

# Guidelines for Protecting Minors On Campus

## Fayetteville State University

### 2019 Presenters

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Title IX Coordinator, Jessica Stevens-Tuttle

Police and Public Safety, Chief Renarde Earl, Lt. George Johnson

and Officer Robin Williams

Emergency Management, Melvin Lewis

Clery Compliance Officer, Erica Cooper

Safety, Cindi Wetherwax

Residence Life, Sylvia Tigs

Business Auxiliary Services, Donald Pearsall

One Card Office, Anthony Watson

Food Services, Joeroyal Evans

Featuring Guest Speakers: Ret. Col. Vinette Gordon, RN, Ms. Becky

Hermann, Physician's Assistant, and Dionne Hall, Certified Licensed

Counselor





# Protecting Minors On Campus

- This presentation is a general overview of the potential legal issues and risks involved with hosting minors on FSU's campus. The presentation also describes best practices for protecting minors.
- For more specific details, reach out to the contact person listed at the end of the presentation.

# Major Updates re Proposed UNC System Policy

- Expected effective date is May 2019
- Mandatory annual training of all staff of programs for minors
- Mandatory background compliance
  - Check every state of residence
  - Driving record clearance for anyone who will transport students
  - State and federal sex offender registry check
  - People with serious background issues cannot work with programs for children
- 3<sup>rd</sup> party camps required to comply with training and background check requirements too

# I. Legal Responsibility to Do What is Reasonable to Protect Minors From:

- Abuse and Neglect (NCGS 7B-301);
- Title IX Violations (20 U.S.C. Sections 1681-1688);
- ADA Violations (42 USC § 12182);
- Safety and Criminal Concerns (20 U.S.C. § 1092 (f)(1)(F), (f)(7), (i), and (j)); and
- Injuries In General (*Assessing Risk and Best Practices for Programs Involving Minors on Campus*, National Association of University Attorneys (2010))

# Requirements for Compliance

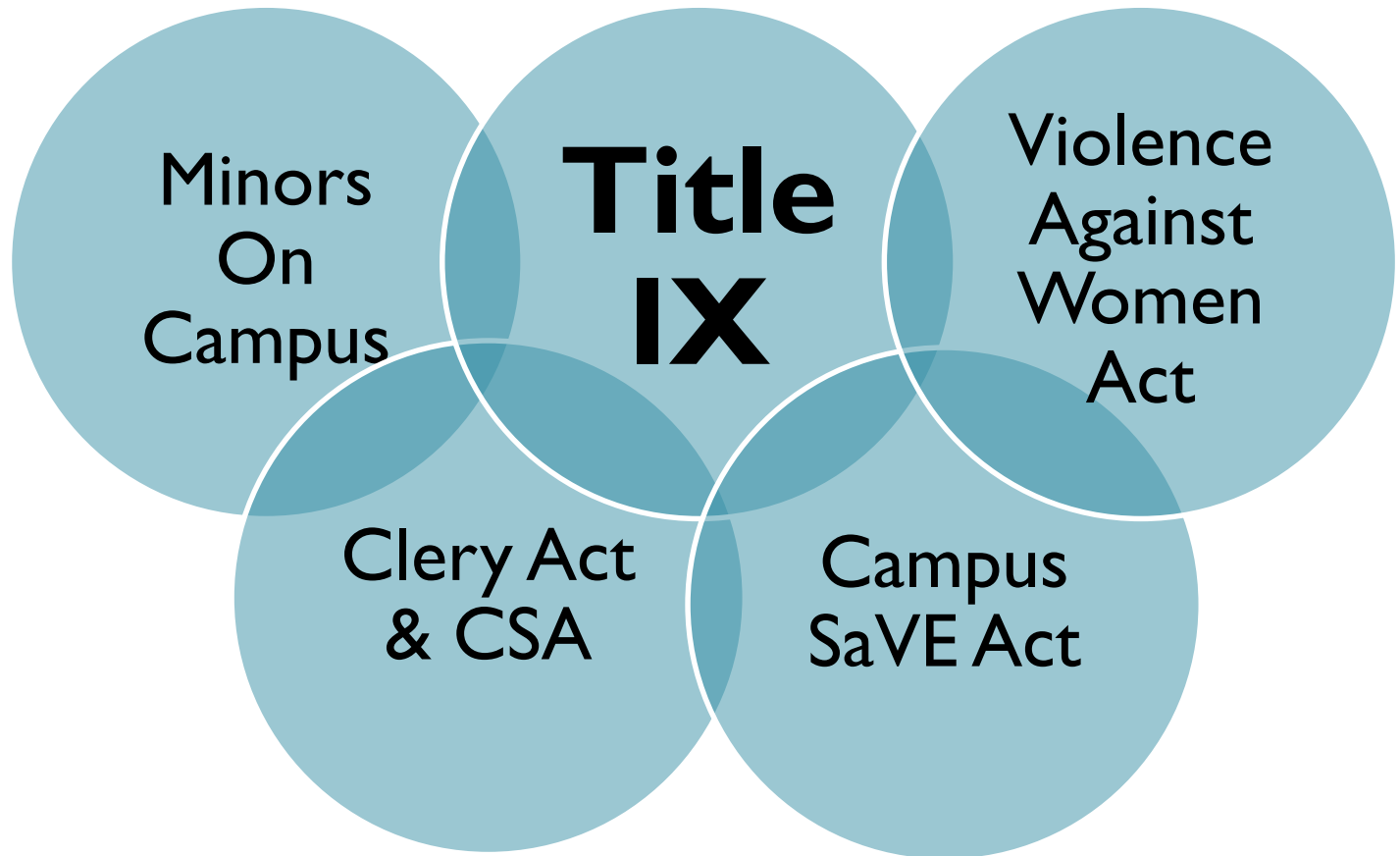
- Report any crimes to the University Police (\*1911) or on the LiveSafe App.
- Call \*1911 to report any health or safety emergency.
- Report abuse of any kind to Child Protective Services by calling at (910) 677-2450.
- Report to your director and the Title IX Coordinator (\*2325) any type of sexual discrimination, harassment, assault, violence.
- Ensure that someone on your staff is immediately available and trained in medication administration, CPR, First Aid, and Emergency Management.
- Have liability release forms. Please contact Legal Affairs.
- Complete background checks on ALL paid and unpaid staff, contractors, parent volunteers, student volunteers, and administrators. Contact Terrance Robinson in the Office of Legal Affairs (\*1145).
- Check sex offender registry. <http://sexoffender.ncsbi.gov/>
- Supervise ALL minors under age 16 at ALL times. (In the lab, under age 18).
- Put in place a medication administration policy and emergency preparedness plan.
- Have health forms on participants.



# **II. TITLE IX RESPONSIBILITIES**

2019 Summer Program Staff

# Safety and Compliance Efforts





# Legal Standards

- Federal Laws
- Federal Guidance
  - Department of Education Dear Colleague Letters, Resolution Agreements, Revised Sexual Harassment Guides, FAQs
- State Laws
- UNC System Policies & Guidance
- Fayetteville State University Policies



# Fayetteville State University Policies

<https://vimeo.com/137708714>

## Sexual Misconduct

- Stalking
- Relationship Violence
- Attempted or Completed Sexual Assault
- Attempted or Completed Sexual Touching
- Dating Violence and Domestic Violence
- Gender-based Bullying, Discrimination, Hazing, Intimidation, Coercion, Exploitation

## Harassment

- Quid Pro Quo
- Retaliation
- Hostile Environment
- Sexual

# Risks of Noncompliance

- DOE Revokes funding to Fayetteville State University
- FSU's Reputational Damage
  - Media coverage, viral social media campaigns, impact on applications and student retention
- Civil Liability
  - By Survivors
  - By Accused
- Fines
  - \$55,907 per Clery Act violation
  - 2016 – \$2.4 million Penn State – I I serious findings - Failure to comply with Clery Act
  - 2018 - \$1 million MSU – Underreported and misclassified incidents



**WHAT  
WOULD  
YOU DO?**



**On your way to Chick-Fil-A you hear Marc, a camp participant, arguing loudly with a someone near Founders' Circle. You hear Marc say, "Stop being crazy.... I love you.... come on you gotta know me by now it's been 2 weeks..."**

**While leaving the student center, you notice Marc has blood on his lips, cheek, and camp t-shirt.**

**Option A – Identify yourself as an FSU Employee; tell Marc to go wash up, guide him to the RJSC lobby bathroom, and call Campus Police. After connecting the responding Officer with Marc, return to your office and fill out the online Title IX report form.**

**Option B – Tell Marc he will need to leave the RSJC immediately and that he should go let his camp counselor/director know that he needs a new shirt.**

**Option C – Tell Marc, "Sometimes love stinks and I hope you sort things out with your loved one. You should Google 'Love Language' it super helpful for my last relationship."**



## Quiz:

# Am I a Responsible Employee?

- Have I been given the duty of reporting incidents of Sexual Misconduct to the Title IX Office?
- Do I have the authority to take action to redress Sexual Misconduct?



