



Mandated Reporting of Suspected Child Abuse

Knowing Your Role in the Protection of Our Children



Ground Rules for Training



- 1 Take care of yourself (physically/emotionally)
- 2 Respect others opinions and discussions
- 3 Limit side distractions (phone/tech)
- 4 Be intentionally present (mindful)
- 5 “Stays and Leaves”
- 6 Permission slips for yourself

Objectives



1

Understand your role as mandated reporters in meeting the legal obligations in the area of child protection as per the Child Protective Services Law (CPSL)

2

Better recognize elements and indicators of child abuse and neglect

3

Increase knowledge of procedure for the reporting of child abuse to child protective services

4

Increase sense of obligation/responsibility to report suspected child abuse by understanding how that abuse impacts a child

ZH Z OU

BE PRESENT



What role do you
play in child abuse
prevention?

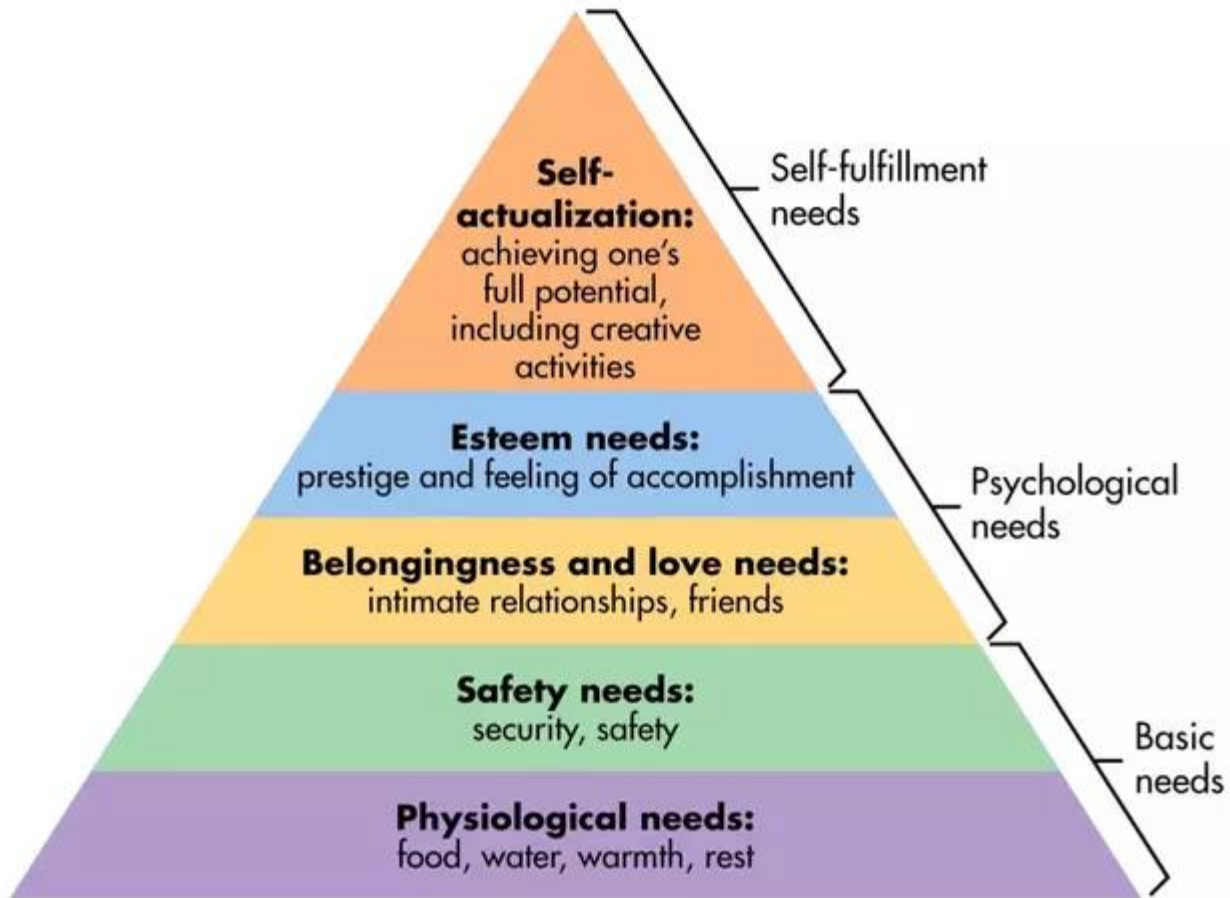


"Safety and security don't just happen, they are the result of collective consensus and public investment.

