

MONITORING REPORT:

Executive Limitations Policies

#1 Treatment of Members, Friends and Visitors

May 2015

POLICY EL #1: TREATMENT OF MEMBERS, FRIENDS, AND VISITORS

With respect to interactions with members, friends and visitors of the church, the Executive Team shall not cause or allow conditions, procedures, or decisions that are unsafe, disrespectful, unnecessarily intrusive, or that fail to provide appropriate confidentiality and privacy.

EXECUTIVE TEAM INTERPRETATION:

- “Members, friends and visitors of the church” means anyone who has direct and personal contact with First Unitarian Church in any capacity.
- “Unsafe, disrespectful, unnecessarily intrusive” means that the Executive Team will not allow through action or inaction conditions at the church or a church sponsored event to be unsafe, allow a team, staff or minister to be disrespectful to someone or ask for personal information that is not necessary to the context or discussion.
- “Fail to provide appropriate confidentiality and privacy” means all of the information of a private and confidential nature shared with the Executive Team, and the entities that report to it, will be secured and shared only on a need to know basis with the appropriate parties.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) Our members, friends and visitors are not made to be unsafe.
- 2) None of our members, friends and visitors report to us that they have been treated with disrespect.
- 3) The privacy and confidentiality of our members, friends, and visitors is maintained; specifically in the areas of pastoral care and financial giving.

EVIDENCE OF COMPLIANCE:

- 1) We have received no reports that through action or inaction, any of our members, friends or visitors have been made unsafe.
- 2) We have received no reports that our members, friends or visitors have been treated with disrespect.

- 3) There have been no breaches of the privacy of our members, friends, or visitors, specifically in the area of pastoral care and financial giving. If people have requested that they not be listed in the directory, this is noted and they are not included when the directory is generated. In the instances when pastoral information about members was shared during a worship service, great care was taken to work with the individuals or families involved for both accuracy of information and how much to share and how it should be shared.

ASSESSMENT:

The Executive Team reports compliance.

Accordingly, the Executive Team shall not:

1. Elicit information from members for which there is no clear necessity.

EXECUTIVE TEAM INTERPRETATION:

- “Elicit information” means any process or form by which the Executive Team, or any entity that reports to the Executive Team, would gather information from the members, friends, or visitors of the church.
- “For which there is no clear necessity” means all of the information gathered from members, friends or visitors needs to have a clear purpose and use.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) We will be compliant with this policy when the Executive Team has clearly established procedures that include forms or documents that ask for specific information from members, friends and visitors.
- 2) The information on these forms is linked to a specific purpose outlined in the procedures that use those forms.

EVIDENCE OF COMPLIANCE:

- 1) Currently the Executive Team uses the following forms, in either paper or electronic format, to elicit information from our members, friends, and visitors: pledge forms, electronic giving forms, CYRE and other program registration, visitor forms, Ends Survey and other surveys, and the membership directory and member profile form.
- 2) All of these forms have a clear procedure attached to them so that the information gathered is securely stored in a database and used only for its intended purpose.

ASSESSMENT:

The Executive Team reports compliance.

2. Use methods of collecting, reviewing, transmitting, or storing member information that fail to protect against improper access to the material elicited.

EXECUTIVE TEAM INTERPRETATION:

- “Collecting, reviewing, transmitting, or storing member information” means that for each of these actions the Executive Team must ensure that the information is handled in a secure manner.
- “Improper access to the material elicited” means that the information gathered for a specific purpose, as outlined in Executive Team procedure, is made available only to the appropriate parties.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) We will be in compliance with this policy when the Executive Team has procedures for collecting, reviewing, transmitting and storing member information we have elicited.
- 2) In all of the above procedures the information must be secure, meaning that access is not given to an inappropriate party.

EVIDENCE OF COMPLIANCE:

- 1) Collecting Procedure—Ushers use a secure drop box for pledges, donations and attendance sheets; visitor forms and intent to join forms are delivered to the Assistant Minister and Membership Team. Pledge forms and electronic giving forms are received in both paper and electronic form. All financial information is kept in locked offices of Congregational Administrator and Business Manager. Electronic financial records are kept in a password-protected database in the church network.
- 2) Reviewing Procedure—The CYRE Team maintains a spreadsheet with the registration information on it and only members of the Team and the DRE have access; the Pastoral Care Teams share pastoral information only among themselves as is needed for coordination of pastoral care responses and trains annually about confidentiality; Church Windows software, which contains the vast majority of the membership information, is password protected and accessible only to those staff members who need access for their responsibilities.
- 3) Transmitting Procedure—We have passwords on all server profiles; the office wireless network is non-broadcast and WEP encoded.

