

Recognizing and Reporting Child Abuse

Training for Mandated Reporters

Preface

Pennsylvania Family Support Alliance (PFSA) has been strengthening families in Pennsylvania for more than 40 years and is a vital community partner in the prevention, intervention, and treatment of child abuse. Program services are designed to provide a positive environment for children through the provision of parenting skills education, support services for families, and training programs for professionals.

In recognition of our success and expertise in the field of child abuse prevention, Pennsylvania Family Support Alliance has been selected by the Pennsylvania Department of Human Services as the state's mandated reporter training provider for education, community service, early education, and religious professionals. This workbook was developed to complement that initiative.

The workbook provides descriptions, tips, and exercises designed to increase mandated reporters' understanding of the Pennsylvania Child Protective Services Law and its application and improve their ability to work effectively with county children and youth services. Those who review this information as part of the comprehensive training program offered by Pennsylvania Family Support Alliance will recognize the greatest benefit.

Pennsylvania Family Support Alliance is proud to have this opportunity to provide professionals with information on the recognition and reporting of child abuse. The system could not respond, nor could children and families receive help, without informed community involvement. No one of us can deal with child abuse alone – a cooperative effort is vital! Thank you for choosing to care for Pennsylvania's children, because...they need you.



Angela M. Liddle, MPA
President and CEO
Pennsylvania Family Support Alliance

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For further information on this publication, contact:

Pennsylvania Family Support Alliance
2000 Linglestown Road
Suite 301
Harrisburg, PA 17110
Phone: (800) 448-4906 or (717) 238-0937
www.pafsa.org

Introduction

Recognizing and Reporting Child Abuse

Goal of course

You will gain an understanding of your role as a mandated reporter in meeting your legal obligations in the area of child protection as per the Child Protective Services Law (CPSL). You will describe and apply current information on the CPSL, recognize elements and indicators of child abuse and neglect, and demonstrate reporting procedures.

This training has been specifically designed for individuals who are mandated by the Child Protective Services Law (CPSL) to report suspected child abuse. The course will provide an overview of the law and its components and an understanding of the role of a mandated reporter.

The course will also describe the steps that need to be taken when a professional suspects that a child has been abused, how the Child Protective Services system assists children and their families, and what the outcome of an investigation may be.

NOTES

**Mandated
reporters
refer nearly
three-
quarters of
all suspected
abuse
reports.**

Introduction

Course Objectives

- Describe and apply current information on the PA Child Protective Services Law
- Review the role and responsibilities of the Child Protective Services System
- Identify elements and indicators of child abuse
- Review child abuse reporting procedures
- Describe the actions taken by the county agency in response to reports of child abuse
- List the status determinations that are assigned to child abuse reports

NOTES

Components of Child Abuse

- Child
- Perpetrator
- Act or failure to act

In order to gain an understanding of how the CPSL addresses child abuse, it is important to know the three components that must be present in order for child abuse to be substantiated.

NOTES

Lesson One

The Child Protective Services System

Participants will:

- Determine their role in the child protective services system
- Outline the system established for child protection
- Explain how the desire to protect children must be balanced with the need for careful reporting
- Apply the purposes of the CPSL to the operation of county Children and Youth agencies

NOTES



Lesson One

The impact of child maltreatment can be long-term and devastating. Children who live through years of assault, degradation, and neglect bear scars that can last for years. In addition, the direct and indirect costs of child abuse are staggering. It is a costly problem for society, both financially and in the negative impact that it makes on people's lives.

Prolonged, severe, or unpredictable stress during a child's early years, including abuse and neglect, can result in negative impacts on the abused child's physical, cognitive, emotional, and social growth. The results can range from criminal activity and damaging adult relationships to problems in school and revictimization.

NOTES

What Can Be Done

- Learn about child abuse
- Be alert to warning signs
- Be prepared to report

In Pennsylvania, dozens of children die each year as a result of child abuse.

As a citizen of Pennsylvania, there are things you can do to help a child who is being abused. The first is to become more knowledgeable about child abuse. Knowledge will enable you to be more aware of the signs of child abuse. Knowing how and when to report will enable you to act appropriately if and when the opportunity presents itself. Each person can make the difference in the life of a child.

NOTES

Lesson One

Reporting of Child Abuse

- 3.5 million reports made annually in the United States
- Substantiated reports make up about 17 percent of the reports
- In Pennsylvania, substantiation rate is only 10-13% annually

The Commonwealth of Pennsylvania publishes an Annual Child Abuse Report. The report includes statistical information about child abuse and student abuse in Pennsylvania. It also provides an overview of Child Protective Services and resources within the state. Single copies of the report may be obtained from PFSA's website (www.pafsa.org). A copy of the report may also be downloaded by visiting www.dhs.state.pa.us.

Despite the statistics, it is estimated that at least half of all child abuse goes unreported. Those children continue to suffer or die, because their situations are not reported.

NOTES ACTIVITY:

Lesson One

Many Cases Go Unreported

- Confusion or uncertainty about reporting responsibilities
- Ignorance of the warning signs
- Fear of an inadequate response
- Do not want to become involved
- Fearful of repercussions
- Concerned that reporting may violate professional obligations

NOTES

Forty-five percent of abused children become alcoholics as adults.

Lesson One

The Child Welfare System

Develops Law & Provides Funding to States
Federal Government/Congress

Develops State Laws in Accordance with Federal Legislation & Provides Funding
State Legislature

Develops Regulations to Implement State Law,
Distribute Funds, Establish Registry
PA Department of Human Services

Child Abuse Hotline &
Registry, Provides Clearances
ChildLine

Monitors All County Agencies
DHS Regional Offices

Hires County C & Y Director & Provides Additional Funding
County Government/Commissioners

Provides Protective Services for Children
**County Children and Youth
Services Agencies**

Studies show that over 50 percent of abused children have socio-emotional problems.

At the top level, Congress and the federal government develop laws and provide funding to the states. In Pennsylvania, the state legislature has given the Department of Human Services (DHS) the responsibility for developing regulations, distributing funds, and operating ChildLine, the child abuse hotline, and the child abuse registry. DHS has also established regional offices. The Child Protective Services System is a county-based system, with offices established in each of the 67 counties that are then managed at the local level.