We owe our children, the most ***vulnerable*** citizens in our society, a life free of violence and fear."

Nelson Mandela

Maslow's Hierarchy of Needs



PEOPLE RAISED ON LOVE SEE THE WORLD DIFFERENTLY THAN PEOPLE RAISED ON SURVIVAL

Survivors' Voices



United States History of Child Protective Services

The Federal Children's Bureau was established to manage federal child welfare efforts, including services related to child maltreatment.

1912

ASPCA
formed in
1866

Dr. C. Henry Kempe published "**The Battered Child Syndrome**" in the Journal of the American Medical Association.

1962

In response to public concern from Dr. Kempe's research - all 50 states and the District of Columbia passed **mandatory child abuse reporting laws**.

1967

Pennsylvania History of Child Protective Services

All county child welfare agencies had the power to investigate reports of child abuse made by **physicians**

+ **Nurses**
+ **Teachers**

1970

ChildLine 1-800-932-0313

Child Protective Service Law (**CPSL**) was enacted

Pa ChildLine was established



1974

Civil and criminal background checks are required

1985

Pennsylvania History of Child Protective Services

Amendments:

- Recent = 2 year
- Reasonable cause to suspect

1994

Task Force on
Child Protection
was created *

2012

Act 115:
Amendment adds
human trafficking
to the definitions
of child abuse and
perpetrator

2016

Purpose of the Child Protective Services Law

- Encourage more complete reporting of suspected child abuse
- Involve law enforcement agencies in responding to child abuse
- Establish in each county protective services to investigate reports swiftly and competently
- **Protect abused children from further abuse**
- Provide rehabilitative services for children and parents to ensure the child's well-being
- Preserve, stabilize and protect the integrity of family life
- Assess risk of harm and prioritize response and services to children most at risk

Child Protective Services Agencies

Child Protective Services (CPS)

- Investigates allegations of **child abuse**.
- Conducts a **safety assessment** and creates a **safety plan**.

General Protective Services (GPS)

- Services and support provided for **non-abuse cases** requiring protective services.
- Helps caregivers to **reduce the risk** of behaviors becoming abuse.
- Creates a **safety plan** if needed.

Definitions under CPSL

A Child

An individual under the age of 18.

A Perpetrator

A person who has committed child abuse.

Could be an adult, teenager or child.

Definition of a Perpetrator

- (i) A parent of the child.
- (ii) A **spouse or former spouse*** of the child's parent.
- (iii) A paramour or **former paramour*** of the child's parent.
- (iv) **A person 14 years of age or older and responsible for the child's welfare.***
- (v) An individual who is 14 years of age or older who resides in the same home as the child.
- (vi) **An individual 18 years of age or older who does not reside in the same home as the child but is related within the third degree of consanguinity or affinity by birth or adoption to the child.***

Why do I need to know this? Suspected child abuse cases with a perpetrator are investigated by Child Protective Services. Suspected child abuse cases with someone other than a perpetrator are investigated by Law Enforcement.

Definitions under CPSL

An Offender

Anyone who has committed an abusive act upon a child and is not classified as a perpetrator.

Could be an adult, teenager or child.

