

Program Administrators Guide for University Sponsored Events

Event Checklist

1. Request space within EMS or Schedule event with the appropriate [Event Scheduler](#).
2. Enter event information into event Registry using the link provided via email.

STOP HERE IF:

- a) THE EVENT DOES NOT INCLUDE MINORS; OR
- b) PARTICIPATING MINORS ARE ATTENDING WITH PARENTS OR LEGAL GUARDIANS; OR
- c) THE EVENT HAS BEEN DETERMINED TO BE A GENERAL PUBLIC EVENT.

PLEASE CONTINUE IF:

- a) THE EVENT INCLUDES MINORS IN THE CARE, CUSTODY, OR CONTROL OF AN AUTHORIZED ADULT; AND
- b) THE EVENT HAS NOT BEEN DETERMINED TO BE A GENERAL PUBLIC EVENT.

3. Follow the instructions at <http://intranet.bloomu.edu/event-clearance-administration/> to complete steps 1 through 3.
4. Complete and upload the "[List of Participating Adults Bloomsburg University Events with Minors](#)" located in the Required Background Steps & Documentation section and return to Compliance Coordinator at hrclearances@bloomu.edu.
5. Receive instructions for Official Bloomsburg University Employees or Volunteers from Compliance Coordinator at hrclearances@bloomu.edu.
6. Communicate background clearance instructions to Official Bloomsburg University Employees or Volunteers, if applicable.
7. Complete and upload "[Certification of Compliance with Required Clearances](#)" for external employees or volunteers.
8. Review with all Authorized Adults and collect and upload signed "[Code of Conduct](#)" and "[Mandatory Reporter of Child Abuse Acknowledgment](#)".
9. Complete and upload all "Code of Conduct" and "Mandatory Reporter of Child Abuse Acknowledgement" forms to Compliance Coordinator at hrclearances@bloomu.edu.
10. Submit all background clearance documentation at least 30 days prior to event start date to the Compliance Coordinator.
11. Collect event participant parental consent, medical treatment and photo release forms according to registration deadline. Retain documentation for seven (7) years per PRP 2410.
12. Ensure that the supervision ratio meets the required guidelines.
13. Develop a safety and security plan. Retain documentation for seven (7) years per PRP 2410.
14. Develop a housing and transportation plan. Retain documentation for seven (7) years per PRP 2410.
15. Develop the following response protocols:
 - Injury or illness
 - Authorized Adult or Program Staff Misconduct
 - Participant MisconductRetain documentation for seven (7) years per PRP 2410.
16. Determine insurance requirements. Retain documentation for seven (7) years per PRP 2410.
17. Develop a medication management plan. Retain documentation for seven (7) years per PRP 2410.
18. Develop and implement program orientation for minors and parents. Return orientation acknowledgment to the Compliance Coordinator at hrclearances@bloomu.edu.

Program Administrators Guide

University Sponsored Camps, Conferences, and Programs

Purpose

This guide is a reference for INTERNAL program administrators who must obtain required background clearances for camp, conference, and programs occurring at facilities owned, operated, or affiliated with Bloomsburg University of Pennsylvania. YOUR EVENT HAS BEEN DETERMINED TO BE SUBJECT TO THE BLOOMSBURG UNIVERSITY BACKGROUND SCREENING REQUIREMENTS.

Please be advised that all required documentation must be complete **thirty (30) days** prior to event start date. The Pennsylvania background clearance process can be lengthy, especially for those out of state and out of country, and can take up to **twelve (12) weeks** according to current lead times.

Requirements

The amended [Child Protective Services Law](#), effective December 31, 2014, and accompanying policies; PASSHE Board of Governors [2014-01-A](#) (Protection of Minors) and Bloomsburg University's [PRP 2410](#) (Background Screening, Protection of Minors and Volunteerism) requires all prospective employees or volunteers for camps, conferences, and programs held at Bloomsburg University to complete a series of background clearances every five (5) years as defined in [PRP 2410](#).

Specifically, all employees or volunteers are required to successfully complete the Pennsylvania Child Abuse History Clearance, Pennsylvania State Police Criminal Record Check, and FBI Federal Criminal History Record.

Compliance

Please plan for compliance according to current background clearance response times. All documentation must be submitted thirty (30) days prior to the event start date. Compliance requirements are described at <http://www.bloomu.edu/event-clearance-administration>. Events not in compliance with required documentation thirty (30) days prior to the event start date are subject to cancellation by the university.

