTEERS AND STAFF
Westminster Presbyterian Church, Minneapolis, MN

1. Discuss the characteristics of a vulnerable adult.

2. Discuss ways to work with a vulnerable adult.

3. Review the Vulnerable Adult Safety Policy.

4. Talk about specific tasks that the volunteer will be expected to do.