

Operation Lifesaver Sex Offender Registry Check Policy
Florida Operation Lifesaver
Adopted: 2009

Operation Lifesaver Volunteers, who are involved with Florida Operation Lifesaver, must adhere to the guidelines of the Sex Offender Registry Check Policy.

Operation Lifesaver Presenter means an individual:

- 1) Who is certified by OLI as a presenter and has completed the 90 day presentation
- 2) Who is an Associate presenter and has taken the associates class (online or in class)
- 3) Who is at least eighteen (18) years of age

MANDATORY:

Florida Operation Lifesaver shall conduct a Department of Justice National Sex Offender Public Registry check at <http://www.nsopr.gov> on all associates and presenters involved with Florida Operation Lifesaver.

SELECTION CRITERIA:

- 1) Anyone appearing on the NSOPR is automatically disqualified from participating with Florida Operation Lifesaver.
- 2) A presenter/participant that refuses to consent to the Sex Offender Registry Check or who makes a false statement in connection with the inquiry concerning the individual's criminal history may not participate with Florida Operation Lifesaver.

The following criteria will be considered when conducting Sex Offender Registry check results:

- 1) Sexual abuse of a minor
- 2) Incest
- 3) Sexual Assault
- 4) Sexual exploitation of a minor
- 5) Child Abuse
- 6) Sexual conduct with a minor
- 7) Molestation of a child

8) Rape, criminal sexual contact, incest, indecent exposure or other related sexual offenses

If any presenter/participant involved with Florida Operation Lifesaver has been convicted of any of the above said crimes, Florida Operation Lifesaver **has the right to deny participation and will deny participation** in the Operation Lifesaver program.

Sex Offender Registry check results for presenter participation in the Operation Lifesaver program are at the discretion of Florida Operation Lifesaver.

DOCUMENTATION:

Florida Operation Lifesaver shall maintain Sex Offender Registry check documentation for presenter/participants in a secure location only accessible by individuals who have an official need to review the information to interpret the results. The persons eligible to review the results are the State Coordinator and Florida Operation Lifesaver Board of Directors. This documentation shall demonstrate that in selecting an individual for participation in the program, Florida Operation Lifesaver reviewed and considered the Sex Offender Registry check's results. Any Operation Lifesaver presenter/participant may view the results *of their* criminal history background check at any time.

PROCEDURES:

- 1) The State Coordinator shall conduct and review the results of the Sex Offender Registry check after the presenter/participant has applied to the program.
- 2) Florida Operation Lifesaver participants have the right to contest and correct any information on their Sex Offender Registry check that is inaccurate.
- 3) Results of all Sex Offender Registry checks will be kept in a secure location only accessible to the Florida Operation Lifesaver State Coordinator and the Florida Operation Lifesaver Board of Directors.

Signature of Volunteer

Date

Printed Name of Volunteer

Allowing Florida Operation Lifesaver to conduct a Department of Justice National Sex Offender Public Registry



PLEASE CHECK ONE: ASSOCIATE _____ PRESENTER _____

OPERATION LIFESAVER VOLUNTEER APPLICATION

PLEASE PRINT VERY CLEARLY. DO NOT USE ABBREVIATIONS.

First Name: _____ MI: _____ Last Name: _____
Title: _____ Organization: _____
Home Address: _____ City: _____ State _____ Zip: _____
Work Address: _____ City: _____ State _____ Zip: _____
Preferred Mailing Address: _____
Home Phone: (____) _____ Work Phone: (____) _____
Fax: (____) _____ Pager: (____) _____ E-Mail: _____

Have you ever been convicted of a felony? No _____ Yes _____ (If yes, you may still be eligible to become a Presenter. Please contact OLI's President at 1-800-537-6224 for further instructions.)

I am prepared to provide a minimum of _____ hours per month to Operation Lifesaver activities. I will be presenting in the following state(s) _____

My employer approves of my involvement in Operation Lifesaver and will support my commitment to these activities.

