



Policies for Volunteers (including Board Members)

The following policies and agreements are intended to promote the safety of children (clients), non-offending family members (clients) served and the integrity of The Advocacy Center for Children of Galveston County and the Multi-Disciplinary Team.

- A. Volunteer Policy on Confidentiality
- B. Volunteer Policy on Dual Client relationships
- C. Policy on Screening and Re-screening procedure for criminal background checks, child abuse registry checks and sex offender registry checks

A. Volunteer Policy on Confidentiality

Confidentiality is of utmost importance for children and families served by The Advocacy Center for Children of Galveston County. Respecting the privacy of our clients, donors, members, staff, volunteers and of The Advocacy Center for Children of Galveston County itself is a basic value of The Advocacy Center for Children of Galveston County.

Client information, personal and financial information is confidential and should not be disclosed or discussed with anyone without permission or authorization from the Executive Director, Carmen Crabtree. Care shall also be taken to ensure that unauthorized individuals do not overhear any discussion of confidential information and that documents containing confidential information are not left in the open or inadvertently shared. Employees, volunteers and board members of The Advocacy Center for Children of Galveston County may be exposed to information which is confidential and/or privileged and proprietary in nature. It is the policy of The Advocacy Center for Children of Galveston County that such information must be kept confidential both during and after employment or volunteer service. Staff and volunteers, including board members, are expected to return materials containing privileged or confidential information at the time of separation from employment or expiration of service. Unauthorized disclosure of confidential or privileged information is a serious violation of this policy and will subject the person(s) who made the unauthorized disclosure to appropriate discipline, including removal/dismissal.

VOLUNTEER CONFIDENTIALITY AGREEMENT

I, _____, agree with the following statements:

I have read and understood The Advocacy Center for Children of Galveston County's Confidentiality Policy.

I understand that I may encounter confidential information during my time at The Advocacy Center for Children of Galveston County As part of the condition of my work with The Advocacy Center for Children of Galveston County. I hereby undertake to keep in strict confidence any information regarding any client, employee or business of The Advocacy Center for Children of Galveston County or any other organization that comes to my attention while at The Advocacy Center for Children of Galveston County. I will do this in accordance with The Advocacy Center for Children of Galveston County's privacy policy and applicable laws, including those that require mandatory reporting.

I also agree to never remove any confidential material of any kind from the premises of The Advocacy Center for Children of Galveston County unless authorized as part of my duties, or with the express written permission or direction to do so from The Executive Director of The Advocacy Center for Children of Galveston County.



B. Volunteer Policy on Dual Client relationships

In Galveston County, like other communities, there may be a time when a volunteer knows a family or child receiving services from The Advocacy Center for Children. Dual relationships are defined as those in which the volunteer, employee or Board member of The Advocacy Center assumes a second role with a child client or their family which include, but are not limited to, friend, employer, teacher, business associate, personal family member, or romantic/sexual partner.

It is the policy of The Advocacy Center for Children that volunteers may not interact with clients with whom they have dual relationships with, while on premises unless authorized to do so by The Executive Director of The Advocacy Center for Children of Galveston County. Knowing disregard of this policy will constitute volunteer entering an inappropriate relationship which can expose the program or volunteer to criminal or civil liability. The Advocacy Center for Children of Galveston County expressly prohibits inappropriate relationships between volunteers and clients.

It is the policy of The Advocacy Center for Children of Galveston County that a volunteer should immediately notify the staff of The Advocacy Center for Children of Galveston County of the dual relationship and that the volunteer have no contact with the client or their family, while on premises. Furthermore, all information is confidential, and volunteer may not disclose or disseminate any information, as outlined in the Volunteer Policy on Confidentiality and as agreed to in The Volunteer Confidentiality Agreement.

Purposeful Noncompliance with this policy is considered a serious violation and will subject the person(s) to appropriate discipline, including removal/dismissal.

VOLUNTEER/CLIENT RELATIONSHIP AGREEMENT

I, _____, agree with the following statements:

I have read and understood The Advocacy Center for Children of Galveston County's Policy on Volunteer/Client Relationships.

I understand that I may experience dual relationships during my time at The Advocacy Center for Children of Galveston County. I hereby agree to notify a member of the staff of The Advocacy Center for Children of Galveston County should such a situation arise. I will do this in accordance with The Advocacy Center for Children of Galveston County's policy on volunteer/client relationships.

I also agree to never knowingly interact with a client or their family member with whom I have a dual relationship on the premises of The Advocacy Center for Children of Galveston County unless authorized to do so by The Executive Director of The Advocacy Center for Children of Galveston County.