ALL participating employees and volunteers **must** be registered utilizing the "List of Participating Adults Bloomsburg University Events with Minors".

Compliance with the law and university policy is satisfied by completing each of the following three (3) background clearances:

1. **Pennsylvania Child Abuse History Clearance:** Response times can vary from instantaneous results to three (3) weeks. Current response times will be advertised on the website.
2. **Pennsylvania State Police Criminal Record Check:** Response times can vary from instantaneous results to three (3) weeks. Current response times will be advertised on the website.

- 3. FBI Federal Criminal History Report:** Response times are currently ten (10) to fourteen (14) days. Current response times will be advertised on the Cogent website. Fingerprints must be performed at an authorized Cogent fingerprint site in Pennsylvania to be valid. Locations outside of Pennsylvania are available. This process requires ink-rolled fingerprints that must be processed through the state of Pennsylvania and could take up to **twelve (12) weeks** or more.

Background Clearance form submission to Human Resources

The following forms are required from the Program Administrator for a BU Sponsored Camp, Conference or Program:

- 1) **List of Participating Adults** – This form shall be completed and returned to the Compliance Coordinator and shall include all participating adults. More than one sheet can be completed if necessary.
- 2) **Code of Conduct** – A signed Code of Conduct is required for all Authorized Adults.
- 3) **Mandatory Reporter of Child Abuse Acknowledgment** - A signed Mandatory Reporter of Child Abuse is required for all Authorized Adults.
- 4) **Pennsylvania’s State System of Higher Education Certification of Compliance with Required Clearances** – This form is ONLY utilized in the event that a camp, conference, or program employee or volunteer is a participating adult, but NOT being sponsored by Bloomsburg University of Pennsylvania. This means that Bloomsburg University of Pennsylvania is allowing the authorized adult to participate in the event, but an External Agency Administrator has certified that s/he has completed the three required background clearances according to the Child Protective Services Law.
Please note that most BU sponsored camps, conferences, and programs will utilize BU sponsored employees and volunteers and will not require this form.

Other Required Camp, Conference or Program Documentation

The following program documentation is required for a retention period of seven (7) years per [PRP 2410](#). Please see attached recommended forms and required documentation. Please note that the provided forms are recommended for use, however, alternate forms may be substituted. The requirement is to collect and retain the information for seven (7) years.

- 1) Event Participant Parental Consent Form
- 2) Medical Information and Consent for Emergency Treatment Form
- 3) Photograph/Video Release Form
- 4) Supervision Ratio
- 5) Safety and Security Plan
- 6) Housing and Transportation Plan
- 7) Response Protocols for Injury or Illness
- 8) Response protocols for Authorized Adult or Program Staff Misconduct
- 9) Response Protocols for Participant Misconduct
- 10) Insurance Requirements
- 11) Medication Management Plan
- 12) Program Orientation for Minors and Parents, Authorized Adults and Volunteers



EVENT PARTICIPANT PARENTAL CONSENT FORM

Participant's Name:	
Participant's Age at the time of event:	
Camp, Conference or Program Name:	
Camp, Conference or Program Dates:	
Camp, Conference or Program Location:	
Program Administrator:	

I hereby allow _____ (Print Participant Name)
to participate in the above listed camp, conference, or program.

I hereby release, discharge and hold harmless Bloomsburg University of Pennsylvania, its officers, directors, employees, agents, contractors, successors and assigns from any claims, damages, costs or expenses of any sort arising out of or connected with camp, conference or program.

I acknowledge that the Program Administrator is responsible for the care, guidance, and supervision of the participant for the duration of this event.

I understand the Program Administrator will provide supervision and my child agrees to abide by all Bloomsburg University of Pennsylvania regulations, directions, and instructions related to participation in this activity.

I have read and understood the above and hereby affix my signature indicating my agreement.

Parent Name (please print)

Date

Parent/Guardian Signature

Date

Bloomsburg University does not discriminate on the basis of race, color, religion, sex, sexual orientation, gender identity, age, national origin, ancestry, disability, or veteran status in its programs and activities as required by Title IX of the Educational Amendments of 1972, the Americans with Disabilities Act of 1990, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, and other applicable statutes and University policies.