Yes _____ No _____ NA _____

If activities will be on company time give supervisor's name and phone number:

Supervisor: _____ Phone (____) _____

PLEASE READ CAREFULLY

I understand and agree to abide by the policies of Operation Lifesaver, Inc. (OLI) and those of the state in which I wish to present, and to use only materials approved by OLI in my presentations. I hereby affirm that the information provided by me on this application is complete and accurate. I understand that any falsification or omission will be grounds for immediate removal from my work with Operation Lifesaver (OL). Should OLI determine that an investigation of my background be advisable and warranted, I hereby authorize OLI to obtain data regarding information provided on this application and my background in general, including but not limited to any charges and/or convictions I may have had for violation of municipal, county, state or federal laws since reaching the age of majority (legal age). This information may be gathered from any source, including any law enforcement agency of this state or federal government, or from third-party providers of information originally obtained from law enforcement or court records. OLI reserves the right, in its sole discretion, not to certify an individual or to suspend or terminate any individual from participation as an OL presenter and/or from the OL program. Non-certification, suspension or termination may be made for any reason, including but not limited to violation of OLI policy, and/or any other reason based on the needs and best interests of OLI.

APPLICANT'S SIGNATURE: _____ Date: _____

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**THIS PORTION IS TO BE COMPLETED BY THE TRAINER(S)**

Training (Certification Course with Acceptable Rating on 10 minute Presentation)

