University of Colorado Boulder

Mountain Research Station (MRS) Child Protection Policy

Mountain Research Station, 818 County Road 116, Nederland CO 80466 http://www.colorado.edu/mrs/

1. INTRODUCTION

The Mountain Research Station (MRS) is a University of Colorado (CU) facility. The MRS requires that all (CU) and non-CU program operators who run programs for children at the MRS meet the minimum requirements set forth in this document. Program Operators who do not meet these requirements may not be allowed to use the MRS facilities.

2. POLICY STATEMENT

In operating Programs for Children, the university's primary responsibility is to protect the health and safety of participating Children. Program Operators shall design and operate Programs for Children in compliance with state and federal law as well as this policy and related procedures.

An employee who suspects that a Child participating in a Program for Children is being abused, mistreated, or neglected shall report such information to law enforcement immediately and shall notify the supervisor of the program. University employees who are mandatory reporters under Colorado law (see C.R.S. § 19-3-301) shall report pursuant to the provisions in that law.

This policy applies to all university-operated and university-contracted Programs for Children and to all Unaffiliated Program Operators.

3. DEFINITIONS

3.1. Child or Children: individual(s) under the age of 18.

3.2. Program for Children: a university program operated exclusively or primarily for children left in university care without parental or guardian supervision and that requires registration.
Program Operator: a university unit that operates a Program for Children or that contracts with an Unaffiliated Program Operator to operate a Program for Children

3.3. Unaffiliated Program Operator: a third party who enters an agreement with the University to operate its own program for Children using University facilities.

3.4. University employee or affiliate: faculty, staff, student employees, volunteers, and contractors.

University of Colorado Boulder

4. MINIMUM REQUIREMENTS – MRS CHILD PROTECTION

4.1. University of Colorado Program Operators **ONLY**.

4.1.1. ☐ Each University of Colorado Program Operator shall annually inform the CU Ethics and Compliance Information (ECI) Director that it operates such a Program for Children, or that it has contracted with an Unaffiliated Program Operator to do so. The Program Operator can submit this information on the ECI's Children's Program Submission Form.

4.2. Unaffiliated Program Operators ONLY (applies to any non-University of Colorado Program Operator).

4.2.1. ☐ Prior to any Unaffiliated Program Operators conducting activities on university property, a *use agreement* must be signed between the university and the non-university group for the use of university-owned or controlled facilities.

4.2.2. ☐ INSURANCE REQUIREMENTS: The *non-university group* must provide the following insurance listed below. Please check with the MRS first to understand if your organization already has a policy on file with the University of Colorado Risk Management office (it is common for area school districts to have policies on file with CU). An example insurance certificate is provided in the appendix of this document.

- General Liability coverage with limits of not less than $1,000,000 combined single limit.
- Where applicable, auto coverage for owned and non-owned auto liability with limits of not less than $1,000,000.
- Where applicable, workers' compensation coverage at required statutory limits.
- The Office of University Risk Management reserves the right to require additional specific insurance and limits at the time of the *use agreement*.
- All insurance policies shall name the Regents of the University of Colorado, a body corporate, as additional insured.
- The certificate Holder shall be: The Regents of the University of Colorado, University Risk Management, 1800 Grant Street, Suite 700, Denver, CO 80203-1187. Certificates must be provided at the time the *use agreement* is executed.
- Policies shall be primary to all other coverage that may be concurrently in effect.
- All policies shall be underwritten by a company licensed to do business in the State of Colorado.
- *Non-university groups* seeking to procure the insurance required may consult the university's webpage on the university's Tenant User Liability Insurance Program (TULIP), available here http://www.cu.edu/risk/special-event-insurance.

4.3. University of Colorado Program Operators **AND** Unaffiliated Program Operators (any non-CU Program Operator) shall comply with the following minimum requirements in section 4.3.

MRS reserves the right to refuse service to Program Operators who do not comply with this policy. All Program Operators must submit the requested information and/or their organizations published policy, which shows compliance with the Mountain Research Station minimum requirements. All Program Operators must submit the required information a minimum of 30 days prior to their program date at the MRS. (Participant roster and Participant Notice of Risk and Waiver forms may be submitted up to 1 weeks before the event).

BACKGROUND CHECKS, TRAINING, AND INSURANCE

4.3.1. ☐ Background Checks: The Program Operator shall conduct annual background checks for staff and volunteers who will work/volunteer in its Program for Children, specifically all staff/volunteers that will be participating at their event at the Mountain Research Station.

4.3.2. ☐ CPR/First Aid Training: At a minimum, the Program operator must acknowledge that at least one of their staff/volunteer at the MRS event is currently certified in basic CPR/First Aid. For groups that plan to split geographically while at the MRS each group must include at least one staff/volunteer member who is currently certified in basic CPR/First Aid.

FORMS

4.3.3. ☐ Participant List: Provide a complete list of names of all participants. Note staff/volunteers/group leads/etc.

