SAFE CHURCH
SAFEGUARDING

Parish / Entity: *(Enter name here)*

Street Address, Suburb, Town / City

BEREAVEMENT MINISTRY

The Catholic Diocese of Christchurch adheres to the Church National Safeguarding Guidelines. These include guidelines for volunteers in Church ministries to maintain a safe and healthy ministry environment. Our commitment to these guidelines requires that we have safe recruitment practices including conducting background reference checks (police vetting) for all persons who intend to engage in voluntary ministry having direct and regular involvement with children and young people (those aged up to 18 years) and vulnerable adults. The role of the Bereavement Minister is a Police Vetted role. This role will commence on completion of the police vetting process, which can take up to 6 weeks.

"Blessed are those who mourn, for they shall be comforted." - Matthew 5:4

MINISTRY TITLE: Bereavement Ministry

MAIN PURPOSE & OBJECTIVE OF MINISTRY ROLE:

Bereavement Ministry is praying for the dead and comforting those who mourn, one of the Spiritual Works of Mercy. This role, under the guidance and direction of the parish responds to the needs of the community in practical and pastoral ways at the time of a bereavement. Losing a family member can be one of the most difficult and painful experiences a person can go through. This role serves as a vital pastoral connection between the parish community and the person who experiences the loss of a loved one.

TASKS

- Accompany the priest when visiting the bereaved family after a death.
- Be ready and available to listen and provide spiritual support as is needed in the days leading up to the funeral and again afterwards.
- Lead the bereaved in prayer as appropriate.
- Lead the family through organising the funeral requiem or service.
- Arrange musician, booking of Church, Servers for refreshments as required.
- Ensure all family and friends involved in the funeral feel comfortable with what they are doing and where things are at the Church.
- Ensure copies of all readings and prayers are at the readers' lectern before the funeral.
- Provide follow-up support by way of phone calls and/or visiting.
- If appropriate, organise meals or a food parcel for a time, following the funeral.

EXPECTATION OF ROLE

- Undertake formation and pre-training prior to beginning this ministry and attend ongoing formation and bereavement ministry team meetings.
- Undertake safeguarding training by way of safeguarding awareness workshops.
- Seek advice from the ministry team leader, who will support you in this role, on any matters related to this ministry if you are unsure or have concerns.
- Observe the physical surroundings and the emotional and spiritual needs of the person/s you are accompanying.
- Follow the two-person practice of visiting in pairs.
- Keep necessary visitation records.
- Exercise good judgement with a respect for safety, privacy, and confidentiality.
- Have a non-judgemental attitude, respecting the privacy and dignity of those that are visited.
- Wear Church ID, with your name and role clearly visible.

PERSON SPECIFICATIONS:

- A Commitment to the essential teachings of the Catholic Church and the ethos of the Parish.
- Have skills, sensitivity and an understanding of grief and loss.
- Possess good listening and relational skills.
- Is comfortable in the presence of sadness, tears, and intense emotion.
- Must be over the age of 18.

VOLUNTEER SAFEGUARDING AGREEMENT

Our parish / community is committed to safeguarding and protecting all children, young persons and adults who may be vulnerable, as well as all volunteers in Church roles.

This role will comply with the National Safeguarding Guidelines and Safeguarding Policy:

- Police Vetting Process completed prior to commencing ministry
- Code of Conduct for Employees & Volunteers - Signed by Volunteer
- Volunteer Agreement - Signed by Volunteer
- Safeguarding Training Workshops and relevant online training if appropriate

SAFE CHURCH

SAFEGUARDING

Parish / Entity: ***(Enter name here)***

Street Address, Suburb, Town / City

VOLUNTEER AGREEMENT

Name of Parish / Entity: .....

Name of Volunteer: .....

We welcome you to the following role(s): *Some volunteers may be involved in several ministries. All can be included in this one Volunteer Agreement. Provide Role Description, if no role description e.g. Someone mowing the lawn does not need a role description, but they still need to sign a volunteer agreement and a Code of Conduct.*

Role: .....

Key Tasks:.....

Role: .....

Key Tasks:.....

If there are more roles, they can be listed on the back of this agreement.

The person to whom you are accountable is: .....