# Responsible Employees

- Fayetteville State University has designated certain employees and students as **Responsible Employees** under the Title IX Education Amendments Act and Campus Securities Authorities (the Clery Act)



# Fayetteville State University Responsible Employees

- All faculty
- All staff with supervisory duties over employees and/or students
- All staff and students with significant contacts with students
  - Resident Advisors, Orientation Leaders, SGA
  - All employees within Student Affairs
  - All employees within Admissions
  - All employees within Registrar
  - All employees within International Programs
  - All employees within Academic Resources Programs
  - All employees within the Department of Athletics
- All temporary, contract, and other campus staff

# What's your responsibility?



**COMPLETE  
MANDATED  
COMPLIAN  
CE  
TRAINING**



**BE AWARE  
SEE  
SOMETHING,  
SAY  
SOMETHING**



**IMMEDIATELY  
REPORT ALL  
INCIDENTS/  
POSSIBLE  
VIOLATIONS**



# Mandated Compliance Training

Attend Title IX Minors On Campus Training - May 14, 2019

Complete all Title IX online courses  
(Sent via email in November 2018)

To verify your completion, please email  
[titleix@uncfsu.edu](mailto:titleix@uncfsu.edu)

Review Sexual Harassment, Sexual  
Misconduct, Title IX and related  
Policies

<https://www.uncfsu.edu/faculty-and-staff/departments-and-offices/office-of-legal-affairs/policies-and-procedures>

# Be Aware; See Something, Say Something



**LEGAL AFFAIRS  
DISCUSSION**



**PUBLIC SAFETY  
DISCUSSION**

# Reporting Options

Email: [titleix@uncfsu.edu](mailto:titleix@uncfsu.edu)

Website: <http://uncfsu.edu/title-ix>

X 2325

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## Filing a Report

Individuals who desire to file a confidential report and receive private counseling should contact the Center for Personal Development at  [\(910\)672-1222/1203](tel:(910)672-1222) or the Cumberland County Rape Crisis Center at  [\(910\) 485-7273](tel:(910)485-7273).

Individuals are strongly encouraged to contact Campus Police immediately for your safety and evidence collections at  [\(910\) 672-1911](tel:(910)672-1911). Reporting to police will not affect your ability to pursue resolution through the University process. The University's process is independent of the criminal process.

The University's Prohibited Sexual Conduct Policy can be found here: [Prohibited Sexual Conduct Policy](#)

To file an incident report on-line please visit: [Sexual Misconduct Incident Report](#)

Reports outside of the university may be made [directly to the U.S. Department of Education](#)

# Responsible Employee Reporting

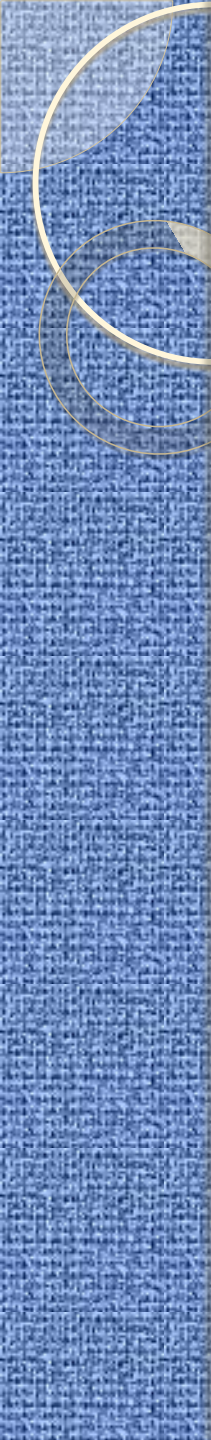
All employees and students are **required** to report any incident or allegation of sexual misconduct to the Title IX Office



If in doubt about who to report concerns or incidents to, any report can be made to the Title IX Office or Human Resources



**WHAT  
WOULD  
YOU DO?**



**Earl drops off a form in your office. You ask him how camp is going. Earl explains camp is good but his new friendship with his camp counselor is “kind of weird sometimes” and he’s not sure how to explain that he doesn’t want to talk about sex, or how good some other campers look in their t-shirts, and “he doesn’t really even understand the jokes about body parts, stories about a great weekend of partying and new sexual positions, and even politics” that his counselor makes often.**

**When you explain that inappropriate conversations and unwelcome comments are against our policies and you can link him up with support on campus, he immediately says “Nah, I don’t want my counselor to get in trouble... So I will just sort it out myself... Plus, I mean it is just chatting/ conversation anyway... it’s not like I am being touched by my counselor, invited to the parties, or anything like that.”**

**Option A – Explain to Earl that reaching out to our campus resources to get assistance and support for himself does not require that he files a police report or even a complaint with any office. He can receive all campus services, assistance, and resources because an incident occurred. After Earl leaves, you fill out the online Title IX report form.**

**Option B – Explain to Earl he needs to tell his camp director about the situation because he is too young to be discussing or even knowing about the topics the camp counselor is bringing up.**

**Option C – Explain to Earl that when someone is talking to him about topics he does not want to discuss, he does not have to speak to them. Encourage Earl to walk away from the camp counselor whenever comments or conversations occur that leave Earl feeling uncomfortable or that he feels are inappropriate.**

# Campus Resources

FSU Campus  
Police  
x 1775

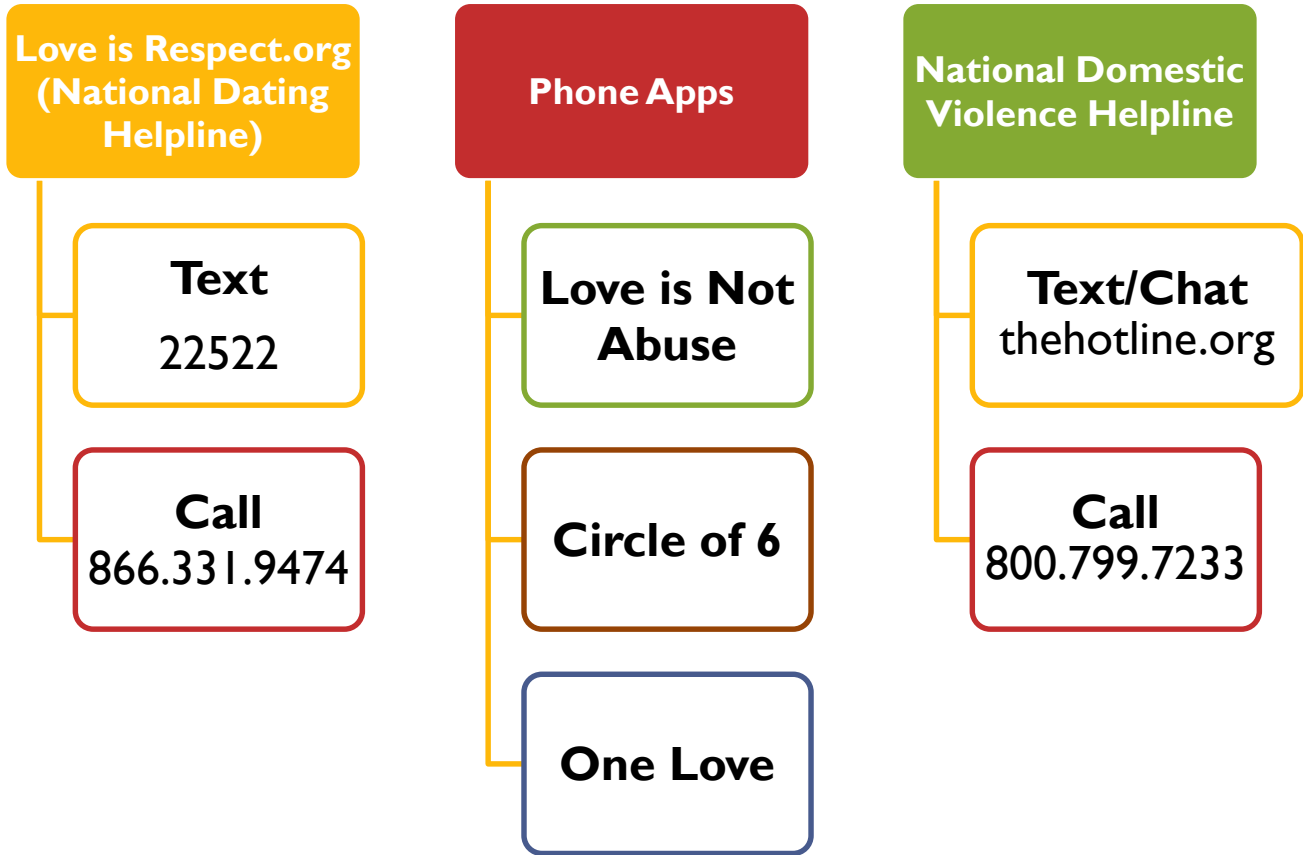
FSU Health  
Services  
X 1259

FSU Center for  
Personal  
Development  
x 1222



# Online Resources

- 24/7/365  
- Multiple languages





# FSU Title IX Team

- Chief Title IX Coordinator
  - Jessica Tuttle x 2325
- Deputy Title IX Investigators
  - Sherree Davis x 2213
  - Terri Tibbs x 1696
  - LaWanda Miller x 1440
- Deputies are assigned on a case by case basis to investigate complaints



### III. Recognizing Signs of Abuse and Neglect, Bullying, and Human Trafficking; Active Shooter Response

Chief Renarde Earl, Lt. George Johnson FSU Campus Police and Public  
Safety



# *Recognizing Signs of Abuse & Neglect*

The first step in helping abused or neglected children is to recognize the signs of child abuse and neglect.

We will review general signs that may signal the presence of child abuse, including signs associated with specific types of maltreatment such as physical abuse, neglect, sexual abuse, and emotional maltreatment.

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm)

Department of Social Work



# *Recognizing Signs of Abuse & Neglect*

## **Recognizing Child Abuse**

Signs that may signal the presence of child abuse or neglect.

### **The Child:**

- Shows sudden changes in behavior or school performance
- Has not received help for physical or medical problems brought to the parents' attention
- Has learning problems (or difficulty concentrating) that cannot be attributed to specific physical or psychological causes
- Is always watchful, as though preparing for something bad to happen
- Lacks adult supervision
- Is overly compliant, passive, or withdrawn
- Comes to school or other activities early, stays late, and does not want to go home

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

# *Recognizing Signs of Abuse & Neglect*

## **Recognizing Child Abuse**

### **The Parent:**

- Shows little concern for the child
- Denies the existence of—or blames the child for—the child's problems in school or at home
- Asks teachers or other caregivers to use harsh physical discipline if the child misbehaves
- Sees the child as entirely bad, worthless, or burdensome
- Demands a level of physical or academic performance the child cannot achieve
- Looks primarily to the child for care, attention, and satisfaction of emotional needs

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

Department of Social Work



# *Recognizing Signs of Abuse & Neglect*

## **Recognizing Child Abuse**

### **The Parent and Child:**

- Rarely touch or look at each other
- Consider their relationship entirely negative
- State that they do not like each other

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# Recognizing Signs of Abuse & Neglect

## Types of Abuse

We will review signs often associated with particular types of child abuse and neglect: *physical abuse, neglect, sexual abuse, and emotional abuse.*

It is important to note that these types of abuse are more typically found in *combination* than alone.