- 4) Storing Procedure—The church office server automatically backs up to a secured mirror hard drive as well as an online backup at PCGI, our computer services vendor; flash drives that serve as backup to some personnel information are stored separately and password protected; sensitive paper files are maintained in a locked filing cabinet and any data stored virtually uses secure cloud services..
- 5) All of the above procedures have been working.

ASSESSMENT:

The Executive Team reports compliance.

3. Maintain facilities that fail to provide a reasonable level of safety, access and functionality.

EXECUTIVE TEAM INTERPRETATION:

- “Maintain facilities” means that the staff and volunteers are regularly cleaning and fixing items within the church that need to be addressed.
- “Reasonable level of safety” means that people in the building or on the grounds are not subject to physical harm or the threat of physical harm.
- “Reasonable level of...access” means that it is possible for the appropriate persons to enter the building while maintaining a level of safety and that our building is accessible to people with mobility issues.
- “Reasonable level of...functionality” means that the building is useful and makes possible the events within it. Ex. there is space for worship, an activity that promotes the Ends, in the Sanctuary and Brunner Chapel.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) We will be in compliance with this policy if we have established procedures for building and grounds maintenance, security, building access, and ensuring the building is used for the correct purpose.
- 2) If the above procedures are in place and followed, then we will be in compliance.

EVIDENCE OF COMPLIANCE:

- 1) Our building maintenance procedures include nightly cleaning and security checks by the Night Custodian in the evening, and by the Building Supervisor during the day; on Sunday mornings, when the building is used the most, the one custodian is on duty until 1 PM.

- 2) External security cameras on each of the entrances are operative, recording to disks 24/7. and are monitored from a console on the Building Supervisor's desk, as needed.
- 3) The Building Supervisor and the Buildings and Grounds Team conduct an annual safety audit. This was last done in February 2015. Details regarding the safety audit and results are included under EL 2.2, below. Issues identified have either been corrected or a plan to correct the issues is in process.
- 4) The Executive Team monitors access to the building through two doors which have remote access; one at the entrance of EEC and one by the church offices. At night and on weekends, renters and church groups are given security codes to enter through side doors if the night custodian is not on duty. Rooms, offices, the sanctuary, and Parish Hall when not in use by renters, church groups, or custodial staff are kept locked. All staff has keys to the doors both external and internal to the church.
- 5) The Congregational Administrator maintains the church's very complex calendar that allows us to organize the many groups and renters that use the building at any given moment. These processes include communication to the custodial staff for set up, security and clean up purposes.
- 6) The building is separated into two sections, which means that handicap accessibility exists in both halves, however, it is not possible for people with mobility issues to move from one section of the building to the other and remain indoors. In addition, the only handicap accessible bathroom in the Sanctuary side of the building is located in the front of the Sanctuary itself, and using the bathroom during services or other activities is potentially embarrassing.
- 7) All of the above procedures have been followed.

ASSESSMENT:

The Executive Team reports compliance in all areas except with regard to handicap access. The ET reports non-compliance with regard to handicap access. The plan to come into compliance will be addressed in the process working through our many building capital and maintenance projects.

4. Fail to establish with members a clear understanding of what may be expected and what may not be expected from the service offered.

EXECUTIVE TEAM INTERPRETATION:

- “What may be expected and what may not be expected” means in setting expectation for services rendered by the Executive Team and any of its subparts, the Executive Team must be as clear as possible in communicating those expectations to the members.

- “Service offered” means that the following services are provided to members at some point in the life of the church: worship, pastoral care, religious education, rites of passage, social action, spiritual development, leadership opportunities, and fellowship.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) We will be in compliance with this policy when the Executive Team creates and executes processes that communicate our goals and programs to the members of the First Unitarian Church. Ends Achievements Monitoring Reports based on the Ends as established by the Board will be one of the processes.
- 2) The expectations of the members of First Unitarian Church are congruent with the outcomes of the services delivered to them.

EVIDENCE OF COMPLIANCE:

- 1) During the newcomer classes prospective members are told about the “Responsibilities and Benefits of Membership.”
- 2) The Assistant Minister and Publications Assistant collaborated to expand the content included in the Group Activities and Social Justice Teams brochure and related content on the church website. It is distributed in the newcomer classes, visitor gifts, new member packets, at the welcome table, and throughout the church building.
- 3) There are several processes relating to communications internal to the church. Clear guidelines for these are available in the church office and in the Members area of the church website. As new procedures are developed, changes are communicated to staff and church membership.
- 4) In adult religious exploration classes taught, the instructor typically reviews goals and expectations for the class at its inception.