C. Volunteer Policy Screening and Re-screening procedure for criminal background checks, child abuse registry checks and sex offender registry checks

It is policy of The Advocacy Center for Children of Galveston County that any individual applying for a volunteer position with The Advocacy Center for Children of Galveston County will be required to consent to a criminal history check from the Texas Department of Public Safety (DPS), a check from the Texas Department of Family and Protective Services (DFPS) Central Registry of Child Abuse and Neglect and a sex offender registry check. Consent is a condition for all prospective or current volunteers, employees or board members.

A person is listed in the DFPS Central Registry when all the following occur: • The person has been investigated for child abuse or neglect by Child Protective Services (CPS), Child Care



Investigations (CCI), or HHSC Provider Investigations. • The investigation resulted in a disposition of Reason to Believe for CPS and CCI cases or Confirmed and Validated for HHSC Provider Investigations cases. • The person is listed as a designated perpetrator or sustained perpetrator. Cases involving adult victims are not included in the DFPS Central Registry. In addition, a person will not clear the Central Registry check if that person is involved as an alleged perpetrator in an open child abuse or neglect investigation being conducted by DFPS. A new Central Registry check may be requested at the end of the investigation to determine whether the person has been listed as a designated perpetrator on the DFPS Central Registry. As the subject of this background check request, you have the right to review the results of this check. If the Central Registry identifies you as a person who has been found to have abused or neglected a child, DFPS only sends the results directly to you by mail or email. You have the option to share these findings with the organization listed above (see Section 3). The criminal history check from DPS includes all Texas-based arrests and dispositions, including both convictions and cases with unknown dispositions. In some cases, the search produces juvenile criminal history results. Information about unknown dispositions may not be current. If the results returned from DPS include an unknown disposition or to dispute the criminal history record, visit the DPS Criminal History Error Resolution webpage for more information on how to update the criminal history record.

It is policy that, prior to being considered as a volunteer, the subject of the background check must read and complete all sections and return the form to the designated staff member at The Advocacy Center for Children. Results will be returned to the designated staff member and reviewed by The Executive Director. Subject of the background check may request a copy of said results via email or mail as designated on the form.

It is policy of The Advocacy Center for Children that records of arrests on pending charges and/or convictions, unless otherwise specified, are not an absolute bar to consideration for a volunteer position. Such information will be used to determine whether the results of the background check reasonably bear on trustworthiness or ability to perform the duties of the position in a manner which is safe for The Advocacy Center for Children of Galveston County clients, Board Members, employees, and other agencies.

It is policy The Advocacy Center for Children of Galveston County shall not accept candidates if they have been convicted, have prior charges, or have charges pending for a felony or misdemeanor involving a sex offense, violent act, child abuse or neglect, or related acts that would pose a risk to children or the program's credibility. The Advocacy Center for Children of Galveston County shall not accept candidates if they have a Department of Family and Protective Services (DFPS) disposition of Reason to Believe (RTB) for sexual abuse or physical abuse. All other RTB dispositions should be evaluated on a case-by-case basis and a determination will be made by the Executive Director. The safety of the children and non-offending caregivers/family members served at The Advocacy Center for Children of Galveston County is a priority for the Board and staff.

It is policy for volunteers to be rescreened through criminal history checks, child abuse registry, and sex offender registry checks, at a minimum, every three (3) years.



VOLUNTEER Screening and Re-screening procedure for criminal background checks, child abuse registry checks and sex offender registry checks AGREEMENT

I, _____, agree with the following statements:

I have read and understood The Advocacy Center for Children of Galveston County's Policy on Screening and Re-screening procedure for criminal background checks, child abuse registry checks and sex offender registry checks.

I hereby consent to a criminal history check from the Texas Department of Public Safety (DPS), a check from the Texas Department of Family and Protective Services (DFPS) Central Registry of Child Abuse and Neglect and a sex offender registry check.

I understand that The Advocacy Center for Children of Galveston County shall not accept candidates if they have been convicted, have prior charges, or have charges pending for a felony or misdemeanor involving a sex offense, violent act, child abuse or neglect, or related acts that would pose a risk to children or the program's credibility and that The Advocacy Center for Children of Galveston County shall not accept candidates if they have a Department of Family and Protective Services (DFPS) disposition of Reason to Believe (RTB) for sexual abuse or physical abuse and that all other RTB dispositions should be evaluated on a case-by-case basis and a determination will be made by the Executive Director.

I understand that it is procedure for volunteers to be rescreened through criminal history checks, child abuse registry, and sex offender registry checks, at a minimum, every three (3) years. I agree to notify The Advocacy Center for Children of Galveston County of any changes to my status with Texas Department of Public Safety (DPS), Texas Department of Family and Protective Services (DFPS) Central Registry of Child Abuse and Neglect and the sex offender registry immediately.