A physically abused child, for example, is often emotionally abused as well, and a sexually abused child also may be neglected.

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).



# Recognizing Signs of Abuse & Neglect

## Signs of Physical Abuse:

Consider the possibility of physical abuse when the **child**:

- Has unexplained injuries, ie. burns, bites, bruises, broken bones, or black eyes
- Has fading bruises or other marks noticeable after an absence from school
- Seems frightened of the parents and protests or cries when it is time to go home
- Shrinks at the approach of adults
- Reports injury by a parent or another adult caregiver

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

# *Recognizing Signs of Abuse & Neglect*

## **Signs of Physical Abuse:**

Consider the possibility of physical abuse when the **parent or other adult caregiver:**

- Offers conflicting, unconvincing, or no explanation for the child's injury
- Describes the child as "evil," or in some other very negative way
- Uses harsh physical discipline with the child
- Has a history of abuse as a child

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

# *Recognizing Signs of Abuse & Neglect*

## **Signs of Neglect**

Consider the possibility of neglect when the **child**:

- Is frequently absent from school
- Begg or steals food or money
- Lacks needed medical or dental care, immunizations, or glasses
- Is consistently dirty and has severe body odor
- Lacks sufficient clothing for the weather
- Abuses alcohol or other drugs
- States that there is no one at home to provide care

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# *Recognizing Signs of Abuse & Neglect*

## **Signs of Neglect**

Consider the possibility of neglect when the **parent or other adult caregiver**:

- Appears to be indifferent to the child
- Seems apathetic or depressed
- Behaves irrationally or in a bizarre manner
- Is abusing alcohol or other drugs

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

# Recognizing Signs of Abuse & Neglect

## Signs of Sexual Abuse

Consider the possibility of sexual abuse when the **child**:

- Has difficulty walking or sitting
- Suddenly refuses to change for gym or to participate in physical activities
- Reports nightmares or bedwetting
- Experiences a sudden change in appetite
- Demonstrates bizarre, sophisticated, or unusual sexual knowledge or behavior
- Becomes pregnant or contracts a venereal disease, particularly if under age 14
- Runs away
- Reports sexual abuse by a parent or another adult caregiver

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

# Recognizing Signs of Abuse & Neglect

## Signs of Sexual Abuse

Consider the possibility of sexual abuse when the **parent or other adult caregiver**:

- Is unduly protective of the child or severely limits the child's contact with other children, especially of the opposite sex
- Is secretive and isolated
- Is jealous or controlling with family members

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

# Recognizing Signs of Abuse & Neglect

## Signs of Emotional Maltreatment

Consider the possibility of emotional maltreatment when the **child**:

- Shows extremes in behavior, such as overly compliant or demanding behavior, extreme passivity, or aggression
- Is either inappropriately adult (parenting other children, for example) or inappropriately infantile (frequently rocking or head-banging, for example)
- Is delayed in physical or emotional development
- Has attempted suicide
- Reports a lack of attachment to the parent

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).

# *Recognizing Signs of Abuse & Neglect*

## **Signs of Emotional Maltreatment**

Consider the possibility of emotional maltreatment when the **parent or other adult caregiver**:

- Constantly blames, belittles, or berates the child
- Is unconcerned about the child and refuses to consider offers of help for the child's problems
- Overtly rejects the child

Child Welfare Information Gateway. Available online at [www.childwelfare.gov/pubs/factsheets/signs.cfm](http://www.childwelfare.gov/pubs/factsheets/signs.cfm).





# *Reporting Signs of Abuse and Neglect*

- First Step: Call campus police at \*1911 or use the LiveSafe App
- Call Child Protective Services at (910) 677-2450
- Be prepared to provide information and specifics about the possible abuse or neglect of the child

# *Human Trafficking – Red Flags*

- Exhibits change in behavior or school participation (unexplained absences)
- Homelessness, periodic homelessness of family
- History of running away from home
- Signs of abuse or inattentive caregivers (untreated illness or injury, bruises, scars, etc.)
- Signs of physical trauma, withdrawn behavior, depression, anxiety, or fear
- Hungry, malnourished, sleep deprived, inappropriately dressed for weather
- Attempts to conceal recent scars / bruises
- Has multiple cell phones
- Stays in constant contact with third party via phone / text
- Exhibits sexual behavior that is high risk and/or inappropriate for age
- Has explicitly sexual online profile
- Involved in relationship with noticeably older individual, frequently picked up by individual or receiving gifts from individual
- Engages in sexual activity in exchange for something of value
- Knowledge of commercial sex industry

# *Bullying – Warning Signs*

- Unexplainable injuries
- Lost or destroyed clothing, books, electronics, or jewelry
- Frequent headaches or stomach aches, feeling sick or faking illness
- Changes in eating habits, like suddenly skipping meals or binge eating. Kids may come home from school hungry because they did not eat lunch.
- Difficulty sleeping or frequent nightmares
- Declining grades, loss of interest in schoolwork, or not wanting to go to school
- Sudden loss of friends or avoidance of social situations
- Feelings of helplessness or decreased self esteem
- Self-destructive behaviors such as running away from home, harming themselves, or talking about suicide



# *Bullying - Why don't kids ask for help?*

- Bullying can make a child feel helpless. Kids may want to handle it on their own to feel in control again. They may fear being seen as weak or a tattletale.
- Kids may fear backlash from the kid who bullied them.
- Bullying can be a humiliating experience. Kids may not want adults to know what is being said about them, whether true or false. They may also fear that adults will judge them or punish them for being weak.
- Kids who are bullied may already feel socially isolated. They may feel like no one cares or could understand.
- Kids may fear being rejected by their peers. Friends can help protect kids from bullying, and kids can fear losing this support.

• Source: [stopbullying.gov](http://stopbullying.gov)

## E. *Active Shooter*

### Active Shooter / Active Killer Incident Response:

- It is important to plan ahead. Have a plan. Have a back-up plan.
- ALICE Training course:
  - A-Alert: You becoming aware of the incident. How? LiveSafe, Bronco Alert, etc.
  - L-Lockdown: Enhanced Lockdown
  - I-Inform: Inform others, call the police, notify others in area, etc.
  - C-Counter: Counter the attacker, if no other options
  - E-Evacuate: Evacuate the area of the attacker. Best option!!
- FSU PD can assist with providing training
- FSU PD Crime Prevention information at <https://www.uncfosu.edu/life-fsu/our-campus/campus-safety/crime-prevention>

## **IV. Safety and Criminal Concerns**

**Chief Renarde Earl**

**Lt. Earl Johnson**

**Erica Cooper, Clery Compliance Officer**



# The Purpose of the Clery Act

*To provide the campus community with timely, accurate and complete information about crime and the safety of campus so that they can make informed decisions to keep themselves safe.*

# What is the Clery Act????

## **Consumer Protection Law**

### **Campus Crime Data:**

Requires all colleges and universities who receive Title IV funding to share information about crime on campus and their efforts to improve campus safety as well as inform the public of crime in or around campus via the university's Annual Security Report (ASR).

### **Support for Victims:**

Under the Act, institutions must provide the reporting party of sexual assault, domestic violence, dating violence, and stalking with options such as changes to academic, transportation, or living, or working situations, and assistance in notifying local law enforcement, if the student or employee chooses to do so. It also provides both parties in a campus disciplinary process certain rights.

### **Policies & Procedures:**

Universities must outline specific policies and procedures within their ASFSRs, including those related to disseminating timely warnings and emergency notifications, options for the reporting party of sexual assault, domestic violence, dating violence, and stalking, and campus crime reporting processes.



# What does the Clery Act have to do with you?

## What is a Campus Security Authority?

The Clery Act requires all institutions to collect crime reports from a variety of individuals and organizations that are considered to be “campus security authorities” under the law. “**Campus security authority (CSA)**” is a *Clery Act*-specific term that encompasses four groups of individuals and organizations associated with an institution. The first group is:

- *A campus police department or a campus security department of an institution.* If an institution has a campus police or security department, all individuals who work for that department are CSAs. A security department can be as small as one person.



# Who are Campus Security Authorities (CSA)???

- University Police
- Security Staff (non-sworn)
- Local Police/Sheriff Department(s)
- Title IX/Investigator
- Director of Athletics
- Athletics Coaches
- Student Affairs Professionals:
  - Housing/Residence Life Staff
  - Student Engagement offices
  - Director of Student Health
- Officials designated to receive reported crimes
- An official of an institution who has significant responsibility for student and campus activities.