NOTES

Lesson One

Purposes of the CPSL

- Establish protective services in each county for the purpose of investigating reports swiftly and competently
- Provide protection for children from further abuse
- Provide rehabilitative services for children and parents involved to:
 - ✓ Ensure the child's well-being, and
 - ✓ Preserve, stabilize, and protect the integrity of family life wherever appropriate, OR
 - ✓ Provide an alternative permanent family when the unity of the family cannot be maintained
- Encourage more complete reporting of child abuse
- Involve law enforcement agencies in responding to child abuse
- Establish procedures to assess risk of harm to a child in order to:
 - ✓ Respond adequately to meet the needs of the family and child who may be at risk
 - ✓ Prioritize the response and services to children at most risk

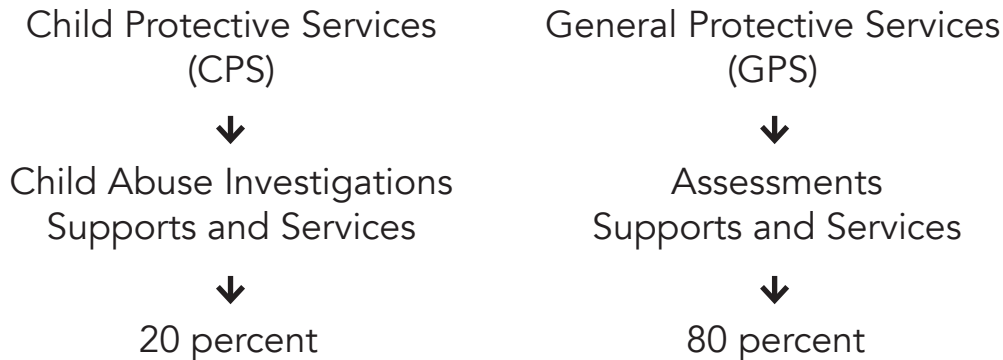
The CPSL has several significant purposes, not the least of which is to encourage more complete reporting of child abuse. It also ensures, through timelines and training requirements, that reports are investigated both swiftly and competently. Children and Youth has 30 days within which to conduct its investigation. In addition, regulation requires that Children and Youth workers must complete a minimum of 120 hours of core training and additional training each year after that.

Seventy-five percent of high school dropouts have a history of abuse in their family.

NOTES

Lesson One

Children and Youth Functions



Children and Youth agencies have two primary functions, Child Protective Services or CPS and General Protective Services or GPS. General Protective Services are those services and supports that are provided for non-abuse cases requiring protective services. General Protective Services will be provided to prevent the potential for harm to a child. The objectives of General Protective Services are:

- (1) Keep children in their own homes, whenever possible.
- (2) Prevent abuse, neglect and exploitation.
- (3) Overcome problems that result in dependency.
- (4) Provide temporary, substitute placement in a foster family home or residential child-care facility for a child in need of care.
- (5) Reunite children and their families whenever possible when children are in temporary, substitute placement.
- (6) Provide a permanent, legally assured family for a child in temporary, substitute care who cannot be returned to their own home.
- (7) Provide services and care ordered by the court for children who have been adjudicated dependent.

NOTES

Lesson One

The Pennsylvania Risk Assessment Model provides County Children and Youth agency staff with a structured means to express their analysis of conditions and circumstances that contribute to the risk of repeated child abuse and neglect. This assessment is used to assist in the investigation of reports and in the ongoing process of determining, addressing, and reducing the level of risk to a child. Risk Assessment examines the risk of future serious harm to the child.



The Pennsylvania Safety Assessment and Management Process is used to identify immediate threats of harm to the child. It also examines how the threat is occurring and what protective capacities in the parent or caregiver need to be enhanced. Actions are taken to put external controls in place to control the threat so that the child is safe. Some of the factors examined in safety and risk assessment are the same.

General Protective Services comprise approximately 70% of the caseloads of county Children and Youth Services agencies.

General Protective Services

- Protect the safety, rights, and welfare of children so that they have an opportunity for healthy growth and development
- Assist parents in both recognizing and correcting conditions that are harmful to their children and in fulfilling their parental duties more adequately in a manner that does not put their children at risk

The majority of services and supports that Children and Youth provides fall under General Protective Services. The goal is to provide children and their families with the supports and services to ensure that children are safe and have the opportunity for healthy growth and development.

NOTES

Lesson One

Essentials of Life

- Food
- Shelter
- Clothing
- Supervision
- Medical Care
- Education (as required by law)
- Protection from harm

Parents and other caretakers are responsible for providing children with the essentials of life. Failure to do so may result in assistance under General Protective Services. Failures to do so that result in a physical condition in the child may constitute child abuse.

Being victimized as a child significantly increases the likelihood that an individual will victimize others.

NOTES ACTIVITY:

Lesson One

Making a GPS Referral

- GPS Referrals can be made directly to ChildLine or to the county Children and Youth
- Present your information in a professional manner, without being emotional
- Frame your concerns in the facts
- Describe and emphasize the risk of harm or maltreatment to the child
- Present any efforts you have made to address and/or remediate the situation
- Obtain contact information of the person you spoke with
- Request clarification
- Document your referral
- If the referral was made to C&Y and is not accepted:
 - ✓ Request the reason(s)
 - ✓ Consult with your supervisor and/or administrator
 - ✓ If you still believe GPS are essential, resubmit the referral by calling it into ChildLine

Abused children are 25 times more likely to repeat a grade.

NOTES

Lesson One

ACTIVITY:

GPS vs. CPS – What Would You Do?

- Read each case scenario and decide as a group whether the situation would require a GPS referral or a CPS report
- Provide a rationale for your decision

Scenarios:

1. Lori has six children, ages 16, 14, 13, 11, and a set of twins, who are 4 years old. Lori and the children live in a home with broken windows, which is often without heat. The younger children are always begging for food, and the older children are hardly ever around. The older children all have truancy issues. It is rumored that the 13-year-old is drinking and smoking.

Is this a GPS or CPS referral?

What would you do?

2. Linda is a 20-year-old mother, who lives alone with her daughter, Tara, age two. You notice several serious bruises on Tara's buttocks, legs, and back and what appears to be a burn on her buttocks. In the past month, Tara has cried and fought when staff tried to take her to the toilet, and she crouches in a corner and hides when she wets or soils her pants. Prior to this, Tara was usually a loving and happy child, who interacted easily with both staff and other children.

Is this a GPS or CPS referral?

What would you do?

Lesson One

3. Lisa is the 26-year-old mother of Nancy, age 3. Another family reports to you that Nancy was left home alone overnight when Lisa went out to search for drugs and that Lisa appeared to be frequently "high."

Is this a GPS or CPS referral?

What would you do?

4. You accompany a mother and her two-year-old son to the local hospital at the mother's request. The mother claimed the child had fallen off his tricycle and bruised himself. The hospital took x-rays, and the doctor noted bruises in various stages of healing. The x-rays confirmed a spiral fracture and an old fracture on the boy's right leg. The mother became very angry and denied any abuse. You have never met the boy's father.