I authorize all agencies involved to transmit all results of background checks to be transmitted via email. I acknowledge that even though best practices are met regarding security, The Advocacy Center for Children of Galveston County cannot fully guarantee that information transmitted electronically is 100% secure.

I authorize all agencies involved to transmit all results of background checks to be transmitted via email and I acknowledge that even though best practices are met in regards to security, The Advocacy Center for Children of Galveston County cannot fully guarantee that information transmitted electronically is 100% secure.

I understand the information I am providing to be part of any request and that providing false information is a violation of Texas Penal Code Section 37.10 and also grounds for automatic termination from The Advocacy Center for Children of Galveston County.

I, _____, have read **A) Volunteer Policy on Confidentiality; B) Volunteer Policy on Dual Client relationships C) Policy on Screening and Re-screening procedure for criminal background checks, child abuse registry checks and sex offender registry checks** and I agree to abide by the policies laid out herein by The Advocacy Center for Children of Galveston County.

Signature

Signature of witness

Date: ____/____/____



**Section 1-7 DFPS Information Request for Central Registry and Criminal History
Background Checks Form F-500-2854 Revised January 2020 (4 pages) SUPPLEMENT
FORMS**

Information required for Screening and Re-screening for criminal background checks,
child abuse registry checks and sex offender registry checks.

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REQUEST FOR CENTRAL REGISTRY AND CRIMINAL HISTORY BACKGROUND CHECKS

Purpose: Representatives of Big Brothers and Big Sisters of America and Children’s Advocacy Centers of Texas use this form to request the following background checks for potential and current volunteers, employees, and board members:

- A criminal history background check from the Texas Department of Public Safety (DPS).
- A child abuse and neglect Central Registry background check from the Texas Department of Family and Protective Services (DFPS).

Directions: The subject of the background check completes the following sections:

- *Section 1: Personal Information*
- *Section 2: Previous Places of Residence*
- *Section 6: Signatures*

The designee must do the following:

- Make sure the subject of the background check provided complete and accurate information in Sections 1 and 2 and signed and dated Section 6. The designee verifies the information by viewing official documents provided by the subject of the check, such as a driver’s license or Social Security card.
- Complete *Section 3: Designee*.
- Enter the background check for the subject of the request in the Automated Background Check System (ABCS) for the associated account.

For additional questions, contact Background Checks at the following:

Email: CACTXBGCREQUEST@dfps.state.tx.us
Mail: DFPS Background Checks M/C 121-7; PO BOX 149030, Austin, TX 78714-9030
Fax: 512-339-5831

SECTION 1: NAME		
First Name:	Middle Name: <input type="checkbox"/> No Middle Name	Last Name:
Have you ever used any other first, middle, or last names (such as a nickname, a married or maiden name, or a different spelling for your name)? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If you answered Yes above, you must list every other name you have used.		
OTHER FIRST NAMES	OTHER MIDDLE NAMES	OTHER LAST NAMES



SECTION 2: OTHER PERSONAL INFORMATION

Home Street Address:		City:	State:	Zip Code:
County of Residence:		Date of Birth:	Phone Number:	
Social Security Number (if no SSN, provide alternate document name and ID number)		Driver's License Number and State:		Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
Ethnicity: <input type="checkbox"/> Hispanic <input type="checkbox"/> Other		Race: <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Unable to Determine <input type="checkbox"/> Asian <input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Native Hawaiian or Pacific Islander		

SECTION 3: PREVIOUS PLACES OF RESIDENCE

Have you lived outside the state of Texas in the past two years?
 Yes No

If you answered Yes above, list each place you lived outside of Texas within at least the past two years. Provide the complete address and the dates you lived there (continue on the back as needed).

FULL ADDRESS (INCLUDE CITY, STATE, AND ZIP CODE)	DATES (MM/YYYY – MM/YYYY)

SECTION 4: DESIGNEE

Full Name: Candace Hattingh	Email Address: candy@galvestoncac.org
Name of the Organization the Designee Represents: Advocacy Center for Children of Galveston County	



SECTION 5: NOTE TO THE SUBJECT OF THE BACKGROUND CHECK

A person is listed in the DFPS Central Registry when all the following occur:

- The person has been investigated for child abuse or neglect by Child Protective Services (CPS), Child Care Investigations (CCI), or HHSC Provider Investigations.
- The investigation resulted in a disposition of *Reason to Believe* for CPS and CCI cases or *Confirmed and Validated* for HHSC Provider Investigations cases.
- The person is listed as a designated perpetrator or sustained perpetrator.

Cases involving adult victims are not included in the DFPS Central Registry.