- I understand it is my duty to protect the children, young people, vulnerable adults with whom I come into contact. I agree to abide by the policies and procedures agreed by the church for the protection of children and vulnerable adults.
- I understand the role I am undertaking. I will abide by the Code of Conduct for Employees and Volunteers in the Catholic Church in Aotearoa New Zealand.
- By completing this form, I consent to my information being stored and used for the purposes of managing this volunteer programme. I understand that my data will be held securely and that I have a right to access or amend my information. I understand that when I cease to be a volunteer, a summary of my information (name, role, and dates) will be retained for the organisation's safeguarding record.

Signed (Volunteer): .....

If the volunteer is under 18. The signature of a parent / caregiver is required. *Date*

DIOCESAN SAFEGUARDING OFFICER

Clodagh Ward: cward@cdoc.nz

Phone: 022 012 4142

Web: cdocsafeguarding.nz

CODE OF CONDUCT FOR EMPLOYEES AND VOLUNTEERS

in the Catholic Church in Aotearoa New Zealand

The skills and expertise that employees and volunteers bring to their role is vital to the life of the Church and is very much appreciated. All those who undertake work for the Church, whether paid or unpaid, are representing the Church and there are expectations for the way they perform their role.

This Code of Conduct for Employees and Volunteers sets out these expectations of behaviour. All employees and volunteers are asked to read and sign this Code of Conduct to acknowledge that they understand and accept these standards of conduct.

As a Church Employee or Volunteer I agree that:

- I will be honest and trustworthy.
- I will fulfil my role as set out in my role or job description.
- I will seek support if asked to do something beyond my experience, qualifications or comfort-zone.
- I will comply with all policies and procedures provided to me during my work.
- I will treat everyone with respect and courtesy.
- I am personally accountable for my decisions and actions in helping to create a safe and supportive environment within my Church community.
- I will avoid any activities that could bring the Church or my Church community into disrepute.
- I will ensure my actions are not affected by my personal interests or relationships.
- I will follow safeguarding procedures when I am with a child or group of children or providing ministry or service to any adult.
- I will respect the rights of people to privacy and confidentiality and confidential information will only be shared with others with the informed consent of the person, unless there is clear danger to them or to others.
- I will take all allegations of harm or abuse seriously and will follow our reporting procedures. I understand that I also have the right to report any concern or allegation of abuse or harm directly to the Police or Oranga Tamariki (Ministry for Children).
- I will honour the principles of Te Tiriti o Waitangi in my work. I will be respectful of other people's cultures.
- If my behaviour or conduct is found to be in breach of this Code of Conduct, I understand that consequences may include a requirement to apologise, training, a performance improvement strategy, warnings or dismissal.

If I do not understand any aspect of this Code of Conduct, I will speak to my manager, supervisor, or ministry leader.

Signed as an acknowledgement that this Code of Conduct has been received by me, I have had an opportunity to read it and ask questions about it, and that I agree to be bound by its terms:

Name: .....

Signature: ..... Date:.....

All personal information collected by this organisation is held in accordance with the Privacy Act 2020.

NEW ZEALAND POLICE
Ngā Pirihimana o Aotearoa

Vetting Service Request & Consent Form

NZPVS-CS – 05/19

Section 1: Approved Agency to complete (For more information please see the Guide to Completing the Consent Form - http://www.police.govt.nz/advice/businesses-and-organisations/vetting/forms-and-guides)

Name of Approved Agency submitting vetting request:

Name of Applicant to be vetted:

Description of Applicant's role:

Applicant's purpose

☐ Employee ☐ Contractor/Consultant ☐ Volunteer ☐ Prosecution

☐ Vocational Training ☐ Licence/Registration ☐ Visa/Work Permit ☐ Other

What group(s) will the applicant have contact with in their role for your agency?

☐ Children/Youth ☐ Elderly ☐ Other Vulnerable Adults ☐ Other

What is the applicant's *primary* role for your agency?

☐ Caregiving (Children) ☐ Caregiving (Vulnerable adults) ☐ Healthcare ☐ Education ☐ Other

Will the role take place in the applicant's home?

☐ Yes ☐ No

Will the applicant be a volunteer or paid for their role?

☐ Paid ☐ Volunteer

Is this request mandatory under the Children's Act 2014 (CA)?

