



# CRR: Safety of Minors

## Compliance Risk Areas

Compliance Risk Areas	Related Governing Laws, Rules, Regulations, or University Policies
Mandatory reporting of a good faith belief that a minor is being physically or sexually abused or neglected	<ul style="list-style-type: none"><li>• Minnesota Statute 626.556: Reporting of Maltreatment of Minors</li><li>• Board of Regents Policy: Safety of Minors</li><li>• Administrative Policy: Safety of Minors</li></ul>
Registration of events or programs intended for minors	<ul style="list-style-type: none"><li>• Administrative Policy: Safety of Minors</li></ul>
Completion of a criminal background check for program staff, both upon hire or start of service and every three years thereafter	<ul style="list-style-type: none"><li>• Board of Regents Policy: Safety of Minors</li><li>• Administrative Policy: Safety of Minors</li><li>• Administrative Policy: Background Checks and Verifications</li></ul>
Completion of a University-wide web-based training course, every three years	<ul style="list-style-type: none"><li>• Board of Regents Policy: Safety of Minors</li><li>• Administrative Policy: Safety of Minors</li></ul>
Compliance with the health and safety measures specified in the appendix	<ul style="list-style-type: none"><li>• Board of Regents Policy: Safety of Minors</li><li>• Administrative Policy: Safety of Minors</li></ul>
Non-University organizations must certify that individuals working with minors have received training and undergone the criminal background check	<ul style="list-style-type: none"><li>• Administrative Policy: Safety of Minors</li></ul>

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## General compliance question(s)

1. How is compliance with the policy monitored?
2. What is the frequency of the monitoring?
3. What are the typical noncompliance issues found and how are they corrected?

## Mandatory reporting of a good faith belief that a minor is being physically or sexually abused or neglected

1. Describe any events since the last assessment period.
  - a. What corrective measures were taken with the individual who failed to meet the specified reporting requirement?

## Registration of events or program intended for minors

1. How is it verified that the registration site contains information on all programs for minors across the University system?
2. Is the registration site maintained regularly?
3. What is the frequency of this maintenance?
4. Have programs been identified that did not register within the required time period? If yes, what corrective action was taken?

Please provide a copy of the e-communication to program staff requesting that their registration information be reviewed and refreshed if needed.

## Background checks

1. What verification is done at a central level that program staff are completing their background checks before participating in a program for minors?
2. Who is tracking the "every three years" requirement? How is this requirement enforcement monitored?
3. Have any of the background checks identified issues that would make the individual unsuitable to work with minors (OHR)? Have the units enforced the outcomes by not

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allowing individuals in their programs?

## Training

1. How frequently is the training requirement to complete the web-based training course every three years verified? By whom and how?
2. How is the training documented and reported on at a program and University or campus wide level?
3. When it's confirmed that someone is out of compliance with this requirement, what action is taken? What action has been taken to date in this area?

## Health and safety measures

1. How is it ensured that program staffs receive orientation to the position, including staff/participant interactions, etc.?
2. Is there documentation or random site inspections to ensure that a minimum of two program staff are on duty (for the ratios provided)? How frequently is this verified/monitored? Where is it documented that two program staff (age 21 or older) are present at all times when the program involves an overnight stay?
3. In what way do the programs establish and communicate expectations (standards) for program staff behavior when interacting with minors, including the six standards referencing in the Appendix? Is it documented by the programs?
4. There is a requirement to have plans in place to change facilities or modify activities for participants with special needs as well as for extreme weather. What do those plans typically look like?
5. How is it confirmed that the minimum standards required for overnight lodging are followed? Have accommodations been made for minors with disabilities and transgender minors?
6. Are any program plans reviewed for the safe movement of minors? How frequently?
7. In what way do programs collect and have easy access to information on each participant include health histories, medications, etc.? How is this confirmed? Is this information handled according to the applicable HIPAA regulations?
8. How frequently are emergency plans for programs reviewed? Have they been

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comprehensive enough?

9. Does monitoring occur to confirm that programs are obtaining a required signed release of liability from all parents/guardians of minors prior to participation? If yes, how often and how many programs annually?

## Non-University organizations using University facilities

1. Per policy, has the University reviewed any of the health and safety plans for a program event? What were the outcomes?
2. Is the certification of training and criminal background checking verified by anyone within the University? What document is there and where is it retained?
3. If an event has a specific staff to minor ratio, who is verifying that before the event begins?

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