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



10 Categories of Child Abuse



1. Bodily Injury
2. Likelihood of Bodily Injury
3. Serious Mental Injury
4. Sexual Abuse or Exploitation
5. Likelihood of Sexual Abuse or Exploitation
6. Serious Physical Neglect
7. Fabricating, Exaggerating, or Inducing a Medical Symptom or Disease
8. Specific Recent Acts of Child Abuse
9. Death of a Child
10. Human Trafficking

Bodily Injury

Intentionally, knowingly, or recklessly causing bodily injury to a child through any **recent** act or failure to act.



- Substantial pain
- Impairment of a child's physical condition

RECENT = 2 YEARS

Likelihood of Bodily Injury

Intentionally, knowingly, or recklessly creating a reasonable likelihood of bodily injury to a child through any recent act or failure to act.



The allegation **must pertain** to:

- Bodily Injury

RECENT = 2 YEARS

Indicators of Bodily Injury

- Unexplained bruises or welts on the body
- Unexplained burns on the body (i.e. cigarette burns, immersion burns)
- Unexplained bite marks in the body
- Repeated injuries over a period of time
- Multiple injuries in various stages of healing
- Neglected/untreated injuries
- Wearing extra layers of clothing or clothing that is inappropriate for the weather

Serious Mental Injury

Intentionally, knowingly, or recklessly causing or substantially contributing to serious mental injury of a child through any act or failure to act or series of such acts or failures to act.



Renders the child:

- Anxious
- Agitated
- Depressed
- Socially withdrawn
- In reasonable fear
- Inability to accomplish developmentally appropriate tasks

**DOES NOT NEED TO BE RECENT
TO BE REQUIRED TO REPORT**

Sexual Abuse or Exploitation

Intentionally, knowingly, or recklessly causing sexual abuse or exploitation of a child through any act or failure to act.

- Looking at the sexual or other intimate parts of a child or another individual for the purpose of arousing or gratifying sexual desire in any individual.
- Participating in sexually explicit conversation either in person, by telephone, by computer or by a computer-aided device for the purpose of sexual stimulation or gratification of the individual.
- Actual or simulated sexual activity or nudity for the purpose of sexual stimulation or gratification of the individual.
- Actual or simulated sexual activity for the purpose of producing visual depiction, including photographing, videotaping, computer depicting or filming.

DOES NOT NEED TO BE RECENT TO BE REQUIRED TO REPORT

Sexual Abuse or Exploitation

Any of the following offenses committed against a child are reportable:

- Rape/Attempted Rape
- Statutory sexual assault
- Involuntary deviate sexual intercourse
- Sexual assault
- Institutional sexual assault
- Aggravated indecent assault
- Indecent assault
- Indecent exposure
- Incest
- Prostitution
- Sexual abuse
- Unlawful contact with a minor
- Sexual exploitation
 - Exposing children to adult sexual activity
 - Exposing the child to adult movies
 - Photographs
 - Sexualized talk
 - Having the child pose, undress, or perform in sexual nature

DOES NOT NEED TO BE RECENT TO BE REQUIRED TO REPORT

Likelihood of Sexual Abuse or Exploitation

Intentionally, knowingly, or recklessly creating a likelihood of sexual abuse or exploitation of a child through any recent act or failure to act.



The allegation **must pertain** to:

- Sexual Abuse or Exploitation

RECENT = 2 YEARS

Indicators of Sexual Abuse/Exploitation

- Sexually acting out
- Excessive masturbation
- Initiating sophisticated sexual behaviors/dress
- Resistance to remove clothing at appropriate times
- Regression in young children (i.e. thumb sucking, bedwetting, baby talk)
- Unexplained sleep problems (sweats, terrors, nightmares)
- Bladder or urinary tract infection
- Pain when going to the bathroom
- Difficulty swallowing
- Sexually transmitted infection or pregnancy

Sexual Abuse or Exploitation

Statutory Sexual Assault:

Sexual intercourse with someone under the age of 16 when the other person is 4 or more years older



13 with a 17-year-old

14 with an 18-year-old

15 with a 19-year-old

**DOES NOT NEED TO BE
RECENT TO BE REQUIRED
TO REPORT**

Statistics



More than 1 in 4 children had been sexually victimized during their lifetime.