# A CSA's Primary Responsibility is ....

*To report allegations made in “good faith” to the reporting structure established by the institution.*

***Good Faith** means there is a “reasonable basis” for believing that the information is not simply rumor or hearsay.*



# What are Clery-Reportable Crimes?

## UCR-1 Crimes:

- Criminal Homicide
  - Murder & Non-negligent Manslaughter
  - Manslaughter by Negligence
- Sexual Assault (Sex Offenses)
  - Rape
  - Fondling
  - Incest
  - Statutory Rape
- Robbery
- Aggravated Assault
- Burglary
- Motor Vehicle Theft
- Arson

## Hate Crimes\*

All of the aforementioned as well as:

- Larceny-Theft
- Simple Assault
- Intimidation
- Destruction/ Damage/ Vandalism of Property

## VAWA Crimes

- Dating Violence
- Domestic Violence
- Stalking

## Arrests & Disciplinary Referrals

- Weapons Law Violations
- Drug Law Violations
- Liquor Law Violations

# Violence Against Women: SaVE Act

- March 2013, President Obama signed the Campus Sexual Violence Elimination Act (SaVE Act)
- Amended the Clery Act
- Aimed at improving how colleges and universities in the United States address sexual violence

# V. Medical and Medication Issues Involving Minors



Col. Vinette Gordon  
Director for Student Health Services  
Fayetteville State University

Ms. Becky Hermann  
Physician Assistant  
Fayetteville State University

# Common Emergencies Affecting Children and Youth with Special Health Needs

- All CYSHCN are likely to experience a medical emergency because of their health status or disability.
- Most common (not inclusive):
  - Asthma attacks
  - Dehydration
  - Medication reactions or OD
    - Food, insect bites or bee stings
  - Allergic reactions
  - Hypoglycemic reactions for IDDM
  - Sanitation



# Asthma

- Asthma attack
  - **Triggers** – pollen, changes in weather, exercise, irritants, pollution
  - **What to observe** – coughing, wheezing, shortness of breath, drop in activities
- Exercise induced asthma
  - **Triggers** – seasonal allergies, physical activity, sports
  - **What to observe** - coughing, wheezing, shortness of breath, and chest tightness, not keeping up with other kids



# Asthma Management

## Managing Asthma Symptoms

- Understand child's symptoms so as to help with asthma management
- Follow the child's asthma action plan, e.g., triggers, list of medications, asthma symptoms to watch for, emergency numbers
- Have rescue inhalers readily accessible

## When to Be Concern & Take Action

- Wheezing or coughing that continues after taking asthma quick-relief medication
- Difficulty taking part in usual daily activities
- Very fast or difficult breathing
- Peak flow meter readings that register in the yellow or red zone



# Drug Allergies

Hypersensitive reaction of the immune system to **medications**

- **Triggers** – PCN, Cephalosporins, Sulfa, Dilantin, Insulin
- **What to Observe** – eczema, hives, asthma, anaphylactic shock – medical emergency

## **Common Food Allergies in Children**

- Peanuts, cows milk (most common); eggs, tree nuts, soy, fish, shellfish and wheat.
- **What to Observe** – occurs within 1 – 60 minutes;
  - **Skin** - hives, itching, rash, swelling of the lips, tongue, face
  - **Digestive tract:** nausea, vomiting, diarrhea, abdominal pain
  - **Respiratory:** wheezing, congestion, shortness of breath, difficulty breathing due to swelling of the throat

# Heat Related Emergencies

- Heat Rash
  - results from inflamed sweat ducts – ducts are obstructed and sweat can't get out
- Heat Edema
  - swelling in hands, feet, ankles
- Heat Cramps
  - usually in hamstrings/calf muscles. Dehydration is the culprit. Consider electrolyte replacement with water



heat rash

# Heat Exhaustion

Occurs after exposure to high temperatures for several days and subsequently become dehydrated

- Two types of heat exhaustion:
  - Water depletion - excessive thirst, weakness, headache, and loss of consciousness
  - Salt depletion – nausea and vomiting, frequent muscle cramps and dizziness
  - Not as serious as heat stroke
- **Triggers** – high heat index (90+ degrees), decrease sweat evaporation, higher when standing in full sunshine. infants and children  $\leq$  4 and adults  $\geq$  65 more vulnerable (adjust to heat more slowly), certain health conditions lung, obesity or underweight, HBP, diabetes, mental illness, etc., certain medications, e.g., BP, stimulants.
- **What to observe** – confusion, dehydration, dizziness, fainting, fatigue, headache, muscle cramps, nausea, pale skin, profuse sweating, rapid heartbeat

# Heat-Related Emergencies

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  - **What to observe** – confusion, dehydration, dizziness, fainting, fatigue, headache, muscle cramps, nausea, pale skin, profuse sweating, rapid heartbeat

# Heat Exhaustion Management

- Limit outdoor activities when the heat index is high.
- Encourage child / parent to wear lightweight, light-colored, loose-fitting clothing and a wide-brimmed hat.
- Use a sunscreen with an SPF of 30 or more.
- Substitute an electrolyte-rich sport drink for water during periods of extreme heat and humidity to prevent salt depletion.
- Encourage fluids!!
  - When exercising or working outdoors
    - recommendation – drink 24 ounces of fluid two hours before exercise, e.g., water or sport drink and consume
    - 8 oz of water every 20 minutes even if you don't feel thirsty.
- Avoid caffeine.

# Heat Exhaustion First Aid

- Remove from the sun
- Elevate the legs and feet slightly.
- Loosen or remove clothing.
- Provide cool water or other nonalcoholic beverage without caffeine to drink.
- Cool by spraying or sponging with cool water and fanning.
- Monitor carefully. Heat exhaustion can quickly become heat stroke.



© ADAM, Inc.

# Dehydration

- **Triggers** - diarrhea and vomiting (losing fluids) in children, heat exhaustion, high blood sugar, exercise.
- **What to observe** – dry mouth and tongue, no tears when crying, sunken abdomen, eyes, or cheeks, high fever, listlessness or irritability, skin that does not flatten when pinched and released, increased thirst.



# Monitoring Monitors with Diabetes

**Seek authorization for care of children with Insulin-Dependent Diabetes - Parent should complete action plan that identifies:**

- Child's target range of blood glucose, e.g. 70 – 150 or 70 – 180
- Glucose meter (supplied by parent) and when testing is usually done
- Signs of symptoms of hypoglycemia to watch for
- Parameters to treat LBG and which fast acting carbohydrates, e.g., OJ, apple, soda w/sugar, glucose tablets to give
- Other complex carbohydrates, if lunch or snack is greater than 1 hr., graham cracker squares; saltines; pieces of bread or toast  
When to repeat BG and fast- acting carbohydrates.
- Losing consciousness or having a seizure, **call "911"** or other emergency medical personnel, parent(s) or guardian(s), and child's doctor's office.
- What range to notify parents or guardian, e.g., high (200) or low
- **Recreational Activities:**
  - Know if child may participate in recreational activities or any activity restrictions
  - Know recreational activities that should be delayed if blood glucose is higher than e.g., **300** or lower than **70**.
- **Staff should:**
  - Have fast-acting carbohydrate readily available at all times
  - Should administer fast-acting carbohydrates even if suspicious of LBG and glucose meter is not readily available
  - Follow the child's **Diet Restrictions, e.g., no sugar or sweets to lunch or routine snacks**

## High and Low Blood Glucose (hyperglycemia & hypoglycemia) Symptoms and Causes

High Blood Glucose Symptoms (Hyperglycemia)	High Blood Glucose Causes	Low Blood Glucose Symptoms (Hypoglycemia)	Low Blood Glucose Causes
Thirst Hunger Frequent urination Fatigue Nausea Blurred vision Headache Nervousness Confusion	Too much food Too little exercise Too little medicine Stress Illness Injury Short time between meals and snacks	Shakiness Sweaty Hunger Anxiety Nervousness Confusion Acting angry or irritable Slurred speech Headache	Too little food Too much medicine More activity than usual Too long between meals or snacks Alcohol





# Sanitation for Good Health

- Cleanliness
- Food Preparation
- Pool Sanitation

# Medication, Medical and Behavioral: What you should know!

## Don't

- Provide routine medication or care (exception: first aid/CPR) to treat temporary illnesses.
- Accept or administer OTC medications (must be labeled by pharmacist).
- Assume minors are capable of self-administering medication.
- Allow minor to attend if contagious or feverish (temp  $\geq 101$ )
- Prepare food yourself
  - (get a 3<sup>rd</sup> party vendor – permanent location vendor-- to prepare the food)

## Do

- Ensure > than 1 person has received CPR, First Aid or medication administration training (director or program leader).
- Ensure a nut free or latex free zone.
- Have a plan to deal with behavioral issues.
- Ensure proper forms and guidelines are developed that address all medical, behavioral and medication, administration procedures.
- Require health related forms to be completed by parents and physicians.
- Inform parents about your medication, medical and behavioral guidelines and procedures.
- Wash your hands and ensure the children wash their hands
- Wear gloves when serving food.
- Use bleach and water to clean tables.
- Remind minors not to relieve themselves in the pool.

# Medication, Medical and Behavioral: Emergencies

- Remain calm.
- Never leave the youth alone.
- Call \*1911 (on campus) or 911 (if off campus)
  - For immediate attention call Campus Police – 910-672-1911.
  - Call the Safety Office at 910-672-1827 for proper authorization.
  - Notify your immediate supervisor ASAP. .
- At least one immediately available staff should have CPR and First Aid training.