ASSESSMENT:

The Executive Team reports compliance.

- 3) All members of staff, including the ministers, meet regularly with their supervisors and collectively as a group. This allows for both personal and professional struggles and celebrations to be expressed. This includes our morning staff check in, occurring two or three days per week, individual meetings between supervisors and employees, the Business Manager's Monday meeting with the CEO, the Wednesday meeting between the Senior and Assistant Minister, and others.
- 4) The Executive Team responds to concerns and complaints of volunteers as they are brought to our attention.

ASSESSMENT:

The Executive Team reports compliance.

Furthermore, the Executive Team shall not:

1. Operate without or fail to comply with written personnel policies that clarify personnel rules for staff, provide for effective handling of grievances, and protect against wrongful conditions, such as grossly preferential treatment for personal reasons.

EXECUTIVE TEAM INTERPRETATION:

- “Operate without or fail to comply with written personnel policies” means that the Executive Team’s Personnel Procedures will be written down in a central location.
- “Clarify personnel rules for staff” means the Personnel Manual will include a statement on personal conduct for staff.
- “Provide for effective handling of grievances” means that the Personnel Manual will include a process for handling complaints and grievances.
- “Protect against wrongful conditions such as grossly preferential treatment” means that there are rules in the Personnel Manual that prevent conflicts of interest and nepotism.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) We will be in compliance with this policy when we have a Personnel Policy and Procedures Manual that includes rules for staff, a grievance procedure, and protects against conflicts of interest.
- 2) We follow the above procedures outlined in the Manual.

RATIONALE:

The Personnel Team is composed of church members whose professional lives were spent in human resources. Many of the Executive Team’s procedures are culled from this collective experience. Other policies in the Manual have come from, or are inspired by, two Alban Institute sources: When Moses Meets Aaron: Staffing and Supervision in Large Congregations by Gil Rendle and Susan Beaumont and The Alban Personnel Handbook by Erwin Berry.

EVIDENCE OF COMPLIANCE:

1. The Personnel Manual is published on the old church website archive in the members' area.
2. The following procedures are addressed in the Personnel Manual: Personal Conduct (pp. 15-17); Preventing Hiring of Family Members (p. 4); and Grievance/Complaint Procedure (p. 14).
3. Examples of compliance with the Manual include:
 - Payments to the UUA Retirement Plan have been made monthly by the 15th of each month.
 - We follow Delaware hiring regulations for employees under 18.
 - Staff members are paid holiday pay for official office holidays, including Christmas.

ASSESSMENT:

The Executive Team reports compliance.

2. Subject staff/volunteer to unsafe or unhealthy conditions.

EXECUTIVE TEAM INTERPRETATION:

- Subject staff/volunteer to unsafe...conditions.” means that the staff and volunteers are not placed in a position of danger through the course of performing their job.
- Subject staff/volunteer to...unhealthy conditions.” means that the staff and volunteers are not exposed to unhealthy conditions or circumstance through the course of performing their job.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) We will be in compliance with this policy when the Executive Team conducts an annual safety audit of the building and the grounds.
- 2) The Executive Team has created and executed procedures on security and building and grounds maintenance. Ex. snow and ice removal.

RATIONALE:

We crafted the safety audit checklist from various sources and adapted them to our building's unique situation. Among the more useful sources in this regard is Brotherhood Mutual Insurance Company's website. Their safety lists are often a good base for an audit: <http://brotherhoodmutual.com/safetycentral/resources5-Checklists-BuildingsProperty.htm>

EVIDENCE OF COMPLIANCE:

- 1) The safety audit was conducted by the Building Supervisor and a member of the Buildings and Grounds Team in February 2015.
- 2) Deficiencies are in the process of being corrected. Items that have been corrected so far include:
 - a. Red bio hazard bags in all first aid kits
 - b. Basement storage areas and furnace room cleaned up
 - c. Hang fire extinguishers
 - d. Safety lock on mower room/garage
 - e. Room 27 outlet cover replaced
- 3) Plans to correct other issues include:
 - a. GFCI outlets where needed in some bathrooms
 - b. Clutter in Chanel Ante Room and Candle Closet
 - c. Move extension cords and clutter as needed.
 - d. Closet clutter in CYRE storage areas needs to be addressed by CYRE volunteers.
- 4) Snow removal is prompt, and every reasonable effort is made to reduce ice patches on sidewalks and reduce the likelihood of falls. Unfortunately, ice conditions this winter were very severe. We made buckets of sand available at doorways so that volunteers had easy access to it if they noticed ice conditions that needed attention. Building and Grounds team developed a list of volunteers who handled snow removal while we were without a full custodial staff this past winter. EEC staff, during weekdays, also assist with spreading ice melt and sand to support efforts of paid staff.