In addition, a person will not clear the Central Registry check if that person is involved as an alleged perpetrator in an open child abuse or neglect investigation being conducted by DFPS. A new Central Registry check may be requested at the end of the investigation to determine whether the person has been listed as a designated perpetrator on the DFPS Central Registry.

As the subject of this background check request, you have the right to review the results of this check. If the Central Registry identifies you as a person who has been found to have abused or neglected a child, DFPS only sends the results directly to you by mail or email. You have the option to share these findings with the organization listed above (see Section 3).

The criminal history check from DPS includes all Texas-based arrests and dispositions, including both convictions and cases with unknown dispositions. In some cases, the search produces juvenile criminal history results.

Information about unknown dispositions may not be current. If the results returned from DPS include an unknown disposition or to dispute the criminal history record, visit the [DPS Criminal History Error Resolution](#) webpage for more information on how to update the criminal history record.

SECTION 6: PRIVACY STATEMENT

DFPS values your privacy. For more information, read our [Privacy and Security Policy](#).

SECTION 7: SIGNATURE

Only the subject of the background check can sign this form.

I am the person listed above in Section 1 of this form. The information in this document is correct, and I am a prospective or current volunteer, employee, or board member of the organization listed in Section 3.

I agree to update the organization of any changes to the information above.

I give permission to the organization listed in Section 3 to request a Central Registry child abuse and neglect background check and a DPS criminal history background check, as well as any subsequent checks so long as I am active with that organization.

I authorize DFPS to send the results of this background check via email, and I acknowledge that DFPS cannot guarantee that information sent electronically is secure and accessible only to approved parties.

I understand that the information I am providing will be part of any request and that providing false information is a violation of Texas Penal Code Section 37.10.

By law, any information obtained through DFPS is confidential information and is personal in nature. I understand that I may have access to or may view confidential and sensitive information. I will not disclose confidential information to other people and under no circumstances will I intentionally access confidential information for any purpose other than in the performance of my assigned job duties.

Signature:

X

Date Signed:



Section 8:

Why do you want to volunteer? _____

What volunteer position are you interested in:

___ Rainbow Room ___ Board Member ___ Internship ___ Prevention Program

___ Clerical Assistance ___ Garden/Yard Work

How did you learn about us? _____

Availability: _____

Are you presently employed? ___ Yes ___ No

If yes, Name and Address of Employer:

Are you presently in school? ___ Yes ___ No

If yes, Name and Address of School:

Date you can start volunteering: ___ / ___ / ___

List any offices held or memberships in clubs or organizations:

Volunteer Experience (Name of Organization, dates and duties):

Do you have any experience with child abuse, child welfare, foster care, juvenile, family or criminal court or other child serving agencies? Please explain:

What do you feel are 3 of your strengths and 3 of your weaknesses?



Do you speak any other language (including ASL) other than English? Yes No

If yes, please list: _____

Have you had prior involvement with Child Protective Services? Yes No

If yes, please list County, State, Dates and circumstances: _____

Do you have a criminal record? Yes No

If yes, please explain: _____

Have you ever been charged with or convicted of the following:

Felony: Yes No

Misdemeanor: Yes No

Are you under indictment for or has a district attorney accepted an official complaint about offenses naming you as a person of interest/ a suspect/ defendant? Yes No

Have you ever been serving in any capacity as an employee or volunteer with any organization or agency working with children? Yes No

Have you ever been reassigned, removed or asked to leave any position involving contact with children? Yes No

Please list three (3) references (not relatives) with address and phone number:

1. _____

2. _____

3. _____

In case of emergency, whom should we notify:

Name: _____ Relationship: _____

Address: _____

Phone: _____

I am the person listed on this form and I am a prospective or current volunteer or board member of The Advocacy Center for Children of Galveston County. I will notify The Advocacy Center for Children of Galveston County of any changes of the above personal information. I agree to conform to the policies and procedures of The Advocacy Center for Children of Galveston County. I have been informed of the policy regarding confidentiality. I agree to respect the confidential nature of all case information including, but not limited to, the names of those utilizing facilities and the names of alleged perpetrators. I agree to participate in orientation and training. I understand that this relationship can be terminated at any time by myself or The



Advocacy Center for Children of Galveston County. I understand that I am not an employee of The Advocacy Center for Children of Galveston County. I understand that a background check is required of volunteers and agree to a criminal history background check, Child Protective Services Records Check and a Sex Offender Registry check. I hereby give permission to The Advocacy Center for Children of Galveston County to inquire about my records, qualifications and/ or character. I understand that this check may be made by phone or in writing and will include employers, organizations, personal references, The Department of Protective and Regulatory Services and police records. The results of this check will be confidential.

Authorizing Signature: _____ Date: ____/____/____

STAFF ONLY
APPROVED

By: _____ Date: ____/____/____