# References

Common Emergencies Affecting Children and Youth with Special Health Care Needs (2013). Retrieved from <http://www.childrensnational.org/files/PDF/EMSC/PubRes/CommonEmergenciesforCSHCN.pdf>

Americans with Disabilities Act: How it affects you (2013) Retrieved from <http://www.aafa.org/display.cfm?id=9&sub=19&cont=255>  
<http://www.ada.gov/kinderI.htm>



# VI. Behavioral Strategies for Minors

Ms. Dionne Hall, MA, LPC, NCC  
Center for Personal Development,  
Counseling Services  
Fayetteville State University

# Mental Health Facts

## CHILDREN & TEENS

Fact: 1 in 5 children ages 13-18 have, or will have a serious mental illness.<sup>1</sup>



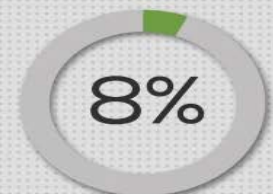
20% of youth ages 13-18 live with a mental health condition<sup>1</sup>



11% of youth have a mood disorder<sup>1</sup>



10% of youth have a behavior or conduct disorder<sup>1</sup>



8% of youth have an anxiety disorder<sup>1</sup>

### Impact



50%

50% of all lifetime cases of mental illness begin by age 14 and 75% by age 24.<sup>1</sup>

10 yrs



The average delay between onset of symptoms and intervention is 8-10 years.<sup>1</sup>

37%



37% of students with a mental health condition age 14 and older drop out of school—the highest dropout rate of any disability group.<sup>1</sup>

70%



70% of youth in state and local juvenile justice systems have a mental illness.<sup>1</sup>

### Suicide

3rd

Suicide is the 3rd leading cause of death in youth ages 10 - 24.<sup>1</sup>



90%

90% of those who died by suicide had an underlying mental illness.<sup>1</sup>



## Warning Signs

- ! Feeling very sad or withdrawn for more than 2 weeks (e.g., crying regularly, feeling fatigued, feeling unmotivated).
- ! Trying to harm or kill oneself or making plans to do so.
- ! Out-of-control, risk-taking behaviors that can cause harm to self or others.
- ! Sudden overwhelming fear for no reason, sometimes with a racing heart, physical discomfort or fast breathing.
- ! Not eating, throwing up or using laxatives to lose weight; significant weight loss or gain.
- ! Severe mood swings that cause problems in relationships.
- ! Repeated use of drugs or alcohol.
- ! Drastic changes in behavior, personality or sleeping habits (e.g., waking up early and acting agitated).
- ! Extreme difficulty in concentrating or staying still that can lead to failure in school.
- ! Intense worries or fears that get in the way of daily activities like hanging out with friends or going to classes.

## 4 Things Parents Can Do



Talk with your pediatrician



Get a referral to a mental health specialist



Work with the school



Connect with other families

<sup>1</sup> This document cites statistics provided by the National Institute of Mental Health. [www.nimh.nih.gov](http://www.nimh.nih.gov)

### Follow Us!

 [facebook.com/officialNAMI](https://facebook.com/officialNAMI)  
 [twitter.com/NAMIcommunicate](https://twitter.com/NAMIcommunicate)

 **NAMI**  
National Alliance on Mental Illness  
[www.nami.org](http://www.nami.org)

# Behavioral Strategies

Goal: Help children/ youth learn how to manage their own behavior.

Keep in mind:

- ❖ Best outcomes are achieved when you remain calm and maintain a professional perspective.
- ❖ Follow pre-planned intervention strategies for misbehavior.
- ❖ Act with consistency and fairness when intervening.

# Behavioral Strategies

Research shows that certain strategies tend to work best when attempting to manage behaviors. Listed below are some of these strategies:

- ❖ Give positive recognition and model good behavior.
- ❖ Discuss rules and expectations about behavior early on.
- ❖ Be aware of what's happening around you in order to proactively intervene before a situation escalates.
  - ❖ Give warnings in order to give youth a chance to correct their behavior.
- ❖ Relax before responding.
- ❖ Be respectful while addressing the behaviors.
  - ❖ Discuss specifically why the behavior was wrong.
  - ❖ Calmly discuss appropriate ways to behave.
- ❖ Do not get entangled in arguments/ power struggles.

# Behavioral Strategies

## Additional techniques:

- ❖ Listen actively.
- ❖ Allow a "Cool Down" break.
- ❖ Ask open-ended questions.
- ❖ Avoid asking "why" questions.
- ❖ Emphasize the positive in your request.
- ❖ Give praise that is specific & does not embarrass.
- ❖ Give frequent positive attention.

## Develop a response plan for more aggressive behaviors:

- ❖ Increase awareness about common behaviors and symptoms associated with youth mental health (ex. ADHD, ODD, CD, IDD and MDD).
- ❖ Contact your supervisor.
- ❖ Contact parents.

# Behavioral Strategies

## References:

William & Mary Training & Technical Assistance Center. (n.d.). Retrieved May 08, 2019, from <http://education.wm.edu/centers/ttac/index.php>

Working With Defiant Kids: Communication Tools for Teachers. (n.d.). Retrieved from <https://www.interventioncentral.org/behavioral-interventions/communication-tools/working-defiant-kids-communication-tools-teachers>

School-Wide Strategies for Managing... DEFIANCE / NON-COMPLIANCE. (n.d.). Retrieved from <https://www.interventioncentral.org/behavioral-interventions/challenging-students/school-wide-strategies-managing-defiance-non-complianc>



# VII. Department of Residence Life:

Dr. Adrina Russell,  
Director of Residence Life

## Guidelines for Camps and Conferences

# Residence Hall Policies

The following is a list of university rules and regulations that apply directly to summer conferences and camps. Please see that you and your participants know and understand these important policies.

- Participants may not occupy windowsills, roofs, or any other external appendage of FSU facilities.
- Possession of firearms or weapons of any kind, ammunition, fireworks, explosives, or highly flammable materials in the residence halls are prohibited.
- Possession of alcohol or drugs (without prescription and consent from parent) on state property is strictly prohibited.
- Smoking is strictly prohibited in the residence halls.
- Tampering with or removal of windows, window screens, fire systems, fire-fighting equipment, or emergency call systems is not tolerated. Please do not hang any items on the sprinkler heads found in the residence hall rooms.
- All camp participants are expected to respond and/or evacuate the building, if needed, in the event of a fire emergency.
- Residence Halls are limited to camp participants only.



# Residence Hall Policies

- Please report all lost or damaged keys/cards to the Department of Residence Life **immediately**.
- Behavior dangerous to persons or property including fighting or threatening another person is not allowed.



# Camp and Conference Guidelines

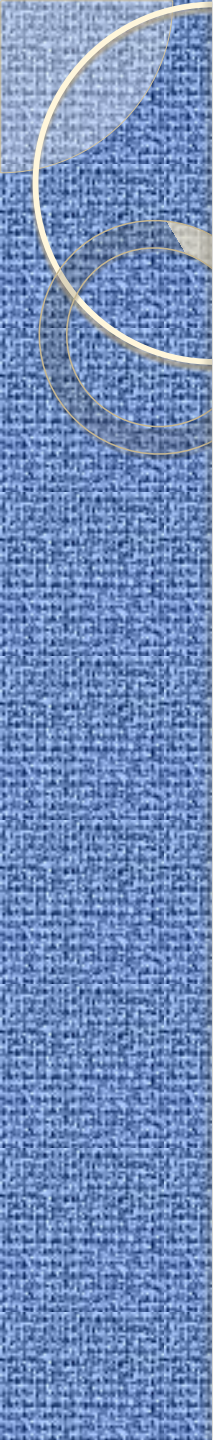
- Should any incidents occur (policy violations, injured camp participants, etc) please notify the Department of Residence Life immediately to make aware of situation.
- Be with your group at all times. Check on them frequently, especially at night. Please do not allow your minor to be unescorted/unattended while in the halls and/or on campus.
- If your group has male/female participants, the camp must provide both genders as chaperones.
- All meals must be coordinated the Bronco Card Office, and are invoiced separately than housing charges. Contact Mr. Donald Pearsall x 1053 or Mr. Anthony Watson x 1735.
- All camp participants are expected to sign a University waiver prior to moving into the buildings.

# Camp and Conference Guidelines

- Please be considerate of other groups. Camps may have to share the building with other camps. It will be the responsibility of the camp coordinator to set and enforce the rules.
- In the event that parents need to contact a student for emergency purposes, they should be directed to the camp coordinator. Please make sure parents have access to the camps coordinator phone number(s).
- All staff and participants are invoiced for their stay in any residential facility.
- All parking needs must be facilitated through FSU PD.

# Staffing

- Each Camp is responsible for providing staff to the needs of their camps participants. The Department of Residence Life will provide coverage to complete periodic rounds throughout the building to address maintenance concerns, staff the front desk area.
- There will be a Residence Life Administrator (RLA) on call weekly to answer any questions and respond to any issues and/or emergencies.



Sign in sheet- Request all Camp Coordinators cell phone numbers to use for emergency contact purposes.

Property Security Officers will be present at each residence hall from 10pm – 6am daily.



# VIII. Safety Management

By Cindy Wetherwax,  
Environmental Health and  
Safety

672-1827



# Protecting Minors on Campus

- Supervisors should report all accidents and injuries involving employees to Human Resources (HR) and Environmental Health and Safety (EHS) and involving minors to the Environmental Health and Safety (EHS) office immediately utilizing the appropriate accident investigation form(s)



# Protecting Minors on Campus

- If an accident or injury occurs the following steps should be taken:
  - Get the person medical attention
  - Protect others
  - Minimize property damage if possible
  - Stabilize the situation if possible
  - Conduct an accident investigation immediately
  - Contact Human Resources (HR) and EHS

# Emergency Situation & Preparedness

- Building Evacuation Procedures:
  - When the fire alarm is activated, evacuation is mandatory, even if you don't smell smoke
  - Do not use elevators
  - Take personal belonging (key, purse, wallets)
  - Follow directions given by first responder.
  - Assist persons with disabilities



# Assembly Point Sign

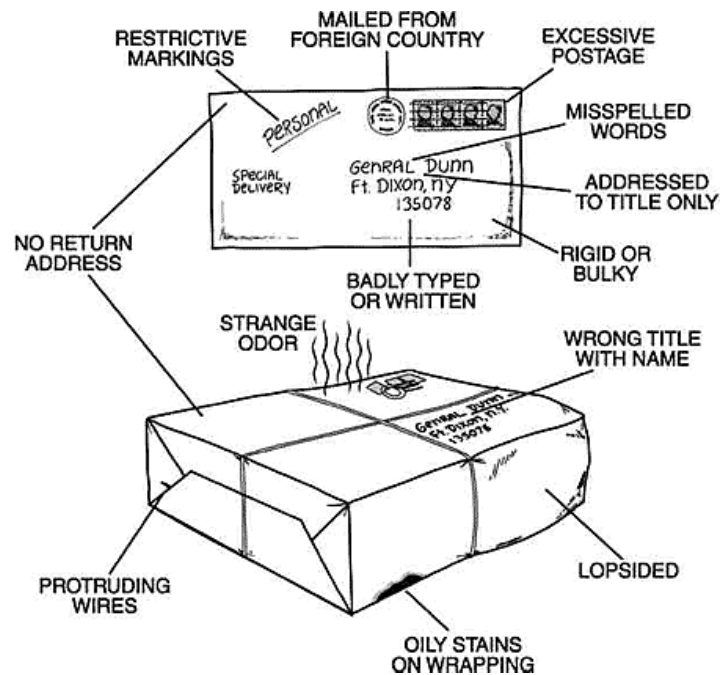


Find your assembly point for emergency evacuation. Look for the Call Box nearest your building.