ASSESSMENT:

The Executive Team reports non-compliance since we have not yet completed all the work needed to correct issues that were identified in the February safety audit. Our plan to come into compliance is to complete the work.

3. Fail to post in a prominent place current, established, internal complaint procedures or prevent staff/volunteers from using them.

EXECUTIVE TEAM INTERPRETATION:

- “Post in a prominent place” means that the Personnel Manual is available in both its print and electronic forms so as to make it available to the full membership and staff of First Unitarian Church.
- “Internal complaint procedures” means that the Personnel Manual will include a complaint procedure for paid staff. The Executive Team created a procedure for volunteer staff, lay leaders, and the general membership to use as a complaint/grievance process.
- “Prevent staff/volunteers from using them” means the Executive Team, Teams under the Executive Team, and staff who act as supervisors, will not interfere if there is a complaint a staff member needs to raise.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) The Personnel Manual contains a process of complaints and grievances for paid staff to follow.
- 2) The Executive Team has written a complaint/grievance procedure for volunteers and members of the church.
- 3) The above processes are well publicized and available to the people who need or wish to utilize them.
- 4) The Executive Team, or entities that report to the Executive Team, do not interfere with the grievance/complaint process.

EVIDENCE OF COMPLIANCE:

- 1) The Grievance and Complaint Procedure appears on page 16 of the Personnel Manual (see above under evidence for EL 2.1)
- 2) The Executive Team’s procedure for complaints and grievances around volunteers and members was approved by the Board in December 2012. A copy of this procedure is available on our old web site in the members’ area under the “How We Do Things” section. The old section is still available on our new site as an archive.
- 3) Our new employee, Anthony Chase, received a copy of the Personnel Manual and signed a form to document that he received it.
- 4) No staff or volunteer has asked to utilize the grievance procedure in the past year.

ASSESSMENT:

The Executive Team reports compliance.

- 4. Prevent staff from grieving to the Executive Team when:**
- a) internal grievance procedures have been exhausted and**
 - b) the employee alleges either that**
 - (i) Board policy has been violated to his/her detriment or**
 - (ii) Board policy does not adequately protect his/her human rights.**

EXECUTIVE TEAM INTERPRETATION:

- “Prevent staff from grieving to the Executive Team” means that the Executive Team will listen to complaints and grievances from paid and volunteer staff who wish to bring them to our attention.
- “Internal grievance procedures have been exhausted” means that the Executive Team is the final arbiter of a grievance from both volunteers and paid staff.
- “Board policy has been violated to his/her detriment” means that the person bringing the grievance must demonstrate that a written Board policy (End, Limitation, BETL or Governing Process) has worked to their detriment.
- “Board policy does not adequately protect his/her human rights” means that one of the above classes of Board policy has in some way violated their rights.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) We will be in compliance with this policy when there is a grievance or complaint and the Executive Team meets to address it immediately.
- 2) If there are any Board policies that come into play around a grievance, then the Executive Team will inform the Board President, or their designee, of the impact of the Board’s policy on paid or volunteer staff.
- 3) If the above is the case, the Executive Team will make a recommendation to change either the Board’s policy or the Executive Team’s interpretation of the Board policy in question.

EVIDENCE OF COMPLIANCE:

- 1) No grievances have been filed since our last monitoring report.
- 2) Disputes or other issues between staff have been handled by the staff members and their supervisors and have not blossomed into full out grievances.

ASSESSMENT:

The Executive Team reports compliance.

5. Prevent staff from grieving to the Board when internal grievance procedures have been exhausted including grieving to the Executive Team.

EXECUTIVE TEAM INTERPRETATION:

- “Prevent staff from grieving to the Board” means that the staff member may contact the Board President to have their grievance added to a future Board agenda without Executive Team interference.
- “When internal grievance procedures have been exhausted” means that the staff member has already fully exercised the grievance procedures detailed in the Personnel Manual before filing a grievance with the Board.

HOW COMPLIANCE WILL BE DEMONSTRATED:

- 1) The Executive Team’s grievance procedure will be used to its fullest extent.
- 2) The Executive Team will not block the staff member from contacting the Board and having their grievance placed on the agenda of a future Board meeting.

EVIDENCE OF COMPLIANCE:

- 1) No staff member has filed a grievance with the Executive Team or the Board in the past year.

ASSESSMENT:

The Executive Team reports compliance.

Respectfully Submitted by the Executive Team,

Rev. Dr. Joshua Snyder
Rev. Michelle Collins
Marina VanRenssen
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