Is this a GPS or CPS referral?

What would you do?

Test your
knowledge.

Lesson Two

The Reporting Process

Participants Will:

- Understand the difference between permissive and mandated reporters
- Learn how to make a report of suspected child abuse
- Understand the protections provided to mandated reporters
- Identify penalties for willful failure to report suspected child abuse

Reporters of Child Abuse

- Permissive Reporters – those who can
- Mandated Reporters – those who must

**The CY-47
must be
submitted to
the county
Children and
Youth office
within 48
hours.**

Reporters fall into two categories. Anyone can report suspected child abuse as a permissive reporter. Mandated reporters are those adults who are required by law to report suspected child abuse. Mandated Reporters are defined as adults who meet one of the following sixteen categories:

1. A person licensed or certified to practice in any health-related field under the jurisdiction of the Department of State.
2. A medical examiner, coroner or funeral director.
3. An employee of a health care facility or provider licensed by the Department of Health, who is engaged in the admission, examination, care or treatment of individuals.
4. A school employee.
5. An employee of a child-care 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 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, is a person responsible for the child's welfare or has direct contact with children.
8. An employee of a social services agency who has direct contact with children in the course of employment.
9. A peace officer or law enforcement official.
10. An emergency medical services provider certified by the Department of Health.
11. An employee of a public library who has direct contact with children in the course of employment.

Lesson Two

12. An independent contractor.
13. An individual supervised or managed by a person who falls into any of the above categories, who has direct contact with children in the course of employment.
14. An attorney affiliated with an agency, institution, organization or other entity, including a school or regularly established religious organization 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 by the department under Articles IX and X of the act of June 13, 1967 (P.L.31, No.21), known as the Public Welfare Code.

Mandated reporters must report suspected child abuse if the person has reasonable causes to suspect that a child is a victim of child abuse under any of the following circumstances:

- You come 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.
- You are directly responsible for the care, supervision, guidance or training of the child through your work or where you volunteer or the child is under the care guidance supervision or training of where you work or volunteer.
- A person makes a specific disclosure to the mandated reporter that an identifiable child is the victim of child abuse.
- An individual 14 years of age or older makes a specific disclosure to you that the individual has committed child abuse.

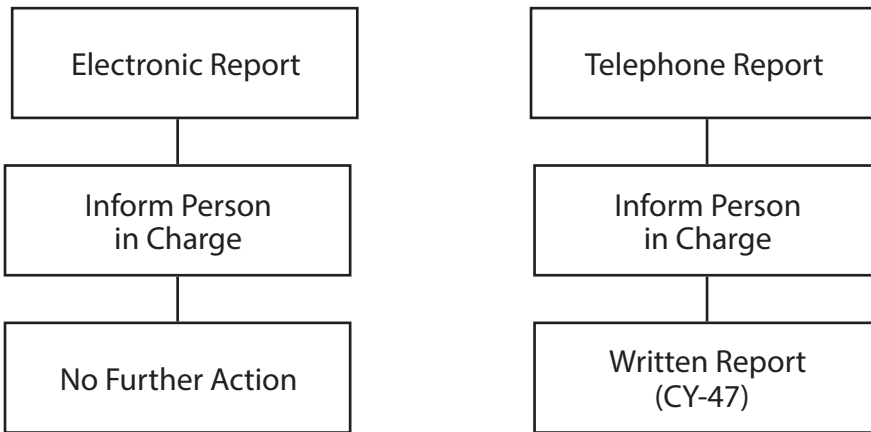
Once a mandated reporter has reasonable suspicion that abuse has occurred, they must make a report to ChildLine immediately.

Making a Report

- Reports of suspected child abuse are made immediately
- Reports may be made orally via phone or electronically
- Oral reports are made to ChildLine at (800) 932-0313, which is available 24/7
- Electronic reports are made via CWIS Self-Service portal www.compass.state.pa.us/cwis
- Inform the person in-charge that report was made
- Once a report to ChildLine is made, a courtesy call to C&Y is recommended

Lesson Two

Follow Up Action



Once a mandated reporter has reasonable suspicion that abuse has occurred, they must make a report to ChildLine immediately.

If the mandated reporter makes the report to ChildLine by telephone, they must submit a written report within 48 hours to the Department or county CYs agency assigned to the case by using the CY-47 form.

When you have reasonable cause to suspect that a child you know through work or volunteer activities for children is a victim of abuse you must report. Any child involved with your place of work or volunteer service is your responsibility when it comes to reporting suspected child abuse.

There are some situations outside of your work or volunteer role when you are required to report. If someone tells you about suspected abuse of a child regardless of whether or not you know the child you must report if there is any way to identify the child. If at any time someone tells you information that gives you reasonable cause to suspect that they have abused a child you must report.

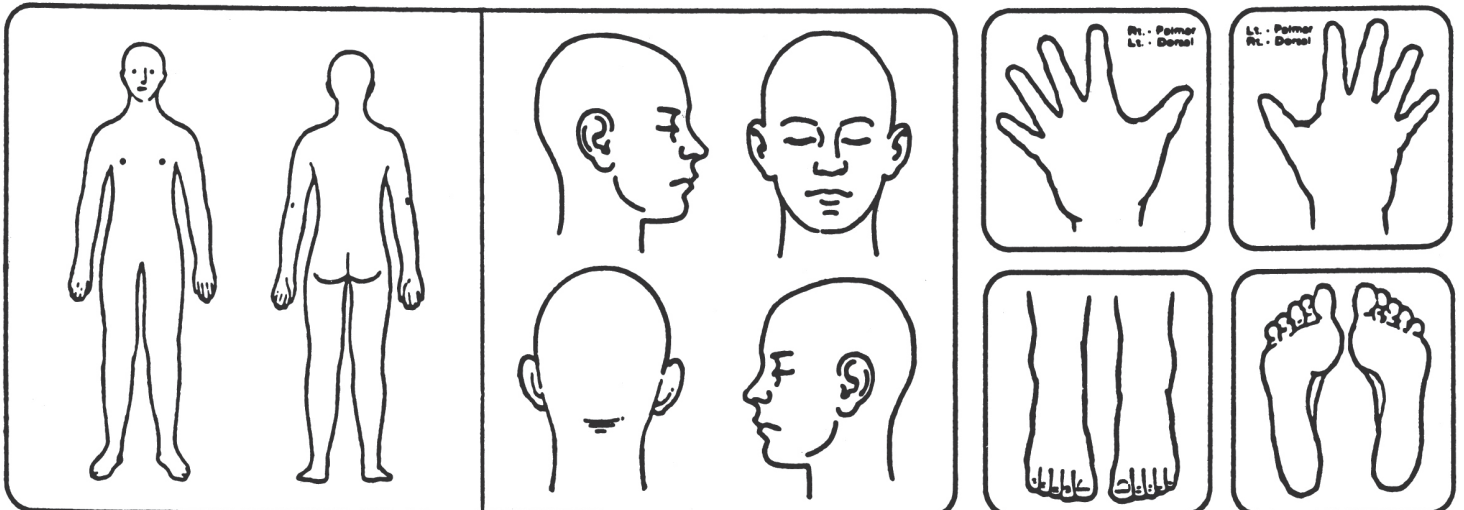
NOTES

REPORT OF SUSPECTED CHILD ABUSE

(CHILD PROTECTIVE SERVICE LAW - TITLE 23 PA CSA CHAPTER 63)