# Emergency Situations & Procedures

- Suspicious Person in building:
  - Do not physically confront a person
  - Do not block the person's access to exit
  - Secure the area if possible
  - Call 1911 from your landline or 672-1911 from your cell phone or LiveSafe App

# What do suspicious packages look like?



# Emergency Situations & Procedures

- Suspicious Object/Package:
  - Do not touch or disturb the object or package
  - Call 1911 from a campus phone, call 672-1911, from your cell phone or use LiveSafe App
  - Notify supervisor and/or the building's Emergency Coordinator



# Emergency Situations & Procedures

- Bomb Threat:
  - Remain calm
  - Get as much information as possible
  - Call 1911 from a campus phone, call 672-1911, from your cell phone or use LiveSafe App
  - Follow instruction of emergency personnel

# Emergency Situations & Procedures

- Fire:
  - Evacuate the building
  - Activate the nearest fire alarm pull station and call 1911 from a campus phone, call 672-1911, from your cell phone or use LiveSafe App
  - Extinguish the fire if you have been trained and if it is safe to do so
  - Do not re-enter the building until authorized by first responders

# Emergency Situations & Procedures

- Weather Emergency:
  - Follow first responder/FSU officials instructions
- For up-to-date weather information:
  - Monitor local radio and television stations
  - Check the conditions on campus on the FSU website—[www.uncfsu.edu](http://www.uncfsu.edu)
- Be prepared to shelter in place



## IX. Other Safety/Liability Concerns

- Travel with Minors – Terrance Robinson
- Pool– Terrance Robinson
- Background Checks—Terrance Robinson
- Card and Key Access—Anthony Watson
- Food Services—Joeroyal Evans and Donald Pearsall
- Other Safety Concerns—Cindy Wetherwax





# Travel with Minors

Contact FSU Office of Legal Affairs for liability forms.

Contact the FSU Travel Office for travel approval.

<https://www.uncfsu.edu/faculty-and-staff/divisions-departments-and-offices/division-of-business-and-finance/materials-management/travel>

## FAYETTEVILLE STATE UNIVERSITY CODE OF STUDENT CONDUCT

### I. AUTHORITY

*The Code of the Board of Governors of the University of North Carolina provides to the Chancellor of Fayetteville State University (University) the "full authority in the regulation of student affairs and in matters of student discipline...." This responsibility may be delegated to certain University administrators and committees. However, the Chancellor may intervene directly in any matter when deemed necessary. Except for such intervention, no offense shall be recognized nor sanction imposed on any student except as provided in this Code of Student Conduct (Code).*

### II. JURISDICTION

The University reserves the right to take necessary and appropriate action to protect the safety and well-being of its campus community. This Code applies to all undergraduate and graduate students as defined below. The University's jurisdiction and conduct processes shall be limited to behavior which occurs on University premises, at University-sponsored events or at other off-campus locations if the conduct adversely affects the University community and/or the pursuit of its objectives as determined by university officials (Chancellor, Provost, Vice Chancellors, administrators, faculty or staff).

A student whose conduct has been found to be in violation of established University policies and regulations may also be subject to appropriate actions by individual University offices which may or may not give rise to a formal charge under the Code. In addition, an incident may result in criminal or civil charges as well as a University disciplinary action. Unless otherwise provided by law, University disciplinary proceedings and court proceedings may occur concurrently.

The University also reserves the right to dismiss any student prior to his or her enrollment by rescinding that student's admission, without a hearing, upon a finding of cause to do so. Such a finding shall be an administrative decision rendered by the Provost or the Vice Chancellor for Student Affairs or his or her designee.

## PROHIBITION OF WEAPONS ON CAMPUS GROUNDS

North Carolina General Statute § 14-269.2 provides that it is a Class I felony for any person to knowingly possess or carry, whether openly or concealed, any gun, rifle, pistol, or other firearm of any kind, on educational property or to a curricular or extracurricular activity sponsored by a school. It is a Class F felony to willfully discharge a firearm on school grounds. It is also a Class I felony, for any person to cause, encourage, or aid a person who is less than eighteen (18) years old to possess or carry, whether openly or concealed, any gun, rifle, pistol, or other firearm of any kind, on educational property. This particular violation does not apply to BB guns, stun guns, air rifles, or air pistols. The aforementioned prohibitions will not apply to a person who has a valid concealed handgun permit, or is exempt from obtaining a permit, who has a handgun in a closed compartment or container within the person's locked vehicle or the handgun is in a locked container securely affixed to the person's vehicle. This individual may unlock the vehicle to enter or exit the vehicle provided the firearm remains in the closed compartment at all times and the vehicle is locked immediately following the entrance or exit of the vehicle.

## WRITTEN COMPLAINT PROCEDURE FOR FSU STUDENTS

At Fayetteville State University, we recognize our students as the primary customers for all of the services that we offer, from classroom instruction, to personal counseling, to computer labs. When an area of the University needs improvement or change to better serve the needs of our students, we appreciate hearing your suggestions/resolutions. As a first step, students are encouraged to discuss their complaints directly with the person responsible for the area or problem. If the issue is not or cannot be addressed through discussion with the responsible person; and if there are no methods prescribed for appeal in the applicable area in University Catalogs, Student Handbooks or other official University documents; then the issue should be outlined in writing and submitted to the following offices in the order indicated:

1. Academic Complaints:

- a. Department Chair
- b. Dean of the School/College
- c. Provost and Vice Chancellor for Academic Affairs

2. Non-Academic Complaints:

- a. Department or Office Director
- b. Vice Chancellor of the Division to which the Department or Office reports

Each office listed above will respond to students within ten working days of receipt of the written complaint. If the issue is not satisfactorily resolved at the first level, the student should submit his/her request to the highest level. If the issue remains unresolved at the highest level indicated above, the student(s) should appeal to the Office of the Chancellor. For a complete listing of all University policies and procedures visit the following link:

[https://www.uncc.edu/faculty-and-staff/departments-and-offices/office-of-legal-affairs.](https://www.uncc.edu/faculty-and-staff/departments-and-offices/office-of-legal-affairs)

FAYETTEVILLE STATE UNIVERSITY

YOUTH SUMMER CAMPS

AUTHORIZATION FOR STUDENT PICK UP

DATE \_\_\_\_\_

I \_\_\_\_\_, authorize the following person(s) to pick up my child(ren) from summer camp. The individual(s) must present picture ID.

Child(ren) \_\_\_\_\_

Person(s) Authorized to Pick-Up Child	Phone Number
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Is there any one NOT authorized to visit your child(ren) during camp hours?

Yes \_\_\_ No \_\_\_

If yes, please list name(s)

\_\_\_\_\_

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Parent phone numbers during camp hours



**FSU WAIVER OF LIABILITY AND ACTIVITY PERMISSION SLIP**  
**(TO BE COMPLETED BY PARENT AND CHILD)**

PRINT PARTICIPANT NAME \_\_\_\_\_

PRINT PARENT NAME \_\_\_\_\_

I understand the Participant will participate in a program on FSU's campus and access FSU property, grounds, facilities, (hereinafter collectively and individually referred to as the Property) **NAME OF THE PROGRAM** (the "Program"). I understand that I am not required to access the Property or participate in the Program and that my decision to access the Property and participate in the Program is fully voluntary. I also understand that there are risks, dangers, and hazards **which include, but are not limited to, LIST THE RISKS**. I also understand that there are dangers and hazards associated with accessing the Property and preparing for and participating in the Program, and I have decided to, and do fully and voluntarily, assume the risks.

In consideration of the my being permitted to participate in the Program, I do individually, and on behalf of my heirs, successors, assigns, administrators and/or personal representatives, hereby **RELEASE, WAIVE, COVENANT NOT TO SUE AND FOREVER DISCHARGE** FSU and any of its employees, agents, officers, trustees, volunteers and/or representatives (in their official and individual capacities) ("Releases") from and against any and all liability whatsoever, whether caused by negligence or carelessness of any one or more of the Releases or otherwise, for any and all harm, damages, losses and/or injuries (including death) I may sustain to my person or property or both, including but not limited to any claims, demands, actions, causes of action, judgments, damages, expenses, and/or costs of any nature, including attorney's fees, or otherwise, which arise out of, result from, occur during or are connected in any manner with 1) my participation in or preparation for the Program, 2) my accessing of the Property and/or 2) any travel incident to my participation in or preparation for the Program or my usage of the Property.

In consideration of FSU permitting me to participate in the Program, I, individually, and on behalf of my heirs, successors, assigns, administrators and/or personal representatives, hereby agree to **INDEMNIFY, DEFEND, AND HOLD HARMLESS** the Releases (in their official and individual capacities) from and against any and all liability whatsoever, whether caused by negligence or carelessness of any one or more of the Releases or otherwise, for any and all harm, damages, losses and/or injuries (including death) Participant may sustain to his or her person or property or both, including but not limited to any claims, demands, actions, causes of action, judgments, damages, expenses, and/or costs of any nature, including attorney's fees, or otherwise, which arise out of, result from, occur during or are connected in any manner with 1) the Participant's participation in or preparation for the Program, 2) the Participant's accessing of the Property, and/or 3) any travel incident to Participant's participation in or preparation for the Program or Participant's usage of the Property.