1 in 6 children reported experiencing sexual abuse in the past year.



Individuals who sexually abuse children are most likely someone the child knows and trusts.

**93% of the time
the child knows
their abuser.**

**Think
about it...**



Pay Attention to Individuals Who:

- Insist on hugging/tickling/wrestling with a child, even when a child says “stop”
- Spend time alone with children
- Regularly offer to babysit children for free
- Introduce special attention to a child like gifts, money, etc.
- Encourage unhealthy behaviors (alcohol, smoking, viewing pornography)
- Destroy the child’s trust in others (No one will believe you if you tell)
- Undermine the way others view the child (troubled child, child who lies)
- Isolate the family from the community

Serious Physical Neglect

Intentionally, knowingly, or recklessly endangering a child's life or health, threatening a child's well-being, causing bodily injury or impairing a child's health, development, or functioning.



- Lack of appropriate supervision (can be a **single egregious event**)
- Failure to provide essentials of life (food, shelter, medical and dental care)

**DOES NOT NEED TO BE RECENT
TO BE REQUIRED TO REPORT**

Indicators of Serious Physical Neglect

- Inadequate weight gain and physical growth over an extended period of time (failure to thrive)
- Delays in physical development
- Persistent hunger
- Lack of hygiene/personal care/severe body odor
- Consistently soiled clothing
- Consistent lack of supervision (or a single egregious event)
- Untreated physical problems or medical conditions
- Deprivation of food, water, heat, shelter

Fabricating, Exaggerating, or Inducing a Medical Symptom or Disease

Intentionally, knowingly, or recklessly fabricating, feigning or intentionally exaggerating or inducing a medical symptom or disease which results in a potentially harmful medical evaluation or treatment to the child through any recent act.

RECENT = 2 YEARS



Specific Recent Acts of Child Abuse

Child abuse also includes these specific acts:

- Kicking, biting, throwing, burning, stabbing or cutting a child
- Unreasonably physically restraining or confining a child
- Forcefully shaking, slapping, or otherwise striking a child **under age one**
- Interfering with the breathing of a child
- Causing a child to be present where methamphetamine is being manufactured & law enforcement is investigating
- Leaving a child unsupervised with an individual required to register as a sexual offender, determined to be a sexually violent predator (other than the child's parent) or determined to be a sexually violent delinquent child.

RECENT = 2 YEARS

Death of a Child

Intentionally, knowingly, or recklessly causing the death of a child through any act or failure to act.



DOES NOT NEED TO BE RECENT TO BE REQUIRED TO REPORT

Human Trafficking

Intentionally, knowingly, or recklessly engaging a child in a severe form of trafficking in persons or sex trafficking.



- Sex trafficking in which the person induced to perform a commercial sex act has not attained 18 years of age.
- Recruitment, harboring, transportation, provision, or obtaining of a person for the purpose of:
 - a commercial sex act
 - labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

Indicators of Human Trafficking

- Tattoos indicating ownership
- Signs of physical violence or psychological trauma
- Multiple sexually transmitted infections or pregnancies
- Access to material things the youth cannot afford (hair, nails, clothing, etc.)
- Charges such as curfew violations, truancy and other status offenses
- Chronic running away
- Presence of an older boyfriend or adult who is not their guardian
- Lying about or not aware of true age
- Unaware of personal data (age, name, date of birth)
- No identification
- No control over own finances
- Secrecy of whereabouts
- Keeping late nights/unusual hours
- Being in a controlling or dominating relationship
- Exhibiting hypervigilance or paranoid behaviors

General Behavioral Indicators of Abuse

Extreme and unexplainable changes in behavior.

- Withdrawn, detached
- Unusual, excessive fear and/or apprehension of a particular person
- Hypervigilance (high arousal/responsiveness to sensory stimuli)
- Changes in sleeping, frequent nightmares or difficulty falling asleep, and as a result may appear tired or fatigued
- Changes in school performance and attendance, difficulty concentrating in school or excessive absences



General Behavioral Indicators of Abuse

Risk taking behaviors:

- Running away
- Fear of going home
- Truancy
- Substance use
- Discipline issues
- Self-harming behaviors
- Suicide thoughts or attempts
- Disordered eating
- Carrying a weapon



10:00

Time & Timers



“The solution of adult problems tomorrow depends in large measure upon the way our children grow up today.”