PLEASE REFER TO INSTRUCTIONS ON REVERSE SIDE. EXCEPT FOR SIGNATURE, PLEASE PRINT OR TYPE

1. NAME OF CHILD (Last, First, Initial)		SSN	BIRTHDATE	SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS (State, City, State & ZIP Code)			COUNTY	
1A. PRESENT LOCATION IF DIFFERENT THAN ABOVE			COUNTY	
2. BIOLOGICAL/ADOPTIVE MOTHER (Last, First, Initial)		SSN	BIRTHDATE	TELEPHONE NO.
ADDRESS (City, State & ZIP Code)			COUNTY	
3. BIOLOGICAL/ADOPTIVE FATHER (Last, First, Initial)		SSN	BIRTHDATE	TELEPHONE NO.
ADDRESS (City, State & ZIP Code)			COUNTY	
4. OTHER PERSON RESPONSIBLE FOR CHILD		SSN	BIRTHDATE	RELATIONSHIP TO CHILD SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS (City, State & ZIP Code)			COUNTY	TELEPHONE NO.
5. ALLEGED PERPETRATOR (Last, First, Initial)		SSN	BIRTHDATE	RELATIONSHIP TO CHILD SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS (City, State & ZIP Code)			COUNTY	TELEPHONE NO.
NAME OF ALLEGED PERPETRATOR'S EMPLOYER AND EMPLOYER'S ADDRESS				
6. FAMILY HOUSEHOLD COMPOSITION (Excluding Above Names)		RELATIONSHIP TO CHILD	NAME (Last, First, Initial)	RELATIONSHIP TO CHILD
NAME (Last, First, Initial)				
A.			D.	
B.			E.	
C.			F.	
ADDRESS WHERE THE SUSPECTED ABUSE OCCURRED			COUNTY	
DESCRIBE THE NATURE AND EXTENT OF THE SUSPECTED CHILD ABUSE, INCLUDING ANY EVIDENCE OF PRIOR ABUSE TO THE CHILD OR ANY SIBLING OF THE CHILD. ALSO INCLUDE ANY EVIDENCE OF PRIOR ABUSE BY THE ALLEGED PERPETRATOR(S) TO OTHER CHILDREN. PLEASE NOTE EXACT LOCATION OF THE INJURY(S) ON MODEL BELOW.			DATE OF INCIDENT	



7. ACTIONS TAKEN OR ABOUT TO BE TAKEN BY THE PERSON MAKING THE REPORT:

- NOTIFICATION OF CORONER OR MEDICAL EXAMINER
 X-RAYS
 PHOTOGRAPHS
 HOSPITALIZATION
 POLICE NOTIFIED
 MEDICAL TEST(S)
 TAKEN INTO PROTECTIVE CUSTODY
 OTHER (Specify)

8. SAFETY CONCERNS AND RISK FACTORS:

A. DESCRIBE THE CHILD(REN)'S PHYSICAL AND BEHAVIORAL HEALTH, GOOD MOOD AND TEMPERAMENT. DESCRIBE CHILD(REN)'S INTELLECTUAL FUNCTIONING, COMMUNICATION AND SOCIAL SKILLS, SCHOOL PERFORMANCE AND PEER RELATIONS. INCLUDE WHETHER THE CHILD(REN) HAS EXPRESSED ANY SUICIDAL/HOMICIDAL IDEATION OR PLANS. INFORMATION UNKNOWN

B. DESCRIBE HOW THE ADULT CAREGIVERS FUNCTION COGNITIVELY, EMOTIONALLY, BEHAVIORALLY, PHYSICALLY AND SOCIALLY. INCLUDE WHETHER THE ADULTS HAVE ANY MENTAL HEALTH, SUBSTANCE USE ISSUES AND/OR CRIMINAL HISTORY. DOCUMENT ANY PAST OR PRESENT DOMESTIC VIOLENCE. RECORD THE EMPLOYMENT STATUS/SOURCE OF INCOME AND WHETHER THERE ARE ANY FINANCIAL STRESSORS IN THE HOME. INCLUDE ANY SAFETY OR SANITARY CONCERNS REGARDING THE CONDITIONS OF THE HOME AND WHETHER THERE ARE WORKING UTILITIES. WHAT IS THE PRIMARY LANGUAGE OF THE HOUSEHOLD? INFORMATION UNKNOWN

C. DESCRIBE WHETHER THE CAREGIVERS HAVE THE APPROPRIATE KNOWLEDGE, EXPECTATIONS AND SKILLS TO PARENT THE CHILD(REN) ADEQUATELY. DOES THE CAREGIVER ADEQUATELY SUPERVISE THE CHILD(REN)? ARE THEY WILLING AND ABLE TO PROTECT THE CHILD(REN)? DESCRIBE THE ABILITY OF THE CAREGIVER TO EMPATHIZE, NURTURE AND ADVOCATE FOR THE CHILD(REN). INFORMATION UNKNOWN

D. DESCRIBE THE CAREGIVERS' APPROACH/METHODS OF DISCIPLINING THE CHILD(REN). DESCRIBE WHEN DISCIPLINE OCCURS AND WHETHER DISCIPLINARY METHODS ARE AGE-APPROPRIATE? ARE THERE ANY CULTURAL PRACTICES IN THE HOME THAT WOULD INFLUENCE THE DISCIPLINARY METHODS USED? INFORMATION UNKNOWN

E. PLEASE PROVIDE ANY ADDITIONAL INFORMATION RELEVANT TO THE INVESTIGATION PROCESS THAT HAS NOT ALREADY BEEN ENTERED IN THIS REFERRAL. THIS MAY INCLUDE ADDITIONAL ADDRESSES TO LOCATE THE CHILD OR PERPETRATOR, ADDITIONAL RESOURCES FOR THE CHILD, EMAIL ADDRESSES, INFORMATION ABOUT ANY WEAPONS IN THE HOME OR CONCERNS YOU MAY HAVE FOR THE CASEWORKER'S SAFETY. INFORMATION UNKNOWN

INSTRUCTIONS TO MANDATED PERSONS:

A mandated reporter making an oral report of suspected child abuse to the department via the Statewide toll-free telephone number (800-932-0313) must also make a written report, which may be submitted electronically, within 48 hours to the department or county agency assigned to the case by using this form. If needed, attach additional sheet(s) of paper to provide all of the requested information on this form.