MEDICAL INFORMATION AND CONSENT FOR EMERGENCY TREATMENT

Camp, Conference or Program Name	
Camp, Conference or Program Dates	

Participant Name _____ **Family Physician** _____

Parent/Guardian Name _____ **Family Physician Phone** _____

Address _____ **Child's allergies, if any** _____

Telephone _____ **Date of last tetanus booster** _____

Health Insurance Carrier _____ **Current Medication(s)** _____

Insurance Policy/Group # _____ **Medical Considerations** _____

Insurance Phone _____ **Current on all immunizations?** YES NO

***Will the participant have an Inhaler or EPI Pen in their possession?** YES NO
**Physician's order is required.*

If yes, is the participant trained in the self-administration of their Inhaler or EPI Pen? YES NO

Emergency Contacts	
Name:	Phone:
Name:	Phone:
Name:	Phone:
Name:	Phone:

I hereby voluntarily consent to the rendering of such care, including diagnostic procedures, and medical treatment by authorized members of the Geisinger Bloomsburg Hospital Emergency Department or their designees, as may in their professional judgment be necessary. I hereby acknowledge that no guarantees have been made to me as to the effect of such examination of treatment of my child's condition. I have read this form and certify that I understand its contents.

I hereby give consent to Geisinger Bloomsburg Hospital who will be caring for my child to arrange emergency medical/dental care and treatment necessary to preserve the health of my child.

I acknowledge that I am responsible for all reasonable charges in connection with care and treatment during this time period.

Parent/Guardian Signature: _____ **Date** _____



PHOTO AND VIDEO CONSENT FORM

Camp, Conference or Program Name:	
Camp, Conference or Program Dates:	

I authorize Bloomsburg University (BU) to take photographs and/or record video of my minor child/children during his/her/their attendance at this university sponsored camp, conference or program. I give BU all rights to use these photographs/videos for advertising and promotional purposes in all conventional and electronic media, as well as any future media.

To protect the privacy of all participants, these photos will not contain any identifying information such as name, address, school currently attending, etc. In addition, photographs/videos will only be taken/recorded camp, conference or program facilities, and will only be of participants actively engaged in event activities.

I understand and agree that these photographs/videos may be duplicated, distributed (with or without charge), and/or altered without compensation or liability.

I authorize Bloomsburg University (BU) to take photographs and/or record video of my minor child/children during his/her/their attendance at this university sponsored camp, conference or program.

I **DO NOT** authorize Bloomsburg University (BU) to take photographs and/or record video of my minor child/children during his/her/their attendance at this university sponsored camp, conference or program.

Participant Name: _____ **Parent/Guardian Name:** _____

Parent/Guardian Signature: _____ **Date** _____



STAFFING AND SUPERVISION RATIOS

Attention Program Administrator: Document the supervision ratio for your camp, conference or program and retain for 7 years.

PROGRAM OR ACTIVITY SUPERVISION
<ul style="list-style-type: none">• The program administrator must be 21 years of age or older, physically present during active program operation hours, and available within a reasonable response time during non-activity hours. If the program administrator cannot be present during active program operation hours, an Authorized Adult must be designated as responsible for the program during the program administrator's absence. The designee must be 21 years of age or older and adhere to the same standards as the program administrator.• Authorized adults must be 18 years of age or older. Employees, volunteers or student employees who are 18 years of age or older may be designated as authorized adults.• Employees, volunteers or student employees may be under the age of 18. However, an employee, volunteer or student employee under the age of 18 may not be solely responsible for any university program and must be within the immediate vicinity, as defined in PRP 2410, of an authorized adult 18 years of age or older.• Authorized adults must be at least 2 years older than the minor(s) he/she is independently supervising.• One-on-one contact between an authorized adult, volunteer, employee, or student employee and a minor is prohibited in non-public spaces where activity is not observable by other authorized adults or program staff, unless the authorized adult is the minor's parent or guardian or in the rare event of an emergency.• Participation by a minor under 5 years of age is prohibited unless the minor is accompanied by a parent or guardian at all times.
REQUIRED SUPERVISION RATIOS – <i>Ratio modifications by Vice Presidential approval only.</i>
<p>In establishing supervision ratios for a camp, conference, or program involving minors, a program administrator should consider the ages of the minors participating, the nature of the camp, conference, or program, the location, and the duration of the activity. Below are required supervision ratios for a camp, conference or program involving minors.</p> <p>Day Program*</p> <ul style="list-style-type: none">• 1 staff for every 6 participants 5 years of age or younger (1:6) plus a parent/guardian for each participant under 5 years of age• 1 staff for every 8 participants aged 6 – 8 years (1:8)• 1 staff for every 10 participants aged 9 – 14 years (1:10)• 1 staff for every 12 participants aged 15 – 18 years (1:12) <p>Overnight Program*</p> <ul style="list-style-type: none">• 1 staff for every 5 participants 5 years of age or younger (1:5) plus a parent/guardian for each participant under 5 years of age• 1 staff for every 6 participants aged 6 – 8 years (1:6)• 1 staff for every 8 participants aged 9 – 14 years (1:8)• 1 staff for every 10 participants aged 15 – 18 years (1:10) <p style="text-align: right;"><i>*Ratios are based on the American Camp Association.</i></p>