Margaret Mead



Adverse Childhood Experiences

The Adverse Childhood Experiences (ACE) Study examined the health and social effects of traumatic childhood experiences over the lifespan of more than 17,000 participants

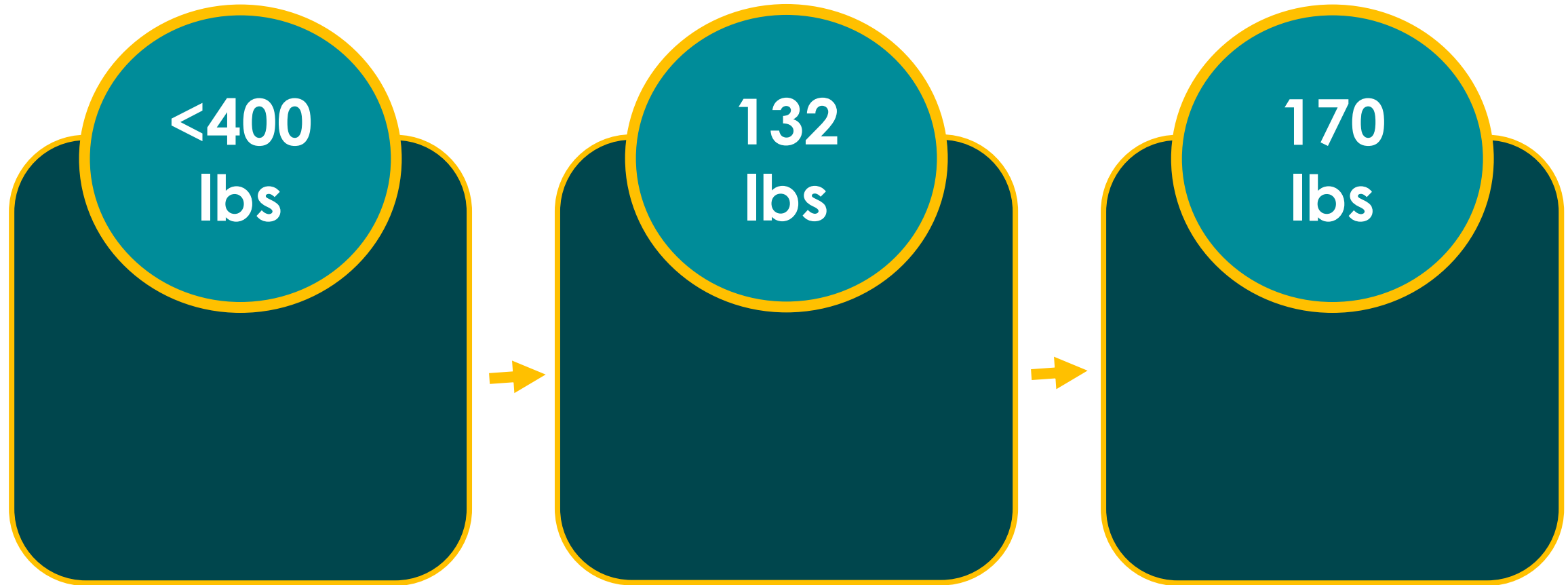
History of the ACE Study



Dr. Vincent Felitti, MD
Preventative Medicine Physician
Kaiser Permanente

- 1985- Kaiser Permanente in San Diego
- Dr. Vincent Felitti, MD
- Weight Loss Clinic
- 50% dropout rate over 5 years
- 286 "ex-participants" interviewed

History of ACE Study



The ACE Study- Results

ACEs are common

- Nearly 60% of participants experienced emotional, physical or contact sexual abuse as a child.
- Almost 25% of participants experienced emotional or physical neglect.