☐ Yes: Core childrens worker ☐ Yes: Non-core childrens worker

☐ No (mandatory under other legislation/optional/standard Police Vet)

If this is a mandatory Children's Act request, please specify the check reason below:

☐ New Children's Worker ☐ Existing Children's Worker ☐ CA Renewal

Evidence of Identity (to be completed by agency representative/delegate or identity referee - see guide for details)

☐ A primary ID has been sighted (Mandatory) ☐ A secondary ID has been sighted (Mandatory)

☐ One form of ID is photographic (Mandatory) ☐ Evidence of name change has been sighted (if applicable)

OR: If your organisation is able to accept a verified RealMe identity then:

☐ An assertion of a RealMe identity has been received (see guide for further information).

In making this request, I confirm that:

✓ I have complied and will comply with the Approved Agency Agreement

✓ I am satisfied with the correctness of the applicant's identity

✓ I have obtained the Applicant's authorisation to submit this vetting request as set out in section 3 of this form

Approved Agency Authorised Representative:

Name: _____ Date: _____

Signature: _____ Electronic Signature ☐

NEW ZEALAND POLICE
Ngā Pirihimana o Aotearoa

Vetting Service
Request & Consent Form

Name of Approved Agency submitting vetting request:

Section 2: Applicant to complete and return to Approved Agency

**Denotes a mandatory field*

Personal Information

Details *(note: the name you are most commonly known by is your primary name)*

*Family name (Primary):

Given name(s):

*Gender: (M) ☐ (F) ☐ (Other) ☐

*Date of birth: (dd/mm/yyyy)

Place of birth: (Town/City/State)

*Country of birth

NZ Driver Licence number:

Previous names: If applicable, please include other alias or alternate names; married name if not your primary name; previous/maiden/name changed by deed poll or statutory declaration.

Family name	First name	Middle names

Permanent Residential Address

*Number/Street:

Suburb:

Post Code:

*City/Town/ Rural District:

Vetting Service Request & Consent Form

Section 3: Applicant to complete and return to Approved Agency

Consent to release information

1. The New Zealand Police may release **any** information they hold if relevant to the purpose of this vetting request. This includes:
   - Conviction histories and infringement/demerit reports
   - Active investigations, charges and warrants to arrest
   - Charges that did not result in a conviction including those that were acquitted, discharged without conviction, diverted or withdrawn
   - **Any** interaction I have had with New Zealand Police considered relevant to the role being vetted, including investigations that did not result in prosecution
   - Information regarding family violence where I was the victim, offender or witness to an incident or offence, primarily in cases where the role being vetted takes place in a home environment where exposure to physical or verbal violence could place vulnerable persons at emotional or physical risk.
   - Information subject to name suppression where that information is necessary to the purpose of the vet
2. If I am eligible under the Criminal Records (Clean Slate) Act 2004, my conviction history will not be released **unless**:
   a. Section 19(3) of the Clean Slate Act applies to this request (exceptions to the clean slate regime)
   b. Section 31(3) of the Children's Act 2014 applies to this request (safety checks of core children's workers).
   c. The vetting request is made by an individual for the purpose of an overseas Visa/Work Permit as a Privacy Act request authorising the vetting result to be provided directly to the relevant embassy, high commission or consulate.

   Please see the guide for more information regarding the Clean Slate legislation.
3. The Police Vetting Service may disclose newly-obtained relevant information to the Approved Agency after the completion of the Police Vet in the following circumstances:
   - The disclosure of the newly-obtained information is considered to be justified under the Privacy Act 1993 (if it had existed or been available at the time of the Police vet, it would have been disclosed); and
   - The Police Vetting Service has taken steps to confirm that the purpose of the Police vet still exists – e.g. that I got the role which required a Police vet and am still employed or engaged in it.

   The Vetting Service will endeavour to notify you prior to the disclosure.
4. Information provided in this consent form may be used to update New Zealand Police records.
5. I am entitled to a copy of the vetting result released to the Approved Agency (to be provided by the agency) and can seek a correction by contacting the Vetting Service.
6. The Approved Agency will securely dispose of this consent form, copies of identification documents and the vetting result within 12 months of receiving the result unless a longer retention period is required by legislation.
7. I may withdraw this consent, prior to Police's disclosure of the vetting result, by notifying the Approved Agency.

   For further information, please see the Guide to Completing the Consent Form.