4.3.4. ☐ Participant Notice of Risk and Waiver: All participants (staff/volunteers/participants) must complete the Mountain Research Station "Participant Notice of Risk and Waiver" form. An emergency contact/phone number must be provided on this form. Minors must have the form signed by their parent or guardian.

4.3.5. ☐ Requests for accommodation of health and disability issues: A written statement must be provided requesting any accommodations for health and disability issues, allergies, or special dietary needs. If no accommodations are required, please provide a written statement stating so.

University of Colorado Boulder

REQUIRED OPERATION PROTOCOLS

4.3.6. ☐ In-Camp Staff/volunteer Ratios: Staff/volunteers who are on duty with campers in units or living groups and in general camp activities must meet the following minimums. Note that day-only and overnight minimums are different. Day-only staff/volunteer to camper ratios may be modified on a case-by-case basis prior to the event. ***Two staff/volunteer members are required on all overnight stays and require at least one staff/volunteer of the same sex as the attending campers.**

In-Camp Day-only Staff/Volunteer to Camper Maximum Ratios		
Camper Age	**Staff or Volunteer/Camper Max Ratio**	**Comments**
5 years and younger	1:6	-
6–8 years	1:8	-
9–14 years	1:10	-
15-18 years	1:12	-

In-Camp OVERNIGHT Staff/Volunteer to Camper Max Ratios		
Camper Age	**Staff or Volunteer/Camper Max Ratio***	**Comments**
5 years and younger	1:5	Minimum of 2 staff/volunteer for all overnights, see * note above
6–8 years	1:6	Minimum of 2 staff/volunteer for all overnights, see * note above
9–14 years	1:8	Minimum of 2 staff/volunteer for all overnights, see * note above
15-18 years	1:10	Minimum of 2 staff/volunteer for all overnights, see * note above

4.3.7. Out of Camp Staff/Volunteer Ratios: Staff/Volunteer ratios outside of camp shall at a minimum meet the "In-Camp Day-only staff/volunteer to Camper Max Ratios ". Additional staff/volunteer requirements are at the discretion of the MRS and the Program Operator. See section 5 – "Required Acknowledgement" for further information.

4.3.8. ☐ Staff/volunteer age: staff/volunteers shall be eighteen (18) years of age or older. All staff/volunteer shall be at least two (2) years older than the minors with whom they are working.

University of Colorado Boulder

5. REQUIRED ACKNOWLEDGEMENT

As a condition for operating a program with minors at the Mountain Research Station (MRS), all Program Operators shall acknowledge the below general conditions and behavioral standards. This checklist must be signed and returned to the Mountain Research Station.

General Conditions

- ☐ Failure to meet any of the requirement in the Mountain Research Station Child Protection Policy (including providing documentation and verification of items in Section 4.) is grounds for the MRS to refuse service.
- ☐ Program operators are 100% responsible to monitor and track their group. The MRS is not supervision responsible in any case.
- ☐ The MRS is a University of Colorado facility. No smoking at any time or in any location is allowed at the MRS facility.
- ☐ All events with minors have a no alcohol/no-controlled substances policy for all staff/volunteer and participants.
- ☐ The MRS will not provide transportation for any minors within or outside the MRS facility (unless in the case of an emergency). Program Operators are responsible for their group's transportation.
- ☐ Out of camp staff/volunteer to camper ratio: Consider the age and needs of your campers. The destination will also affect recommended supervision ratios; for instance, your ratios might be very different if your group is taking a slow guided nature tour versus an all day hike where the group's abilities are not matched. Be sure to think through possible scenarios at each location before setting your final ratios. What if a camper doesn't want to participate in a specific activity? Do you have any campers attending who have special needs?

Do

- ☐ Maintain a high standard of personal behavior when interacting with minors.
- ☐ Treat minors consistently, fairly and with consideration, respect and dignity; listen and interact with minors and provide positive reinforcement.
- ☐ Be friendly but maintain appropriate physical boundaries and only touch minors when necessary and only in ways that are appropriate, public and non-sexual; be aware of how others might perceive or misinterpret your actions or intentions.
- ☐ Maintain discipline and discourage inappropriate behavior by minors.
- ☐ Consult with adult supervisors when uncertain about a situation or need help with misbehaving minors.
- ☐ Comply with mandatory reporting regulations and cooperate fully in any investigation of abuse of minors.