SAFETY AND SECURITY PLANNING

Attention Program Administrator: Document the safety and security plan for your camp, conference or program and retain for 7 years. The program administrator is responsible to review and be familiar with the University Evacuation Procedure before a program or activity is held.

Each program administrator shall:

- 1) Establish a procedure, consistent with University standards and expectations, for notifying the minor's parent/legal guardian in case of an emergency, including medical issues, behavioral problems, natural disasters, or other significant disruptions. The program administrator shall provide written information on the notification procedure to adults involved in the program, parents/legal guardians of minors, and, if age appropriate, the minor.
- 2) For overnight programs, each program administrator must have a roster of all minors participating in the program. The roster shall include each minor's name, gender, age, and home address; local room assignment (if any); phone number(s) of parent or legal guardian; and emergency contact information.
 - a. Provide information to the parent or legal guardian detailing the manner in which the minor can be contacted during the program.
 - b. For overnight programs, maintain a roster of program staff and contact information, including information on the program administrator.
 - c. Have completed a comprehensive health form for each minor camp or conference participant.
 - d. Program staff may distribute medications to minors only under the following conditions:
 - i. The minor's family must provide the medicine in its original pharmacy container labeled with the minor's name, medicine name, dosage, and timing of consumption. Over-the-counter medications must be provided in the manufacturer's container and labeled with the minor's name, dosage, and timing of consumption.
 - ii. The parent or guardian must provide written authorization before program staff may distribute any medication to a minor.
 - iii. Program staff shall keep the medicine in a secure location and, at the appropriate time for distribution, meet with the minor in the presence of another adult.
 - iv. The program staff member shall allow the minor to self-administer the appropriate dose as shown on the container.
 - v. For medicine that the minor cannot self-administer, the parent or guardian must make arrangements in advance of the minor's arrival with a qualified

individual to administer the medication.

- vi. Minors may carry personal “epi” pens and inhalers during activities for self-administration.
- 3) Develop and make available to participants the rules, discipline measures, and response protocols applicable to the program.
 - 4) Obtain all medical, photo/video, and event participant parental consent forms as part of the program registration process.
 - 5) Assign a staff member who is at least 21 years of age to be accessible to the participants. The staff member must reside in the housing unit, if applicable.
 - 6) As applicable, all programs must adopt and implement staffing and supervision ratios as provided in this guide.



HOUSING AND TRANSPORTATION

Attention Program Administrator: Document the housing and transportation plan for your camp, conference or program and retain for 7 years.

On-campus transportation will be provided by a licensed provider of university transportation services. Camp participants will not be transported in private vehicles.

The housing and transportation plan must be in compliance with Bloomsburg University [camp and conference procedures](#), [PRP 2410 – Background Screening, Protection of Minors, Volunteerism](#), the Residence Life "[Housing Planning Guide](#)" and recommended staffing and supervision ratios as provided in this guide.



RESPONSE PROTOCOLS

Attention Program Administrator: Document the response protocols for your camp, conference or program and retain for 7 years.

Injury or Illness:

Response protocol for an injured or ill camp, conference or program participant shall be established for each individual camp, conference or program.

Call 911 for any medical emergency on campus. Geisinger Bloomsburg Hospital Emergency Department is the designated location for required medical/dental treatment as listed in the Medical Information and Consent for Emergency Treatment form.