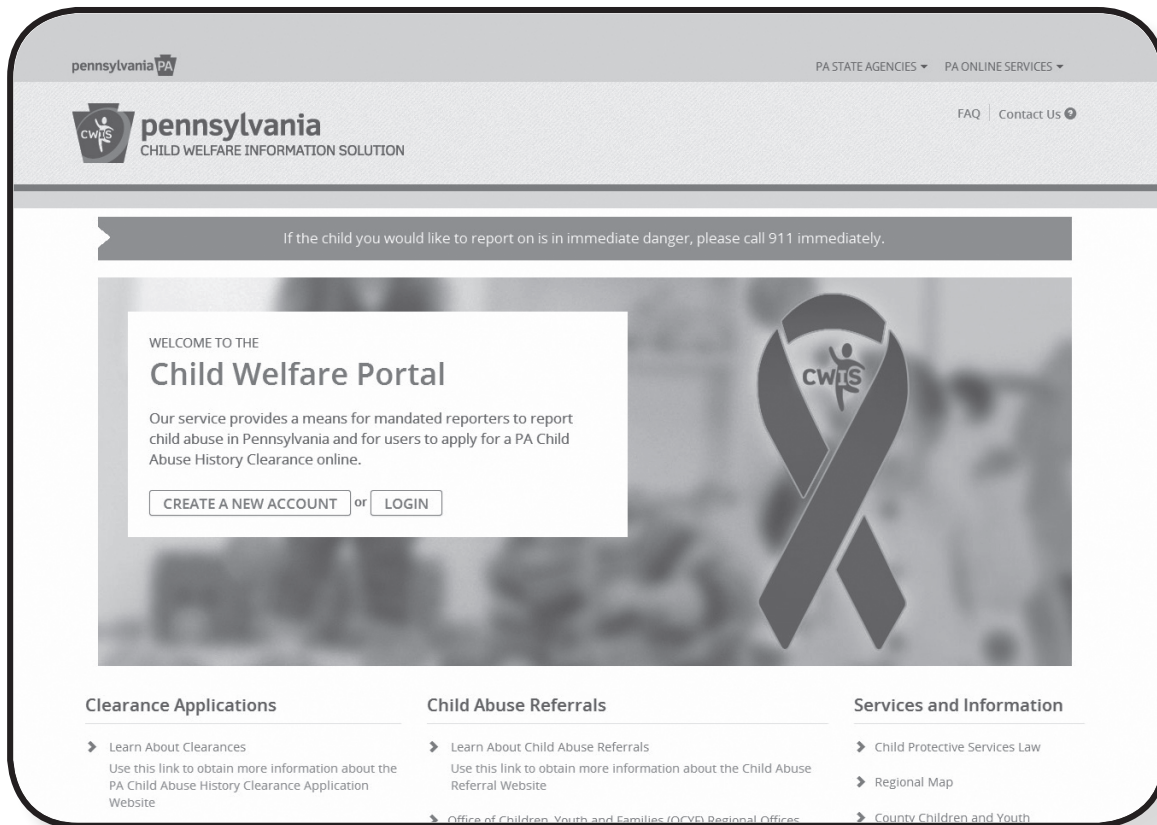
NOTE:

If the child has been taken into custody, you must immediately contact the county children and youth agency where the abuse occurred.

REPORTING SOURCE:

PRINTED NAME AND SIGNATURE:		DATE OF REPORT:	
ADDRESS:			
TITLE OR RELATIONSHIP TO CHILD:	FACILITY OR ORGANIZATION:	TELEPHONE NUMBER:	EMAIL ADDRESS:

Lesson Two



Mandated reporters need to set up a user account. After submitting the report, the mandated reporter will receive a report ID and confirmation that the report was submitted. Clearances can also be submitted using the Self-Service Portal. www.compass.state.pa.us/cwis

Plan of Supervision-Schools and Child Care Services

- Alleged abuse by school and child care services employees or contractors
- Plan approved by children and youth agency

When the alleged perpetrator works for a school or a child care service agency such as a day care center, foster care agency or treatment facility, a plan of supervision must be developed to ensure the safety of the children serviced by the school or agency. This includes situations where the employee has allegedly abused a child not associated with the school or agency.

Lesson Two

Plans of Safe Care

A health care provider shall immediately give notice or cause notice to be given to the Department if the provider is involved in the delivery or care of a child under one year of age and the health care provider has determined, based on standards of professional practice, the child was born affected by:

- Substance use or withdrawal symptoms resulting from prenatal drug exposure;
or
- A Fetal Alcohol Spectrum Disorder.

Notification to the Department can be made to ChildLine, electronically through the Child Welfare Portal or at 1-800-932-0313.

Purpose is for a multidisciplinary team of professional to develop a Plan of Safe Care addressing the needs of the infant and family.

This notification is for the purpose of assessing a child and the child's family for a Plan of Safe Care and shall not constitute a child abuse report.

NOTES

Lesson Two

Protections for Mandated Reporters

- Immunity from civil or criminal liability, if you
 - ✓ Make a report
 - ✓ Take photographs
 - ✓ Cooperate with investigation
 - ✓ Remove a child in accordance with the law
 - ✓ Testify in proceedings, if necessary
- Confidentiality

The CPSL has designed protections for reporters of suspected child abuse, including immunity from both civil and criminal liability. Cooperation with the investigation includes allowing Children and Youth investigators access to the abused child and the opportunity to interview them.

Only certain individuals are permitted by law to take protective custody of a child, if the child is believed to be in immediate danger. Those individuals include law enforcement officials, physicians, and medical directors. Children and Youth workers must petition for a court order in order to obtain custody of an abused child.

Permissive reporters may report anonymously; however, mandated reporters cannot.

Privileged Communications

Privileged communications between a mandated reporter and a patient or client of the mandated report does not:

- Apply to a situation involving child abuse
- Relieve the mandated reporter of the duty to make a report of suspected child abuse.