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

Trainer(s) \_\_\_\_\_ Post Test Score: \_\_\_\_\_

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THIS PORTION IS TO BE COMPLETED BY THE STATE COORDINATOR

Date of first public presentation: _____ Reviewed by: _____

Submitted by (State Coordinator's Signature): _____ Date: _____

Trainer and State Coordinator should retain a copy of this form. One copy must be sent to OLI.

~~~~~FOR OLI OFFICE USE ONLY~~~~~

CERTIFICATION NUMBER: \_\_\_\_\_ DATE ISSUED: \_\_\_\_\_

STATE NOTIFICATION: \_\_\_\_\_ OLI: \_\_\_\_\_

1. **Certification.** Any person who represents the state Operation Lifesaver (OL) program by making any type of highway-rail grade crossing education presentation or who makes any type of OL education presentation, must first be certified by Operation Lifesaver, Inc. (OLI). This includes attending and satisfactorily completing an approved OLI Certification Program and holding a current certificate issued by OLI.
2. **Scheduling of Presentations.** The OL state coordinator or authorized designee will schedule presentations, providing as much advance notice as possible (generally at least two (2) weeks in advance). All OL presentations must be coordinated through the state OL coordinator or authorized designee. It is acceptable for OLI certified presenters to schedule OL presentations as long as the state OL coordinator or authorized designee is aware of the presenter's activities and is in agreement with what is being scheduled. There should be no conflicts with other presentations being scheduled by the coordinator and/or other presenters in the area.
3. **Presenter Conduct.** The role of a presenter is strictly limited to providing safety education programs for which the presenter has been certified by OLI. Presenters are not and should not consider themselves to have any other role on behalf of a state program or OLI and may not serve as spokespersons for a state program or OLI. Requests from the media or other persons or entities related to OLI and its state programs should be directed to the state program coordinator or OLI. Nevertheless, it is understood that the conduct of OLI certified presenters reflects on the state OL and national OLI program and on the presenter's employer. Therefore, inappropriate behavior, language, and discriminatory or harassing remarks and behavior, including sexual, racial, religious and other forms of harassment and other activities that reflect poorly on OLI will not be tolerated and are grounds for immediate decertification. The presenter's only responsibility is to deliver an OL presentation as taught in the OLI presenter certification program. Presenters are not authorized to express their opinions or to discuss topics other than those specifically included in the OLI Presenter's Guide.
4. **Materials and Back-Up Presenter.** Presenters may only use materials authorized by OLI when making presentations. Materials not authorized by OLI in advance in writing, including images related to actual deaths or injuries even if such materials are readily available in the public domain, are prohibited from use in any presentation or event. It is the presenter's responsibility to prepare in advance, make arrangements to acquire all necessary materials from an OL coordinator, deliver the presentation at the agreed-upon time and place, and to return the materials upon completion of the presentation in a timely manner. If a presenter cannot make a presentation due to an emergency, it is the presenter's obligation to contact the OL state coordinator as soon as possible so that a replacement can be found. Depending on circumstances, a presenter who fails to show up for a scheduled presentation will be placed on probation, suspended or terminated at the sole discretion of the state OL coordinator. Such steps are taken to ensure the credibility of the state OL program and the national OLI program.
5. **Dress.** A dress code is in effect for OL presenters. For men, a sports jacket and tie, a shirt with a collar or sweater and dress/casual slacks are all appropriate attire; dress or clean casual shoes are required. For women, a dress, skirt and blouse, pantsuits, and pants with a shirt are all acceptable; dress or clean casual shoes are required. At times, depending on your audience, appropriate costumes, uniforms and sports apparel would be acceptable. Remember the nature of the event and your audiences dictate the proper type of clothing you should wear. You should usually "out dress" your audience by one level. Cut-offs, T-shirts, unclean clothing and unclean shoes are prohibited. If there are questions concerning a special costume to be worn or the appropriateness of your attire, please call your state coordinator or OLI.
6. **Reporting.** Upon completion of a presentation, the presenter must submit the proper reporting form to the state coordinator and to the appropriate railroad (if applicable). A presenter who has questions concerning OL should contact the OL state coordinator for help.
7. **State and Employer Policies.** In addition to being familiar with the national and state OL policies, it is the responsibility of each presenter to be familiar with any policies concerning OL that their employer may have and comply with those policies. If there are any conflicts between the policies of the state OL and the presenter's employer, it is up to the presenter to contact their OL state coordinator as soon as the conflict is known so that it can be resolved.
8. **Recruitment.** It is permissible for an OL presenter to help recruit other people for consideration as OL presenters or associates. Submit names, addresses and telephone numbers of interested individuals to the OL state coordinator.
9. **Background and complaint policies.** OLI's volunteer background check policy and complaint process policy are available upon request from OLI at 1-800-537-6224, or from your state coordinator.

## **Background Check Policy**

Volunteers for OLI and its state programs routinely work and interface with the general public, including children and the elderly. Because of the public trust invested in OLI, its state programs and its volunteers, OLI requires all its volunteers to complete a volunteer application. The information provided on applications is verified and confirmed to the extent possible to ensure that applicants' backgrounds are appropriate for the work in which the volunteers will engage. While not routinely conducted, OLI may have a criminal background investigation conducted on applicants if, in OLI's sole discretion, such an investigation is warranted. OLI's Background Check Policy is intended solely to protect public safety. OLI uses its best efforts to protect the privacy of its volunteers and to utilize information obtained through background investigations strictly for the purpose of determining fitness to perform the volunteer work.

### **A criminal background check is warranted if:**

1. the applicant indicates that he has a prior criminal conviction;
2. supplemental information is received that indicates that the applicant has a prior criminal conviction or is prone to violent or anti-social behavior

Confirmation of a criminal conviction of any of the following offenses shall prohibit the individual from participating in Operation Lifesaver programs unless a committee appointed by OLI determines that exceptional circumstances apply:

1. illegal sexual behavior;
2. crimes involving children or the elderly;
3. violent acts against persons or property; or