Crime Reporting/CSA:

Authorized adults and program staff are designated campus security authorities. A campus security authority (CSA), as defined by the [Clery Act](#), is:

- A) Any individual or organization specified in an institution's statement of campus security policy as an individual or organization to which students and employees should report criminal offenses;
OR
- B) An official of an institution who has significant responsibility for student and campus activities, including, but not limited to, student housing, student discipline and campus judicial proceedings.

CSA's are responsible for reporting any crime, even if not witnessed. The Clery Act requires that crimes are reported for both data collection and timely warnings. It is not necessary to identify the victim when making a CSA report.

As a CSA, it is your responsibility to call 570-389-2211 immediately when you witness or become aware of a crime.

A CSA report form is available at <http://bloomu.edu/documents/police/CSA-Form.pdf> to assist you in the collection of information related to the crime. Completion of the CSA report is not required, but available as an aid.

Authorized Adult or Program Staff Misconduct:

Authorized adults and program staff are mandatory reporters of child abuse. Bloomsburg University's policy, [PRP 2412](#), requires that the following action is taken if any authorized adult or program staff suspects child abuse:

- 1) All mandated reporters shall call 911 or Bloomsburg University Police Department at 570-389-4168 or 570-389-2211 for an in progress child assault.

- 2) All mandated reporters shall make an immediate report of suspected child abuse to the Department of Human Services (DHS) **Childline** by calling **1-800-932-0313** if the reporter suspects that a child is a victim of child abuse.
- 3) Immediately following the report to DHS the mandated reporter must notify the Officer in Charge at Bloomsburg University Police Department in person or by calling 570-389-4168 or 570-389-2211. The Director of University Police and the Director of Human Resources will assume responsibility for facilitating the university's cooperation with the investigation of the report.
- 4) After an oral report is made to DHS under paragraph 2 above, a written report shall also be made within 48 hours to DHS using electronic technologies when available, or to the Columbia County Children and Youth Agency.

Additional information regarding the responsibilities of Mandatory Reporters of Child Abuse are located at http://www.bloomu.edu/policies_procedures/2412.

Employees and volunteers are required to provide written notice to the Bloomsburg University (divisional VP or Director of Human Resources) if they are:

- a. Arrested for, or convicted of, an offense that would constitute grounds for denial of employment or participation in a program, activity or service (reportable offenses);
- b. Named as a perpetrator in a founded or indicated report of child abuse.

Written notice must be provided within 72 hours of arrest, conviction, or notification that the person has been listed as a perpetrator in the statewide database. Any employee or volunteer who fails to comply with this reporting obligation may be subject to discipline up to and including termination or removal.

Additional information regarding Reporting Obligations are located at http://www.bloomu.edu/policies_procedures/2410.

All other types of non-employee misconduct shall be addressed by the Program Administrator and the Vice President of Student Affairs. Employee misconduct will be addressed according to individual employment contracts, Bloomsburg University policy, and Pennsylvania laws and regulations.

Participant Misconduct:

Participant misconduct shall be handled by the Program Administrator on a case by case basis and according to the infraction. Program Administrators are able to administer discipline up to and including removal from the camp, conference, or program.



INSURANCE REQUIREMENTS

Attention Program Administrator: Document the insurance requirements for your camp, conference or program and retain for 7 years.

Medical Insurance: Camp, conference or program participants are not able to participate without a completed Medical Information and Consent for Emergency Treatment form prior to the start of the program. In addition, all participants must have medical insurance in order to attend camp.

Liability Insurance (External Groups): Liability insurance for external groups is required. Requirement guidelines are located at our [conference resources](#) web page. Submission of a Facilities Use Agreement and Insurance Certificate are also required prior to a finalized agreement.

MEDICATION MANAGEMENT

Medication management guidelines are located within the "SAFETY AND SECURITY PLANNING SECTION."



PROGRAM ORIENTATION AUTHORIZED ADULTS/PROGRAM VOLUNTEERS

Attention Program Administrator: Document the program orientation for Authorized Adults/Program Staff and Program Volunteers and retain for 7 years. Utilize the “Program Orientation Reference Guide” as a training outline for required orientation training. Additional recommended orientation topics may be added as appropriate.