The ACE Study- Results



- Impacts of trauma are **cumulative** and often occur in **clusters**
- ACEs are related to **risky health behaviors** in childhood and adolescence
- Unaddressed trauma underlies a wide range of **health and social problems**
- Physical and verbal abuse were most strongly associated with **body weight** and **obesity**
- People with ACEs were 7 to 10 fold more likely to report illicit **drug use problems**, addiction to illicit drugs, and intravenous drug abuse
- Exposure to ACEs is associated with increased risk of **depressive disorders** up to decades after their occurrence

The ACE Study- Results



- Childhood trauma occurs in all communities
- Childhood trauma has long-term, damaging consequences
- One caring adult can make a difference

Mandated Reporting

**First-hand observation
of abuse is
NOT required to
report.**

Reporting abuse gives hope to victims.



Reasonable Cause to Suspect

It is the ***duty*** and ***obligation*** of mandated reporters to report ***suspected*** child abuse.



Reporting Child Abuse

Individuals who are
encouraged to
report abuse:

Permissive Reporters

Make a report by calling:

ChildLine

1-800-932-0313



Reporting Child Abuse

Individuals who are
required to report abuse:
Mandated Reporters

Make a report by calling:
ChildLine
1-800-932-0313

Or report electronically:
www.compass.state.pa.us/cwis



Mandated Reporters in Pennsylvania

1. A person licensed or certified to practice in any health-related field.
2. A medical examiner, coroner or funeral director.
3. An employee of a health care facility or provider who is engaged in the admission, examination, care or treatment of individuals.
4. A school employee.
5. An employee of a childcare service, who has direct contact with children in the course of employment.
6. A clergyman, priest, rabbi, minister, Christian Science practitioner, religious healer or spiritual leader of any regularly established church or other religious organization.
7. An independent contractor.
8. An emergency medical services provider.
9. An individual paid or unpaid, who, on the basis of the individual's role as an integral part of a regularly scheduled program, activity or service, accepts responsibility for a child.
10. An employee of a social services agency, who has direct contact with children in the course of employment.
11. A peace officer or law enforcement official.
12. An employee of a public library, who has direct contact with children in the course of employment.
13. An individual supervised or managed by a mandated reporter who has direct contact with children in the course of employment.
14. Attorneys affiliated with an agency, organization or institution that is responsible for the care, supervision, guidance or control of children.
15. A foster parent
16. An adult family member who is a person responsible for the child's welfare and provides services to a child in a family living home, community home for individuals with an intellectual disability or host home for children which are subject to supervision or licensure.

Mandated Reporting

A health care provider shall immediately report or cause a report to be made if the provider is involved in the delivery or care of a **child under one year of age** who is born and identifies as being affected by:

1. Illegal substance abuse by the child's mother
2. Withdrawal symptoms resulting from prenatal drug exposure
3. Fetal Alcohol Syndrome Disorder

Mandated Reporters

A mandated reporter is required to make an **immediate report** of **suspected** child abuse if they have **reasonable cause to suspect** that a child is a victim of child abuse under any of the circumstances:

- The mandated reporter comes into contact with the child in the course of employment, occupation and practice of a profession or through a regularly scheduled program, activity or service; or
- The mandated reporter is directly responsible for the care, supervision, guidance or training of the child, or is affiliated with an agency, institution, organization or other entity that is directly responsible for the care, supervision, guidance or training of the child; or
- A person makes a specific disclosure to the mandated reporter that an identifiable child is the victim of child abuse; or
- An individual 14 years of age or older makes as specific disclosure to the mandated reporter that the individual has committed child abuse.

Reporting Child Abuse/Neglect

Mandated Reporter ⇒ Child ⇒ Suspected Abuse

***Minimal Fact Interviewing**



ChildLine
1-800-932-0313
www.compass.state.pa.us/cwis

Who?
Where?
What?
When?