4. a controlled substance or alcohol violation within the past 5 years.

### **Applicants' Rights**

OLI will inform the applicant of the nature of the information received and the source. If the applicant wishes to challenge the accuracy of the information, he/she will be advised to communicate directly with the records repository. Until OLI receives a correction from the records repository, it will assume that the information received is correct.

## Complaint Process

Any person, including members of the public, Operation Lifesaver volunteers and staff, who believes that an Operation Lifesaver volunteer or staff member has engaged in inappropriate conduct, including discriminatory behavior or harassment of any type, including but not limited to sexual, racial or religious harassment, should immediately report the inappropriate conduct to the Operation Lifesaver state coordinator. All complaints received by any Operation Lifesaver volunteer or staff member should be forwarded and reported in writing to the appropriate Operation Lifesaver state coordinator. The state coordinator should then send a copy to Operation Lifesaver, Inc. (OLI). In the event that the Operation Lifesaver state coordinator is believed to be involved in the discrimination, harassment or other inappropriate conduct, the complaint may be made directly to the President or other designated representative of OLI. All complaints should immediately be investigated by the appropriate party including:

1. interviewing both parties, the party originally making the complaint and the party of which the complaint is made;
2. interviewing other parties who may be witnesses to the complained of behavior or who otherwise may have knowledge of it;
3. weighing the evidence and providing a written report, including a recommended course of action to OLI.

Investigations should be conducted as quickly as possible. All information reported shall remain confidential, and shall only be made known to individuals with a specific need to know the information. Parties interviewed during the investigation should be provided only with the limited information necessary to conduct the investigation.

OLI shall review the investigation and determine the appropriate action to be taken (i.e., immediate decertification of the complained of party, no action, monitoring the situation if substantial facts cannot be determined based on the initial investigation).

In the event that a party is to be decertified or otherwise disciplined, that party shall be provided written notice, detailing the basis for the disciplinary action and be given an opportunity to appeal the action in writing to OLI.

Due to the harm false allegations may cause, appropriate action shall also be taken against any party found to have knowingly made a false complaint.

**FOR IMMEDIATE RELEASE**

TO: All OLI Staff, Officers, Directors, State Coordinators, Presenters, Trainers and other Volunteers  
FROM: Gerri L. Hall, President, OLI  
RE: OLI Harassment Policy  
DATE: June 2, 2003

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OLI takes seriously any concerns or complaints raised involving harassment of any of its or its state programs' staff, officers, directors, presenters, trainers and other volunteers. Therefore, OLI has begun a program to remind and educate its participants of its sexual harassment and retaliation policy. This memo outlines OLI's policy, provides examples of what is considered harassment and retaliation, and explains the process for filing a complaint. OLI is developing a program to provide additional training and information related to sexual harassment, retaliation, discrimination and other common legal concerns. Your feedback and input is welcome. For more information contact Wende Gannon, Director of Education and Training, OLI.

**Policy**

*Operation Lifesaver, Inc., does not sanction or condone sexual harassment in any form.*

**Sexual Harassment Defined**

The United States Equal Employment Opportunity Commission (EEOC) has defined sexual harassment as:

*Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature... when submission to or rejection of this conduct explicitly or implicitly affects an individual's work environment, unreasonably interferes with an individual's work performance or creates an intimidating, hostile or offensive work environment.*

Some examples of sexual harassment include (but are not limited to):

- Requests for sexual favors (i.e., sleep with me) in return for undertaking activities (i.e., conducting OLI training classes for you);
- Lewd and/or sexual comments and references (i.e., you look "hot", or any other references to someone's physical characteristics);
- Repeated telephone calls, emails, etc. that include non-business related sexual references and propositions;
- Displays of sexual or other lewd images;
- Touching another's breasts, buttocks or other private parts;
- Any comments, touching, propositions or requests which are unwelcome.

Sexual harassment generally does not include a pat on the arm, a hug or calling someone "honey" or "sweetie", if both parties feel comfortable with these types of exchanges. To be considered harassment **the conduct must be unwelcome. Consensual activities and**

**“banter” among colleagues does not constitute harassment.** However, participants engage in such conduct at their own risk and are cautioned to immediately cease any such conduct when asked to do so or as soon as they are aware that such conduct is making one or more persons uncomfortable.

Likewise, **if you become uncomfortable in a situation you should make your discomfort clear and ask that the conduct stop.**

### **Reporting**

Anyone who believes he or she has been the victim of sexual harassment while engaged in OLI activities should report it to the appropriate OL state coordinator or the OLI national President. Alternatively, incidents of sexual harassment may be reported to the OLI general legal counsel. Reports of sexual harassment are kept confidential.

### **Retaliation**

**OLI does not accept or condone retaliation** against individuals who report an incident(s). Retaliation includes any change in conduct or treatment of an individual based on the knowledge or belief that an individual has reported one or more incidents of sexual harassment. Reports of retaliation are taken seriously and investigated in the same manner as reports of harassment.

### **Failure to report**

Because sexual harassment is defined as unwelcome sexual advances or conduct, persons who believed they are a victim of such conduct should ask that the conduct stop and report the conduct, particularly if it does not stop. Failure to report an incident can suggest that the incident or conduct is welcome.

### **Complaint Process**

The OLI Complaint Process requires that reports of sexual harassment be investigated, including,

1. interviewing both parties, the party originally making the complaint and the party of whom the complaint is made;
2. interviewing other parties who may be witnesses to the complained of behavior or who otherwise may have knowledge of it; and
3. weighing the evidence and providing a written report, including a recommended course of action to OLI.

Once the investigation is complete, appropriate action based on the findings, including termination of the individual from office or position within OLI and/or revocation or suspension of the individual's Presenter and/or Trainer certification is taken.

If you have questions about this or any other OLI policy please contact the national office.