Initial_____

University of Colorado Boulder

Don't

- Be alone with a minor. If one-on-one interaction is necessary, the interaction must take place in an area visible to others to ensure there is no opportunity for privacy.
- Enter a facility in use by a minor such as a bathroom, locker room, residence hall room, or similar area without another adult present; **do** utilize buddy system where minors of same sex accompany each other.
- Sleep in the same accommodations with a minor, unless you are a parent or guardian of the minor.
- Engage in communications with minors via email, texting, Facebook, Twitter or similar forms of electronic or social media unless it is related to the program and another adult is included on the communication.
- Have contact with a minor outside of the program (e.g., babysitting, home visits).
- Provide transportation to a minor participating in the program who is not your own unless doing so is an acknowledged component of a program—minors may be transported by Public Safety in university vehicles and via ambulance.
- Smoke, use tobacco products, possess or be under the influence of alcohol, marijuana or illegal drugs at any time while working with minors; provide alcohol, marijuana or illegal drugs to any minor.
- Provide prescription or over-the-counter medication to any minor unless specifically authorized in writing by the parent/guardian as being required for the minor's care or the minor's emergency treatment.
- Make sexual materials in any form available to minors or assist them in any way in gaining access to such materials;
- Behave in a manner that is sexually provocative.
- Give gifts to minors independent of gifts provided by the program.
- Take photos or videos of a minor with personal cell phones or cameras where privacy is expected (showers, restrooms).
- Engage in abusive conduct; hit, physically assault or inappropriately touch minors; use language or provide inappropriate, profane, offensive or abusive comments; shame, belittle or degrade minors or perpetrate any form of emotional abuse.

Required Acknowledgement:

As a Program Operator, I acknowledge the above general conditions and behavioral standards and acknowledge that these conditions and standards have been communicated to all of my staff/volunteer who will be supervising minors at the Mountains Research Station.

_____

Organization Name

_____

Dates of activity at the Mountain Research Station

_____

Print Name

_____ _____

Signature Date

6. CHECKLIST: Program for Children @ MRS

This checklist is a summary of the required inputs to conduct a Program for Children at the University of Colorado Mountain Research Station. See sections 1-5 of this document for full details.

PLEASE COMPLETE/SIGN THIS FORM, SCAN, AND RETURN ALONG WITH ALL REQUIRED DOCUMENTS.

University of Colorado Program Operators **ONLY**

- ☐ 4.1.1 : Complete the CU "ECI Children's Program Submission Form" (annually)

Unaffiliated Program Operators **ONLY** (applies to any non-University of Colorado Program Operator)

- ☐ 4.2.1 : Use Agreement - Sign and return.
- ☐ 4.2.2 : Certificate of Insurance - Submit a copy of your certificate of insurance, which meets minimum requirements specified in section 4.2.2.

ALL Program Operators. Complete this section after reviewing requirements in this document.

- ☐ 4.3.1 : Background Checks for all Program Staff/Volunteers
  - o _____Initial here to acknowledge compliance.
- ☐ 4.3.2 : CPR/First Aid training certification
  - o _____Initial here to acknowledge compliance.
- ☐ 4.3.3 : Submit a list of all participants - Allowed up to 1 week prior.
- ☐ 4.3.4 : Submit signed waivers for all participants – Allowed up to 1 week prior.
- ☐ 4.3.5 : Accommodation of health and disability issues –
  - o Write requests here or confirm no special accommodations needed._____
    _____
- ☐ 4.3.6 : Staff/volunteer to camper ratio
  - o _____Initial here to acknowledge compliance OR request variance with explanation._____
    _____
- ☐ 4.3.8 : Staff / volunteer age
  - o _____Initial here to acknowledge compliance.
- ☐ 5.0 : **REQUIRED ACKNOWLEDGEMENT** – Initial/Sign and return both pages from section 5.

7. Document History

7.1. Effective Date – April 7th, 2017

Revision	Date	Comments
Rev 0	4/07/2017	Initial release
Rev 1	1/03/2018	Formatting updates to section 6, Appendix added

7.2. Approved By – Bill Bowman, Director of Mountain Research Station

7.3. Author(s) – Kris Hess, Mountain Research Station Manager

University of Colorado Boulder

8. Appendix

Example certificate of insurance

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 08/11/2004

PRODUCER FAX
Name of Insurance Broker/Agent
Street Address
City, State Zip
1

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED Named Insured (Primary)
Street Address
City, State, Zip

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Name of Insurance Company	
INSURER B: Name of Insurance Company	
INSURER C: Name of Insurance Company	
INSURER D:	
INSURER E:	

COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC	PROVIDE POLICY # HERE	Inception Date	Expiration Date	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 1,000,000 $ 50,000 $ 5,000 $ 1,000,000 $ 2,000,000 $ 2,000,000
B		AUTOMOBILE LIABILITY [ ] ANY AUTO [X] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [X] HIRED AUTOS [X] NON-OWNED AUTOS	PROVIDE POLICY # HERE	Inception Date	Expiration Date	COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)	$ 1,000,000 $ $ $
		GARAGE LIABILITY [ ] ANY AUTO				AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EA ACC AGG	$ $ $
		EXCESS/UMBRELLA LIABILITY [ ] OCCUR [ ] CLAIMS MADE [ ] DEDUCTIBLE [ ] RETENTION $				EACH OCCURRENCE AGGREGATE	$ $ $ $ $
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	PROVIDE POLICY # HERE	Inception Date	Expiration Date	[X] WC STATU-TORY LIMITS [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ 100,000 $ 100,000 $ 500,000
		OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
The Regents of the University of Colorado, a body corporate, is an Additional Insured as respects General Liability.

CERTIFICATE HOLDER

University of Colorado
University Risk Management
1800 Grant Street
Suite 700
Denver, CO 80203-1187

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25 (2001/08) ©ACORD CORPORATION 1988