NOTES

Lesson Two

Confidential Communications

- Confidential Communications made to a member of the clergy are protected under 42 Pa. C.S. 5943 (relating to confidential communications to clergyman).
- Confidential Communications made to an attorney are protected so long as they are within the scope of 42 Pa. C.S. 5916 (relating to confidential communications to attorney) and 5928 (relating to confidential communications to attorney), the attorney work product doctrine or the rules of professional conduct for attorneys.

A willful failure to report means that the individual knew there was reasonable cause to suspect child abuse and chose not to report.

NOTES

Failing to Report

A person who is required to report abuse who willfully fails to do so commits:

2 nd degree misdemeanor	First violation
3 rd degree felony	Suspected continued abuse of child or contact with other children
3 rd degree felony	Abuse is a 1 st degree felony or higher and direct knowledge
3 rd degree felony	Subsequent Failures
2 nd degree felony	Continued abuse of child and the abuse is a 1 st degree felony
2 nd degree felony	Subsequent failures if abuse is a 1 st degree felony or higher

A willful failure to report means that the individual knew there was reasonable cause to suspect child abuse and chose not to report. Penalties range from two years in prison up to ten years in prison. Repeated failures to report or failures to report that cause repeated abuse or failures to report severe abuse will result in higher penalties.

Lesson Two

ACTIVITY:

Recognizing and Reporting Child Abuse

Directions:

Read each item and circle the correct answer.

1. Anyone can make a report of suspected child abuse.

True or False

2. A mandated reporter who is told that a neighbor is abusing their child must make a report to ChildLine immediately.

True or False

3. Mandated reporters are required to take photographs.

True or False

4. If the report is made to ChildLine via telephone and the mandated reporter has informed the person in charge there are no other actions for the mandated reporter to take.

True or False

5. A CY-47 only needs to be submitted if you are able to complete the entire form.

True or False

6. An eight-year-old girl in your class is sitting off to the side during play time. When you ask her why she is not playing with the other children, she replies, "It hurts." You ask her to explain, and she turns around. There are several small areas where blood has soaked through the back of her shirt, and it appears that several parts of her shirt are stuck to her skin. As she begins to lift the back of her shirt a few inches, you see many rectangular bruises and several areas where the skin has been broken and is seeping or bloody. As a mandated reporter, you must report to ChildLine immediately.

True or False

**Test your
knowledge.**

Lesson Two

7. If the report of suspected child abuse is made electronically, the mandated reporter informs the person in charge and then takes no further action.

True or False

8. A mandated reporter must be absolutely sure abuse has occurred before making a report to ChildLine.

True or False

9. Penalties for willful failure to report child abuse could include fines and/or imprisonment.

True or False

10. As a mandated reporter, you may keep a child at your place of employment if you believe the child will be in danger if they return home.

True or False

Test your
knowledge.

NOTES

Lesson Three

Defining Child Abuse

Participants will:

- Identify the elements of child abuse
- Identify the categories of perpetrators
- Name exclusions to child abuse
- Define the categories of child abuse
- Identify indicators of child abuse

Elements of Child Abuse

- Child
- Perpetrator
- Act or Failure to Act

As an investigation proceeds, there are three elements that must exist for child abuse to be substantiated. Those elements include:

- **Child:** An individual under the age of 18 when the alleged abuse occurred
- **Perpetrator:** An abuser that fits into one of the categories outlined by the CPSL
- **Act or Failure to Act:** The law considers both commissions and omissions that cause harm or the risk of serious harm to a child.

NOTES

Lesson Three

Perpetrators – Acts of Abuse

- Parent of a child
- Persons responsible for a child’s welfare
- Individuals residing in the same home as the child
- Paramour (and former) of a child’s parent
- Spouse (and former) of a child’s parent
- Relatives
- Individuals engaging a child in severe forms of trafficking in persons or sex trafficking

NOTES

Nationally,
12 out of
every 1,000
children are
victims of
abuse.

The categories of perpetrator as outlined by the CPSL include:

Parent of a child — A parent may be a biological parent, adoptive parent, stepparent, or legal guardian.

Persons responsible for a child’s welfare — This category includes individuals 14 years of age or older who provide permanent or temporary care, supervision, mental health diagnosis or treatment, training, or control of a child in lieu of parental care, supervision, and control. The term also includes individuals who have direct contact with children as an employee of child care services, a school, or through a program, activity or service sponsored by a school or public/private organization in which children participate. Included in this category are babysitters, daycare providers, residential care staff, foster parents and school employees, coaches, youth group leaders and scout leaders.

Individuals residing in the same home as the child — Household members in the child’s home must be at least 14 years of age to be considered a perpetrator.

Paramour of a child’s parent — This category refers to an individual who is engaged in an ongoing intimate relationship with a parent of the child, but is not married to the parent. It is not necessary for this significant other to live with the parent to qualify as a perpetrator. This category also includes former paramour.

Spouse of the parent — This includes former spouses.

Relatives — Persons 18 years of age or older related to child within the third degree by blood, marriage or adoption.

Individuals engaging a child in severe forms of trafficking in persons or sex trafficking — Persons 18 years of age or older who engage a child in severe forms of trafficking in persons or sex trafficking, as those terms are defined under section 103 of the Trafficking Victims Protection Act of 2000.

Lesson Three

Perpetrators – Failure to Act

- Parent
- Paramour (former) of a child’s parent
- Spouse (former) of a child’s parent
- Person responsible for the child’s welfare 18+
- Household Member 18+

The Law makes a distinction between those who are responsible to protect children and those who may be providing supervision.

Exclusions to Child Abuse

- Culpability
- Environmental factors
- Religious beliefs
- Ensuring safety

There are several exclusions to child abuse as per the CPSL. There are some situations where, as an investigation proceeds, an incident of suspected abuse would be determined to be an exclusion to child abuse. Once again, it is not the mandated reporter’s responsibility to determine what is and is not an exclusion. This information is provided to gain a better understanding of why a report of suspected child abuse might not be determined to be abuse.

Components of Child Abuse

- Child
- Perpetrator
- Act or failure to act

It is important to remember that for child abuse to be substantiated, all three components must be present. The CPSL breaks the last component into several categories.