Child Protective Services
(perpetrators)

Law Enforcement
(offenders)

Reporting Child Abuse: Making the Report

Call ChildLine: 1-800-932-0313
OR report electronically:
www.compass.state.pa.us/cwis



Immediately thereafter notify the person in charge of the organization/designee
(unless they are the suspected abuser)



Complete the written CY47 report and submit to the local agency within 48 hours*
(unless reporting electronically via the Child Welfare Portal)



The mandated reporter/person in charge should also cooperate with an investigation

A written report shall include the following information if available:

1. The names and addresses of the child and parents/guardians
2. Where the alleged abuse occurred
3. The age/gender of the alleged victim
4. The nature and extent of the suspected abuse
5. The name and relationship of the abuser
6. Family composition
7. The source of the report
8. The person making the report and contact information
9. The actions taken by the reporting entity
10. Any other relevant information

* Any photographs, x-rays, or medical reports must be submitted also.

What About CONFIDENTIALITY?

ONLY confidential communications made to a **member of the clergy** and **an attorney** are protected.



What Happens After a Report is Made?

There are three possible results to a CPS investigation:

Founded– There has been a judicial adjudication based on the investigation that the child has been abused.

Indicated– A determination that substantial evidence of the alleged abuse exists based on available medical evidence, the CPS investigation or by an admission of the acts of abuse by the perpetrator/offender.

Unfounded– There is not enough evidence to rule the case as indicated or founded.

PROTECTIONS Under the Law



Good Faith Report =

- Immunity from liability
- Legal recourse for employment discrimination

Protection of the Identity of the Reporter

PENALTIES for Failure to Report

Resolve
any doubt
in favor
of reporting.



In some cases a mandated reporter who willfully fails to report suspected child abuse commits a **felony offense**.

Failing to make a mandated report could lead to fines, jail time and loss of your professional license.

Breaking the Barriers to Reporting Child Abuse

I really don't want to become involved. It isn't my place.

I don't know the signs of abuse, so I really am not sure if what is happening is abuse.

I am confused or uncertain about my reporting responsibilities.

I am very concerned about escalating the situation or maybe even making it worse for the child.

I am fearful of possible retaliation or the consequences for reporting suspected abuse that isn't confirmed.

The child asked me not to tell and I'm worried about breaking that trust with the child and breaking confidentiality.

Why don't children tell?



Reporting abuse gives victims a voice.

- Feelings of shame/ Low self- esteem
- Loss of trust
- Unaware that acts are inappropriate
- Fear of breaking up the family
- Isolation
- Threats
- Love
- Confusion
- Fear of not being believed
- Children are taught to trust and obey adults

When a child does disclose



Responding to Disclosure of Child Abuse

SSABER



Stay Calm

"I am here for you"



Support

"I am sorry this happened to you"



Affirm

"This must be hard for you to talk about; you did the right thing by telling me"



Believe

"It's not your fault; I believe you"



Empower

"You have the right to be safe"



Report

"We will need to tell others about this so that you can start to feel safe again"



"No man stands so tall
as when he stoops
to help a child."

Abraham Lincoln

Self Care for the Mandated Reporter

TAKE CARE OF YOU

- Seek support from staff or the local victim service agency
- Know your limitations
- Debrief
- Eat well
- Sleep well
- Stay grounded/present
- Remember you did the RIGHT thing



Practice



You notice changes in behavior in a 14-year-old that is normally happy and cheerful. They eventually share that they were sexually assaulted by another 14-year-old. They do not give the person's name.

What would your next steps be?

Practice



You are at your daughter's softball game when another parent confides in you that her daughter, who is also on the team, was raped at a party last weekend.

What would your next steps be?

Practice



A child you work with wears long-sleeved shirts every day, even in very hot weather.

When you ask them if they'd be more comfortable in short sleeves, they seem reluctant to talk about it.

What would your next steps be?



REFLECTIONS?

- ✓ Invite you to reflect on the content
- ✓ Share this space for comments/questions
- ✓ Reminder for self-care (in all that you do)
- ✓ Know your limitations
Vicarious Trauma