Required Orientation Training

1. Program Staff Code of Conduct
 - o [Bloomsburg University of Pennsylvania Code of Conduct](#)
 - o [PRP 2410](#)
2. Crime Reporting/Campus Security Authority (CSA)
3. Emergency Reporting
4. First Aid/CPR
5. Minors Reporting Obligations ([PRP 2410](#))
6. Mandatory Reporting of Child Abuse
 - o [Notice of Requirements as a Mandatory Reporter of Child Abuse](#)
 - o [PRP 2412](#)
7. [Sexual and Unlawful Harassment](#)
8. [Crime Reporting](#)
9. [Medication Management](#)

Additional Recommended Orientation Topics (see [Housing Planning Guide](#)):

- Camp, Conference or Program Agenda
- Emergency Preparedness
- Expected Participant Conduct
- Housing and Transportation Plans
- Meal Plans
- Expectations of Supervision
- Medical/Dental Care

Program Administrator Training Acknowledgment

Program Administrator:	
Camp, Conference or Program Name:	
Camp, Conference or Program Dates:	

Required training for Authorized Adults was completed during a program orientation.

Program Administrator Signature _____ **Date** _____



PROGRAM ORIENTATION REFERENCE GUIDE AUTHORIZED ADULTS/PROGRAM VOLUNTEERS

REQUIRED TOPIC	DISCUSSION POINTS
Code of Conduct <ul style="list-style-type: none"> • Bloomsburg University of Pennsylvania Code of Conduct • PRP 2410 	<ol style="list-style-type: none"> 1. Authorized adults or program staff should be positive role models for minors and act in a responsible manner that is consistent with the mission of Bloomsburg University. 2. Authorized adults or program staff are required to comply with all applicable laws and PASSHE Board of Governors' and university policies. 3. Authorized adults or program staff working in programs covered by this policy must follow the established Code of Conduct. 4. All Authorized adults must sign the Code of Conduct to acknowledge reading, understanding and abiding by the Code of Conduct.
Crime Reporting/Campus Security Authority (CSA)	<ol style="list-style-type: none"> 1. Authorized adults and program staff are designated campus security authorities. A campus security authority (CSA), as defined by the Clery Act, is an individual with significant responsibility for student and campus activities and to whom employees should report criminal offenses. 2. CSA's are responsible for reporting any crime, even if not witnessed. 3. It is not necessary to identify the victim when making a CSA report. 4. As a CSA, it is your responsibility to call 570-389-2211 immediately when you witness or become aware of a crime. 5. A CSA report form is available at http://bloomu.edu/documents/police/CSA-Form.pdf to assist you in the collection of information related to the crime. Completion of the CSA report is not required, but available as an aid.
Emergency Reporting <ul style="list-style-type: none"> • Bloomsburg University Police Department 	<ol style="list-style-type: none"> 1. Report fire and police emergencies to Bloomsburg University Police at 570-389-2211. 2. Husky Safe at BU is an app available from the App Store that allows users to contact BU Police Department. Information is available at http://www.bloomu.edu/husky-safe. 3. Call 911 for medical emergencies. Emergency guidelines are available at http://intranet.bloomu.edu/police-hotline. 4. Emergency call boxes in strategic locations throughout campus provide a direct link to University Police. Call boxes are red-white-blue in color and can be identified by an overhead blue light. Use for any emergency. 5. Hotline numbers are available at http://www.bloomu.edu/police/hotline.
First Aid/CPR	<ol style="list-style-type: none"> 1. Local First Aid/CPR certification is available through the American Red Cross. 2. Campus AED Locations are available at: http://www.bloomu.edu/documents/police/AED_Locations.pdf.
Minors Reporting Obligations (PRP 2410)	<ol style="list-style-type: none"> 1. Employees and volunteers are required to provide written notice to the employer (divisional VP or Director of Human Resources) if they are: <ol style="list-style-type: none"> a. Arrested for, or convicted of, an offense that would constitute grounds for denial of employment or participation in a program, activity or; b. Named as a perpetrator in a founded or indicated report of child abuse. 2. Written notice must be provided within 72 hours of arrest, conviction, or notification that the person has been listed as a perpetrator in the statewide database. 3. If the university or program administrator has a reasonable belief that an employee or volunteer has been arrested or convicted of a reportable offense or was named as perpetrator in a founded or indicated report, or if an employee or volunteer has provided notice of activity that would be sufficient to deny employment or program participation, notice must be provided to the divisional VP or Director of Human Resources. 4. Any employee or volunteer who fails to comply with these reporting obligations may be subject to discipline up to and including termination or removal.