I agree that this Waiver of Liability is to be construed under the laws of the State of North Carolina, U.S.A.; and that if any portion hereof is held invalid, the balance hereof shall, notwithstanding, continue in full legal force and effect. I also agree that the place of this agreement, its situs and forum, shall be Cumberland County, North Carolina.

\_\_\_\_\_ Parent Initial



I represent that Participant shall be covered throughout his/her participation in and preparation for the Program by policies of comprehensive health and accident insurance which provide coverage for illnesses or injuries he or she may sustain or experience while participating in the Program. By my signature below, I certify that I have confirmed Participant's health and accident insurance policies will adequately cover him or her while participating in and preparing for the Program; and, I hereby release, discharge and indemnify the Releases from and against all responsibility and liability for any injuries, illnesses, medical bills, charges and/or similar expenses she or he incurs while accessing the Property or while participating in or preparing for the Program.

I hereby release, discharge and indemnify the Releases from and against all responsibility and liability for any injuries, illnesses, medical bills, charges and/or similar expenses which might arise out of or in connection with any emergency or medical attention.

Permission is granted for Participant to receive emergency medical treatment by an authorized health care provider or hospital designated by the Program personnel. I understand that every effort will be made to contact me. If I cannot be reached, the provider selected by a staff member of the Program is permitted to hospitalize and secure proper treatment (including surgery) for the Participant at my financial expense.

I give permission for the Participant to participate in photographs, films, and/or interviews as they pertain to FSU, and I understand that such pictures, films, and/or interviews may be used, without compensation to me or Participant, to promote or publicize FSU events and/or demonstrate how federal or state funds are being used.

In signing this Waiver of Liability, I acknowledge and represent that I have fully informed myself of the content of this document by reading it before I signed it, that I have reviewed it, that I and the Participant understand what it means, that by signing it I am giving up any substantial legal rights I might otherwise have, and that I sign this document as a free act and deed.

I further state that I am fully competent to sign this Agreement; and that I execute this Waiver of Liability for full, adequate, and complete consideration fully intending to bind by the same myself and my family, heirs, administrators, successors, assigns, and/or personal representatives and the Participant and his or her family, estate, heirs, administrators, personal representatives, and/or assigns.

Accident/Hospitalization Policy Name \_\_\_\_\_  
Policy Number \_\_\_\_\_  
I can be reached at any time (phone number) \_\_\_\_\_

IN WITNESS WHEREOF, I have executed this release on the date indicated below.

THIS IS A RELEASE OF LEGAL RIGHTS. READ BEFORE SIGNING

\_\_\_\_\_  
Parent/Guardian Signature                      Parent Printed Name                      Date

\_\_\_\_\_  
Student Signature                                  Student Printed Name                      Date

# FAYETTEVILLE STATE UNIVERSITY

## Office of Continuing Education

### Camper HEALTH FORM

STUDENT'S NAME \_\_\_\_\_ GRADE next year \_\_\_\_\_ D.O.B. \_\_\_\_\_

STUDENT'S HOME ADDRESS \_\_\_\_\_

PARENT/GUARDIAN NAME (1) \_\_\_\_\_ PHONE (home/mobile) \_\_\_\_\_

PARENT/GUARDIAN NAME (2) \_\_\_\_\_ PHONE (home/mobile) \_\_\_\_\_

Dear Parent,

The Office of Continuing Education is requesting that the parent complete the information about each child attending camp. We will use this information to ensure that we are prepared to meet the health needs of your child. In order to accomplish this, we will need the information requested below.

1. <u>MY CHILD HAS</u>	<u>SHORT DESCRIPTION OF MEDICAL HISTORY</u>
<input type="checkbox"/> Asthma	_____
<input type="checkbox"/> Diabetes	_____
<input type="checkbox"/> Seizures	_____
<input type="checkbox"/> Heart Disease	_____
<input type="checkbox"/> Cancer/Leukemia	_____
<input type="checkbox"/> Sickle Cell Disease (not trait)	_____
<input type="checkbox"/> Recent Surgery	_____
<input type="checkbox"/> Physical Disabilities	_____
<input type="checkbox"/> Severe Allergy Requiring Special Treatment	_____
<input type="checkbox"/> Emotional Problems Requiring Medical Treatment	_____
<input type="checkbox"/> Other	_____

2. ALLERGY

Has your child received medical attention requiring an injection following a bee sting, ingestion of food or medication, or exposure to latex (i.e., gloves)?  Yes  No

Was your child prescribed any allergy kit?  Yes  No

My child \_\_\_\_\_, does/does not require medication during the camp day for the above condition(s).

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

3. Does your child take medications regularly? If so, list below.

Home \_\_\_\_\_

During Camp Hours \_\_\_\_\_

If your child needs medication during camp hours:

- a. Complete "Medical Authorization." This form is to be completed by both the child's physician and the parent. If you have a completed form from your child's current school a copy will meet this requirement.
- b. Only prescription medications may be administered at camp. Such medications must be in a pharmacy-labeled prescription bottle.
- c. Parent must transport all medications to the Continuing Education office. Do not send medications with your child.

4. IN CASE OF EMERGENCY, PARENTS WILL BE CALLED FIRST. IF WE ARE UNABLE TO REACH A PARENT/GUARDIAN, CAMP STAFF SHOULD CALL:

Emergency Contact Person #1

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Emergency Contact Person #2

Name \_\_\_\_\_ Phone No. \_\_\_\_\_

5. IF UNABLE TO REACH A PARENT OR AN EMERGENCY CONTACT PERSON IN CASE OF ACCIDENT OR SERIOUS ILLNESS, I AUTHORIZE THE SHARING OF INFORMATION PERTINENT TO MY CHILD'S CURRENT CONDITION BETWEEN DIRECTOR OF CONTINUING EDUCATION/CAMP COORDINATOR AND PHYSICIAN. I AUTHORIZE THE CAMP TO CALL THE PHYSICIAN BELOW OR MAKE WHATEVER ARRANGEMENTS ARE DEEMED NECESSARY.

Physician \_\_\_\_\_ Phone No. \_\_\_\_\_

6. THIS FORM IS TO BE SIGNED BY THE PARENT/GUARDIAN AND RETURNED TO THE OFFICE OF CONTINUING EDUCATION.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_



## FSU Continuing Education Summer Camp MEDICAL AUTHORIZATION

Camper's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

In order to help protect your child's health, your consent **and** written authorization from a health care provider with prescriptive authority is required when it is necessary for your child to receive prescription and/or non-prescription medicines.

**Parent or Guardian's Permission:** I give permission for my child to receive this medicine during camp hours. I also give permission for camp staff to contact the prescribing healthcare provider with questions/concerns. I understand that it is my responsibility to purchase and supply this medicine in its original container. On behalf of my child I absolve Fayetteville State University and their agents and employees from any and all liability whatsoever that may result from my child taking this medicine at camp.

Signature of parent or guardian \_\_\_\_\_ Date \_\_\_\_\_ Contact numbers (home, office, mobile, etc.) \_\_\_\_\_

This medication is to be used for emergencies only. Please allow this student to self-administer this medication

**\*\*\*\*\*Both sides of this form are required for emergency self-carry medications\*\*\*\*\***

Medication \_\_\_\_\_ Strength/Dose \_\_\_\_\_

Medical Diagnosis: \_\_\_\_\_

Specific Directions (include amount to give, at what time and/or how often, relationship to meals, specific indications if "as needed")

How often and/or at what time (hour): \_\_\_\_\_

Purpose of medication: \_\_\_\_\_

Relationship to meals, if applicable: \_\_\_\_\_

Expected side effects or adverse reactions: \_\_\_\_\_

Specific indications: \_\_\_\_\_

Other information: \_\_\_\_\_

It is necessary for this child to receive this medication during camp hours in order to maintain or improve health and to benefit from camp activities. Please notify the camp staff and parents/guardians if there are any problems.

Signature of Healthcare Provider \_\_\_\_\_ Date \_\_\_\_\_ Telephone \_\_\_\_\_ Fax \_\_\_\_\_

Please print practitioner's last name \_\_\_\_\_ Practice name /address \_\_\_\_\_

----- **FOR**  
**CAMP USE ONLY:**

Date Received/By: \_\_\_\_\_ Camp Coordinator Review: \_\_\_\_\_

Location of Medicine  on student, emergency medication only  in Camp Coordinator's Emergency Kit

## AUTHORIZATION FOR SELF-CARRY BY CAMPERS EMERGENCY MEDICATIONS

Camper's Name \_\_\_\_\_ Birthdate \_\_\_\_\_

Medication \_\_\_\_\_ for \_\_\_\_\_

**Eligibility:** Only campers with asthma, diabetes and/or severe allergies who may require rescue medications (i.e., inhaler, glucagon, epi-pen).

-----  
**Healthcare Provider:** This camper is capable of and has been instructed on how to self-carry and, if applicable, administer this medication as directed on the medication consent form (both correct technique and dose intervals). Please allow him/her to self-carry it during camp hours or activities.

Healthcare Provider signature/date \_\_\_\_\_

**Parent/Guardian:** I give consent to the FSU Summer Day Camp staff to allow my child to self-carry and, when applicable, to self-administer this medicine at camp. I understand that my child and I assume responsibility for the proper use and safekeeping of this medicine. I will provide backup medication to be kept at camp. I absolve Fayetteville State University and their agents and employees from any and all liability whatsoever that may result from my child carrying this medicine at camp.

Parent signature/date \_\_\_\_\_

**Student:** I am capable of carrying this medicine as recommended and accept this responsibility. I will keep it secure at all times and will not share it with others. I understand that I will be subject to disciplinary actions if medications are shared. I will inform an adult when medication is used.

Student signature/date \_\_\_\_\_

**Camp Coordinator:** I have reviewed this request and agree that this camper should be capable of safely self-carrying and, when applicable, self-administering this medication.