NOTES

Lesson Three

Categories of Child Abuse

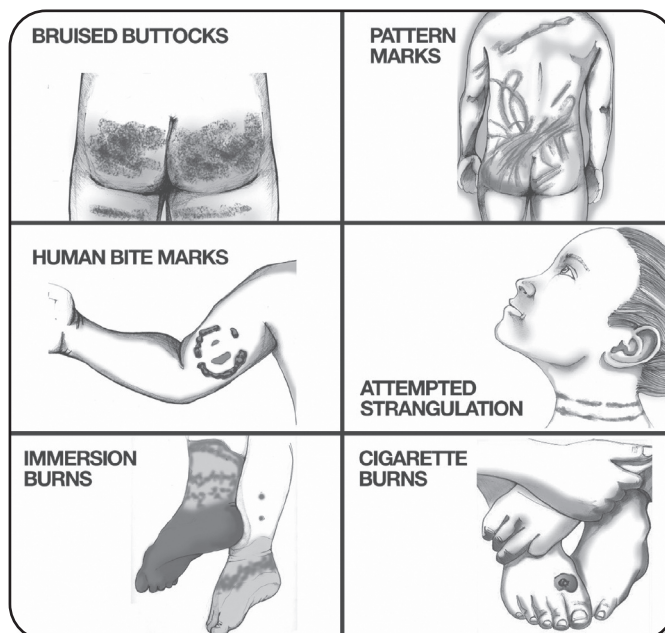
- Bodily injury
- Serious mental injury
- Sexual abuse or exploitation
- Serious physical neglect
- Likelihood of serious bodily injury or sexual abuse
- Medical child abuse
- Per se Definitions
- Causing the death of a child
- Engaging a child in a severe form of trafficking in persons or sex trafficking

Each of the categories is specifically defined by the CPSL. It is important to understand that although the abuse must meet the legal definition for abuse to be substantiated, mandated reporters do not need to determine this. The standard for mandated reporters is simply reasonable cause to suspect abuse.

Recent refers to something that has occurred within two years of the date ChildLine is called.

Bodily injury

- Recent
- Causes substantial pain, or
- Impairs functioning, temporarily or permanently



Per the CPSL, recent means that the act or failure to act, which results in bodily injury, must have occurred within the last two years.

Lesson Three

Behavioral Indicators of Abuse

- Withdrawn from others
- No expectation of comfort
- "Frozen watchfulness"
- Fear of physical contact
- Clings to adults
- Appears depressed or lacks emotion
- Timid and easily frightened
- Eager to please
- Role reversal

Behavioral indicators can provide clues about what may be going on in an abused child's life. They may not be the result of abuse, and should not be considered in isolation, but can be very helpful in looking at the overall situation.

NOTES

Serious Mental Injury

- A psychological condition that is diagnosed by a physician or licensed psychologist that:
 - Renders the child chronically and severely anxious, agitated, depressed, socially withdrawn, psychotic, or in reasonable fear that his/her safety is threatened; OR
 - Seriously interferes with the child's ability to accomplish age-appropriate developmental and social tasks

Serious mental injury is the least substantiated category of abuse. It requires that a diagnosis be made, which can then be linked to the act or failure to act of a perpetrator. It is important to stress that the category is Serious Mental Injury and not emotional or mental abuse, both of which may contribute to Serious Mental Injury, but which would not meet the definition for child abuse in this category on their own.

NOTES

Historically, the majority of abusers have a parental relationship with the victim.

Lesson Three

Indicators of Serious Mental Injury

- Depression or absence of affect
- Mental or emotional developmental delays
- Self-mutilation or other self-injurious behaviors
- Suicide attempts
- Compulsive disorders
- Antisocial behavior, including cruelty to other children or animals
- Delinquent behavior
- Alcohol or drug abuse
- Neurotic traits such as extreme fearfulness

Although there are other reasons a child may exhibit the above behaviors, it is important to recognize that these indicators are common among abused children.

Although there are other reasons a child may exhibit the above behaviors, it is important to recognize that these indicators are common among abused children.

NOTES

Lesson Three

Sexual Abuse or Exploitation

The employment, use, persuasion, inducement, enticement or coercion of a child to engage in or assist another individual to engage in sexually explicit conduct, which includes, but is not limited to, the following:

- 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 any individual.
- Actual or simulated sexual activity or nudity for the purpose of sexual stimulation or gratification of any individual.
- Actual or simulated sexual activity for the purpose of producing visual depiction, including photographing, videotaping, computer depicting or filming.
- Rape, Statutory Sexual Assault, Sexual Assault, Institutional Sexual Assault, Aggravated indecent assault, Indecent Assault, Incest, Prostitution, Sexual Abuse, Unlawful Contact with a Minor, Sexual Exploitation.

Sexual abuse and exploitation is the most frequent form of abuse perpetrated against children in Pennsylvania. Tragically, the abusers are most frequently individuals who are known to the child, including family members and close acquaintances. The standards for sexual abuse and exploitation under the CPSL mirror the standards for the criminal code. It is a category that would also be referred to law enforcement for criminal investigation.

Sexual abuse and exploitation is the most frequent form of abuse perpetrated against children in Pennsylvania.

NOTES

Lesson Three

Physical Indicators of Sexual Abuse

- Injury to the genitals
- Sexually transmitted diseases
- Suspicious stains
- Bladder or urinary tract infections
- Painful bowel movements
- Pregnancy

Some physical indicators of sexual abuse are obviously the result of abuse. However, for many mandated reporters, the very nature of these indicators may mean they are not visible to a mandated reporter. A professional whose job might include assisting a toddler in the restroom would be a circumstance where a mandated reporter might actually observe physical indicators.

In Pennsylvania, victims of sexual abuse are four times more likely to be girls than boys, with almost 80% of sexual abuse being perpetrated against girls.

NOTES

Behavioral Indicators of Sexual Abuse

- Verbal disclosure
- Precocious sexual knowledge
- Inappropriate sexual behavior
- Lack of interest or involvement in activities
- Layered or inappropriate clothing
- Hiding clothing
- Generalized emotional distress

Behavioral indicators are often the first clues that present themselves to mandated reporters with regard to sexual abuse.

NOTES

Lesson Three

Serious Physical Neglect

When a perpetrator endangers a child's life or health, threatens a child's well-being, causes bodily injury or impairs a child's health, development or functioning due to:

- A repeated, prolonged or egregious failure to supervise, OR
- Failure to provide adequate essentials of life, including food, shelter or medical care

Serious Physical Neglect generally stems from circumstances that have gone unaddressed for a period of time and/or that occur repeatedly. They are often situations that could initially have been referred as a GPS concern, but were allowed to worsen and then crossed the line to abuse.

NOTES

Physical Signs of Neglect

- Failure to thrive
- Delays in physical development
- Unattended physical problems or medical needs
- Chronic truancy
- Abandonment
- Inappropriate caregivers
- Positive toxicology

Lesson Three

Neglect is sometimes difficult to identify, since any number of the indicators could also be the result of other issues.

The nature of this category is usually the result of a long-term problem that has been ongoing for some time and has worsened. The severity of the situation has then crossed the line from being a concern to being abuse.

NOTES

Across the United States, more than three quarters of child fatalities due to abuse involve children younger than age 4.