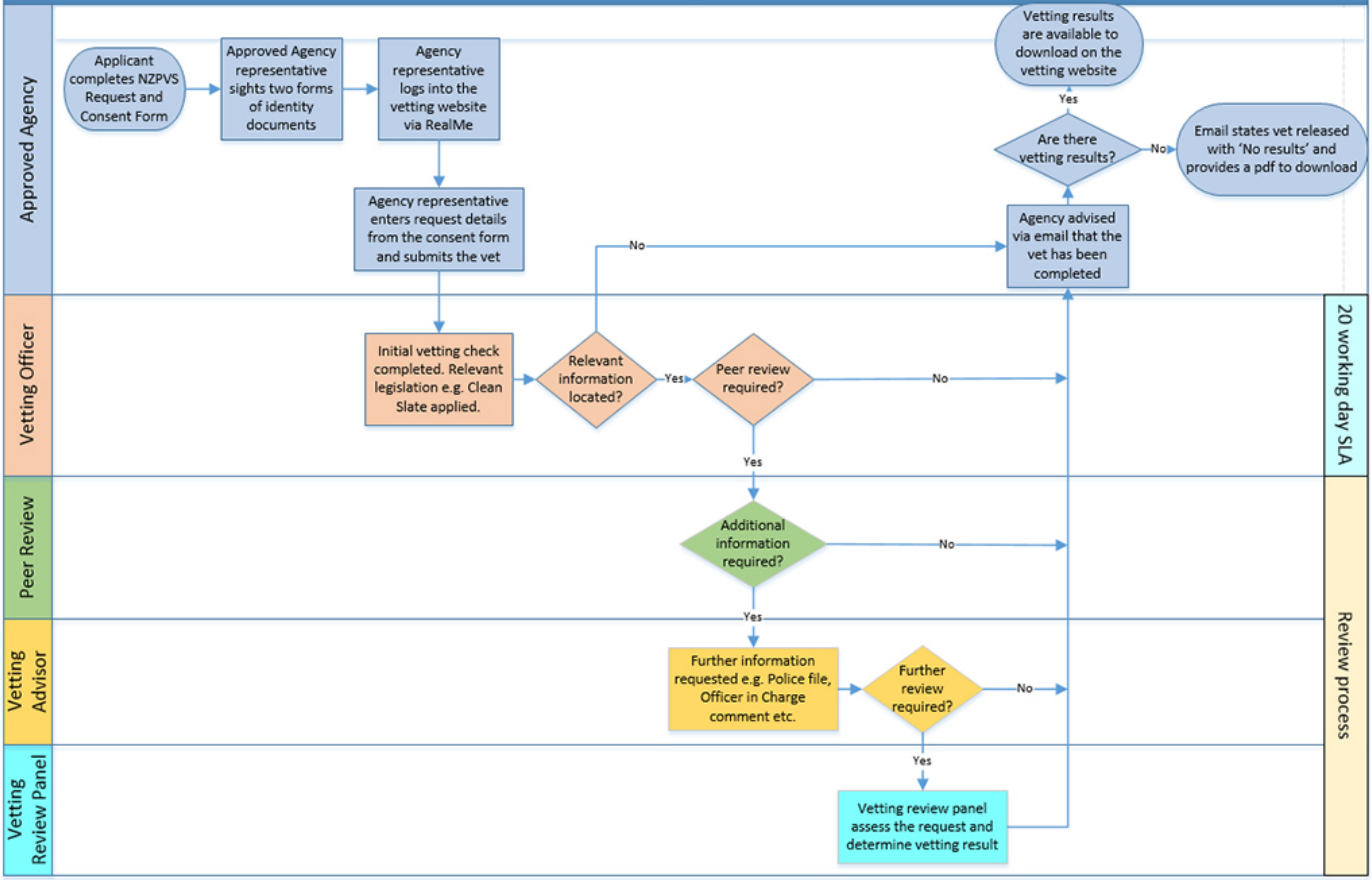
Applicant's Authorisation:

✓ I confirm that the information I have provided in this form relates to me and is correct.

✓ I have read and understood the information above.

✓ I authorise New Zealand Police to disclose any personal information it considers relevant to my application (as described above) to the Approved Agency making this request for the purpose of assessing my suitability at any time.

Name: _____ Date: _____

Signature: _____ Electronic Signature ☐

The Vetting Process