Camp Coordinator signature/date \_\_\_\_\_



**FAYETTEVILLE**  
STATE UNIVERSITY™

**PHOTOGRAPHIC CONSENT AND RELEASE FORM**

I hereby authorize Fayetteville State University (university), and those acting pursuant to its authority to:

- (a) Record my likeness and voice on a video, audio, photographic, digital, electronic or any other medium.
- (b) Use my name in connection with these recordings.
- (c) Use, reproduce, exhibit or distribute in any medium (e.g. print or digital) these recordings for any purpose that the university, and those acting pursuant to its authority, deem appropriate, including promotional or advertising efforts.

I release the university and those acting pursuant to its authority from liability for any violation of any personal or proprietary right I may have in connection with such use. I understand that all such recordings, in whatever medium, shall remain the property of the university.

I have read and fully understand the terms of this release.

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip

Phone: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent/Guardian Signature (if under age 18):

\_\_\_\_\_ Date: \_\_\_\_\_

[www.unccsu.edu/ia/marketing](http://www.unccsu.edu/ia/marketing)

## Fayetteville State University Summer Day Camp Parent Handbook

This Summer Day Camp Parent Handbook has been prepared for your information and understanding of the policies, rules, goals and benefits of FSU Summer Day Camp. Please read it carefully. Upon completion of your review of this handbook, sign the statement below, and return it to Fayetteville State University Office of Continuing Education. A copy of this acknowledgment appears at the back of the handbook for your records.

I, \_\_\_\_\_, have received and read a copy of the FSU Summer Day Camp Parent Handbook which outlines the policies, rules, goals, benefits and expectations of FSU Summer Day Camp, as well as my responsibilities as a parent.

I have familiarized myself with the contents of this handbook. By my signature below, I acknowledge, understand, accept and agree to comply with the information contained in the Summer Camp Parent Handbook provided to me by Fayetteville State University Office of Continuing Education. I understand this handbook is not intended to cover every situation which may arise during my child enrollment, but is simply a general guide to the goals, policies, rules and expectations of FSU Summer Day Camp.

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date

## Capel Arena Swimming Pool Request Form

<b>Department:</b>	
<b>Department /Unit Head:</b>	
<b>Requestor :</b>	
<b>Phone Number:</b>	
<b>Email Address:</b>	

### Request Details

<b>Date Requesting:</b>	
<b>Start Time :</b>	
<b>End Time :</b>	
<b>Type of Function:</b>	
<b>Age Group:</b>	
<b>Number in Attendance</b>	
<b>Additional Information: (Tell us about your event/request)</b>	
<b>Estimated Cost: (please contact Legal Affairs for an Estimate)</b>	

### Signatures

Department/Unit Head: \_\_\_\_\_

Vice Chancellor: \_\_\_\_\_ (Budget Line) \_\_\_\_\_  
Fund - Org - Account - Program

### For Office Use Only

**Approved**

**Disapproved**

**Comments:**

(An email notification will be sent out approving/disapproving the request)

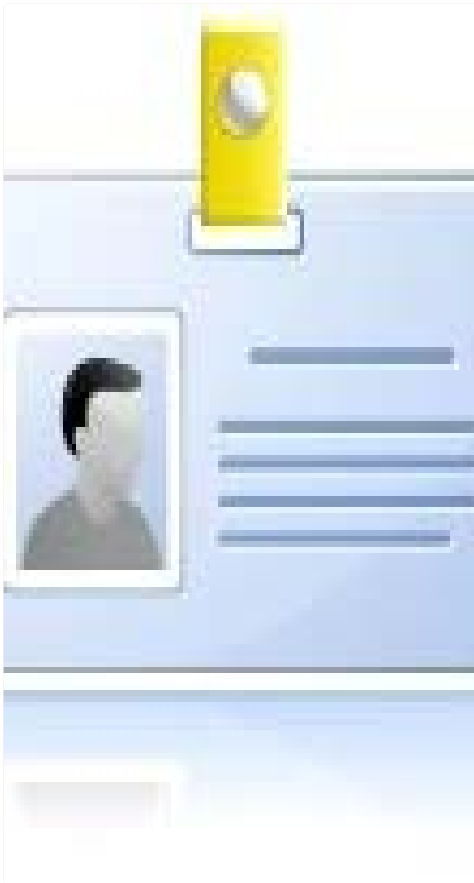
## Capel Arena Swimming Pool Request Form

### Lifeguard Requirements

1. A lifeguard is required and the requirement is to have a ratio of one certified lifeguard per twenty-five (25) swimmers.
2. The lifeguard/pool manager shall have the authority to enforce all pool rules. Patrons who repeatedly violate the rules may be ejected by the Lifeguard.
3. If requestor is providing additional lifeguards, a copy of each lifeguard's certification should be submitted to Legal Affairs no later than one week prior to the event date.

### FSU Aquatics Pool Rules and Regulations

1. No one shall enter the swimming area unless the pool is officially open and a lifeguard is on duty.
2. All individuals within the pool area must be attired in swimming apparel. The swimming pool and decks must be maintained in a sanitary manner.
3. Children 12 and under entering the pool facility must be escorted and directly supervised by an adult or responsible person 18 years old.
4. Children 6 years and younger must be accompanied and directly supervised, within arms reach of an adult at all times in the water and within the facility. Children 6 and under, who pass a swim test, are not required to have an adult in the water.
5. Groups of children 6 or more and ages 6-17 entering the pool must be directly supervised at poolside by an adult in swimmer. There must be one adult for every 25 children.
6. Food or refreshments may not be consumed in the pool area. Food is not permitted in locker rooms.
7. Glass containers, alcoholic beverages, drugs and pets are not permitted in the pool facilities. An exception will be made for service animals.
8. No person within the pool grounds shall behave in such a manner as to jeopardize the safety and health of him/herself or others. Such behavior, including abusive or profane language, shall be grounds for the termination of this contract.
9. Loitering will not be permitted on the pool grounds or within any of the University's facilities.
10. Any injury occurring in the pool area must be reported to the Lifeguard immediately.
11. The use of cameras, video cameras or any device containing camera equipment of any kind is prohibited in locker rooms, bathrooms and changing facilities.



## Card Access

- Departments have to request building and classroom access.
- Requests must be sent to department chair or dean.
- Once it is approved by the dean or chair an approval email can be sent to [broncocard@uncfsu.edu](mailto:broncocard@uncfsu.edu)
- Access is granted in 1-2 business days
- Contact Bronco Card Office ext. 1762/2310



## Key Requests

- Departments have to request building and classroom access.
- Department head and dean must sign off on key request.
- Key requests are submitted to Locksmiths
- There is a 3-5 business day turnaround for key creation.
- Locksmiths will contact the requestor for key pick-up
- Contact the Locksmith office
  - Erving Murphy ext. 2311
  - Edward Williams ext. 2312



# Food Services

- Notification of Allergies: Please notify us prior to camps of any major Food Allergies. This will help us be prepared.
- Notify Joeroyal Evans of in advance of dates and meals requested, estimate # of campers
- Final Camp Count needed 5 days prior to your camp so we can staff and prep food properly. *This number will be locked in and what you are charged for the camp. We will verify by having our cashier count for each meal.*
- Wrist Band or ID's will be needed for entry into dining hall
- All camps will be expected to keep the café clean and return all dishes to the dish return
- All payments must be made 48 hours prior to camp starting
- Contact Information:
  - Joeroyal Evans ARAMARK Director at 910-672-1816 or
  - Donald Pearsall Director of FSU Auxiliary Services at 910-672-1053.

# FSU Contacts

- **Emergency Services:** \*1911 (on campus) or 911 (off campus)
- **Report Child Abuse or Neglect:** Child Protective Services (910) 677-2450
- **Report Title IX Questions/Complaints re sexual harassment, misconduct, equity, discrimination:** Title IX Coordinator, Jessica Stevens-Tuttle (\*2325)
- **Liability, Abuse & Neglect, and Other Legal Questions:** Benita (Angel) Powell, Assistant General Counsel (\*1145)
- **Bullying Concerns:** Robin Williams, Police Officer (\*2656)
- **Residence Life Issues:** Adrina Russell, Director (\*2116) or Greg Moyd, AVC for Student Affairs (\*1162)
- **Clery Act Crime Reporting Compliance Concerns:** Erica Cooper, Clery Compliance Director (\*2462)
- **Safety Preparedness and Fire/Disaster Drills :** Cindia Wetherwax, Safety Professionals (\*1827)
- **Sanitation Concerns:** Jon Parsons, Facilities Services (\*1954)
- **Medical, Health, and Medication Concerns:**
  - Vinette Gordon, Acute Care Nurse Practitioner and Becky Hermann, Physician Assistant, FSU Student Health Services will answer questions and connect you with local resources, (\*2602), but you should contact 1911 for emergencies
  - Shirley Johnson, Cumberland County Schools, Director of Health Services for questions and to connect you with local resources ((910) 678-2406), but you should contact 1911 for emergencies
- **Behavioral Health:** Dionne Hall, Licensed Professional Counselor, FSU Center for Personal Development will answer questions and connect you with local resources (\*2167), but you should contact 1911 for emergencies
- **CPR & First Aid Certification Training:** George Earl Johnson, Police and Public Safety (\*1559) or Cindia Wetherwax, Safety Professional (\*1827)
- **Background Checks:** Terrance Robinson, Paralegal (\*1145)
- **Pool Questions:** Terrance Robinson, Paralegal (\*1145)
- **Liability Form or Travel Questions:** Terrance Robinson, Paralegal (\*1145)
- **Director of Business Auxiliary Services:** Donald Pearsall (\*1053)
- **Bronco Card Office:** Anthony Watson, Director (\*1762)
- **Food Services:** Joeroyal Evans(\*1816)(Evans-Joeroyal@aramark.com)



# FSU Guidelines for Protecting Minors

<https://www.uncfsu.edu/faculty-and-staff/departments-and-offices/office-of-legal-affairs>