REQUIRED TOPIC	DISCUSSION POINTS
<p>Mandatory Reporting of Child Abuse</p> <ul style="list-style-type: none"> • Notice of Requirements as a Mandatory Reporter of Child Abuse • PRP 2412 	<p>ALL university employees, volunteers and contractors are Mandated Reporters of Child Abuse per Bloomsburg University of Pennsylvania’s policy PRP 2412 effective December 23, 2014.</p> <ol style="list-style-type: none"> 1. Required steps: <ol style="list-style-type: none"> I. Call 911 for an in progress child assault. II. Make an immediate report of suspected child abuse to Childline at 1-800-932-0313. III. Immediately following the report to Childline, notify the Officer in Charge at the Bloomsburg University Police Department in person or by calling 570-389-4168 or 570-389-2211. IV. Submit a written report to Department of Human Services or Columbia County Children and Youth within 48 hours. 2. Willful failure to report suspected child abuse may be subject to disciplinary action, up to and including dismissal from employment. 3. All Authorized adults must sign the Mandatory Reporter Acknowledgment to acknowledge reading, understanding and abiding by the Mandatory Reporter requirements.
<p>Sexual and Unlawful Harassment</p> <ul style="list-style-type: none"> • PRP 4789 	<ol style="list-style-type: none"> 1. An individual who believes that s/he has been discriminated against, harassed, or who has been subjected to retaliation by another University employee or vendor, may seek resolution through the procedures listed below. 2. Complaints alleging sexual harassment, including sexual violence, by another University employee or vendor must be forwarded to the Title IX Coordinator. An investigation may be warranted without a formal signed complaint if the University has sufficient notice that sexual harassment may have occurred or the allegations of sexual harassment are particularly serious. 3. Informal and formal complaint resolution options are available and are specified within the policy. 4. Complaints against university students are filed at The Dean of Students Office at 570-389-4734. 5. Complaints against program staff, faculty, the University President, or a Vice President are filed at The Office of Equity and Accommodations at 570-389-4587. 6. Complaints against an individual from The Office of Social Equity are filed at The Office of the President at 570-389-4526. 7. Individuals are encouraged to use these complaint procedures but are not required to do so and may choose to pursue complaints in other forums. 8. In addition to or in place of the University’s procedures, complainants may choose to file a complaint with federal or state agencies such as the Pennsylvania Human Relations Commission (717) 787-9780, the U.S. Equal Employment Opportunity Commission (800) 669-4000, or the Office of Civil Rights of the U.S. Department of Education (215) 656-8541. 9. Additional campus resources are provided within the policy.
<p>Medication Management</p>	<p>See Safety & Security Planning in on page 8 of this guide.</p> <ul style="list-style-type: none"> • Program staff may distribute medications to minors only under the following conditions: • The minor’s family must provide the medicine in its original pharmacy container labeled with the minor’s name, medicine name, dosage, and timing of consumption. Over-the-counter medications must be provided in the manufacturer’s container and labeled with the minor’s name, dosage, and timing of consumption. • The parent or guardian must provide written authorization before program staff may distribute any medication to a minor. • Program staff shall keep the medicine in a secure location and, at the appropriate time for distribution, meet with the minor in the presence of another adult. • The program staff member shall allow the minor to self-administer the appropriate dose as shown on the container. • For medicine that the minor cannot self-administer, the parent or guardian must make arrangements in advance of the minor’s arrival with a qualified individual to administer the medication. • Minors may carry personal “epi” pens and inhalers during activities for self-administration.



PROGRAM ORIENTATION FOR MINORS AND PARENTS

Attention Program Administrator: Document the program orientation for minors and parents, when required, and retain for 7 years.

Recommended Orientation Training (see [Housing Planning Guide](#)):

1. Camp, Conference or Program Agenda
2. Response Protocols
3. Emergency Procedures
4. Check-In/Check-Out
5. Early Departure
6. Participant Code of Conduct
7. Residence Hall Rules
8. Dining Rules
9. Transportation
10. Internet Access
11. [Medication Management](#)
12. Medical/Dental Care
13. Resources/Contact Information
14. First Aid/CPR, AED Locations

Program Administrator Training Acknowledgment

Program Administrator:	
Camp, Conference or Program Name:	
Camp, Conference or Program Dates:	

Required program orientation for minors and parents was completed.

Program Administrator Signature _____

Date _____