Additional Categories

- Medical child abuse
- Likelihood of bodily injury
- Likelihood of sexual abuse or exploitation
- Causing the death of a child

Medical Child Abuse describes situations in which parent or caregivers makes up symptoms or harms the child in a way that produces symptoms in order to receive special attention. Sometimes children are subjected to painful and invasive medical tests in an attempt to diagnose the child's alleged condition

Likelihood of bodily injury and likelihood of sexual abuse address circumstances where the child was not actually harmed, but the child was placed in a situation (either by an act or failure to act) where there was a reasonable likelihood that the child could have been harmed physically or sexually. A parent who throws a hammer at the child's head, which winds up embedded in the wall and misses only because the child ducked behind the couch, would be an example of Likelihood of Bodily Injury.

Causing the death of a child is its own category of abuse. This can be caused by either an act or failure to act by the perpetrator.

Lesson Three

Per se definitions

- Physical violence that endangers the child
- Restraining or confining the child
- Shaking a child under one year old
- Striking a child under one year old
- Interfering with the breathing of a child
- Having child present at a meth lab
- Leaving the child in the care of a sexual offender

This group of abuse definitions are referred to as the per se definitions. Per se is a Latin term meaning in itself. The actions described in this group are themselves abuse. Physical violence includes kicking, biting, throwing, burning, stabbing or cutting a child in a manner that endangers the child. Leaving a child in the care of a sexual offender excludes the child's parent, but includes those required to register as a Tier II or Tier III sexual offender due to an offense against a child; sexually violent predators; and sexually violent delinquent children.

Engaging a child in a severe form of trafficking in persons or sex trafficking

- Includes both instances of sex trafficking and labor trafficking of children
- Terms in the definition of this category of abuse are defined in the Trafficking Victims Protection Act of 2000

"Severe form of trafficking in persons" is defined in the Trafficking Victims Protection Act of 2000 as:

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

NOTES

Lesson Three

Sex Trafficking

- Any child under the age of 18 who is induced to engage in commercial sex is a victim of sex trafficking.
- Examples of sex trafficking of children includes prostitution, stripping, pornography, and sex tourism.

Indicators of Sex Trafficking – Child (Note: these indicators are not exclusionary of all other indicators):

- Sexual knowledge which is beyond what is normal for the child's age
- Sexually transmitted diseases
- Unexplained bruises and scars
- Withdrawn behaviors
- History of running away or current status as a runaway
- Inexplicable appearance of expensive gifts, clothing, cell phones, tattoos, or other costly items
- Presence of an older boyfriend or girlfriend who is controlling
- Drug addiction
- Gang involvement

Know the
indicators
of sex
trafficking

Labor Trafficking

- The use of force, fraud, or coercion for the purpose of subjection in involuntary servitude, peonage, debt bondage, or slavery.
- Examples of where labor trafficking can occur:
 - Agricultural or domestic service workers
 - Selling of items (e.g., magazines or illegal drugs)
 - Businesses such as hair and nail salons & restaurants
 - Beggars
 - Au pairs & Nannies

Indicators of Labor Trafficking – Child (Note: these indicators are not exclusionary of all other indicators):

- Living with employer
- No freedom to leave or come and go as desired/high security measures
- Unpaid or paid very little
- Excessive and/or unusual work hours, often without breaks
- Answers appear to be scripted and rehearsed
- Employer is holding identity documents
- Signs of physical abuse
- Lack of knowledge of whereabouts and/or lost sense of time

Lesson Three

ACTIVITY:

Is This Suspected Abuse?

1. You will work in small groups to complete this activity.
2. Read each scenario and decide as a group if the scenario is child abuse and what action should be taken.

Scenarios - Is This Suspected Abuse?

1. There is a strained relationship between a father and his 15-year-old daughter. The father has set 11:00 p.m. as the curfew for his daughter. The daughter returns home at 1:00 a.m., which is the third time in the past two weeks that she has missed the curfew. After each incident, the emotions between the father and daughter have been escalating. This time, the father has been drinking, and he is enraged by his daughter's late return. After a period of heated verbal exchange, the father chases his daughter, but cannot catch her. In desperation, he picks up a chair and hurls it at her, narrowly missing her head. The legs of the chair were implanted in the drywall.

Is this suspected child abuse?

If so, what type and why?

If not, why?

What would you do?

Test your
knowledge.

Lesson Three

2. Your brother who is in treatment for Methamphetamine addiction tells you that he used to buy his meth from the father of a girl in your program. Your brother reveals that the meth is made in the house.

Is this suspected child abuse?

If so, what type and why?

If not, why?

What would you do?

3. A parent tries to obtain drugs by offering her daughter for sex. However, there are no offers.

Test your
knowledge

Is this suspected child abuse?

If so, what type and why?

If not, why?

What would you do?

Lesson Three

4. A 10-year-old boy in your program says he cannot play outside because his feet hurt. He is limping, but he does not want you to look at his feet. At your insistence, the boy removes his shoes and socks and reveals three distinct round burns on the soles of his feet. One of the burns appears to be infected. When you ask him how the burns happened, the boy's only comment is that, "My dad said I was bad."

Is this suspected child abuse?

If so, what type and why?

If not, why?

What would you do?

5. A 12-year-old boy comes to your office asking for aspirin. He is wearing an oversized sweater on an unusually warm day. He reluctantly explains that his teammate's father "was angry with him for losing the game, grabbed him by the arm, and threw him into a fence." He pleads with you not to let his parents know. When the boy's sweater is removed, you find several cuts and scrapes, and it appears that his shoulder may have been dislocated.

Is this suspected child abuse?

If so, what type and why?

If not, why?

What would you do?

Lesson Three

6. A child in your program comes to you complaining about a toothache. You call the mother, who agrees to take the child to a dentist. Several weeks later, the child again comes to your office, and this time, the tooth is obviously abscessed. You again call the mother who says she could not get a dental appointment. You make an appointment for the next day with a dentist who works with your program and let the mother know when she can take her child for free treatment. Three days later, the child still has not received treatment and is now presenting with a fever and severe swelling.

Is this suspected child abuse?

If so, what type and why?

If not, why?

Test your
knowledge.

What would you do?

7. A 12-year-old girl discloses to you that she was raped by her 14-year-old brother while he was babysitting her and their younger brother.

Is this suspected child abuse?

If so, what type and why?

If not, why?

What would you do?

Lesson Three

8. You are the art teacher, and one of your seventh grade students is a gifted artist you have befriended. Over the last several months, you have noticed his work becoming very dark in nature, which is matched by his increasingly sullen and withdrawn behavior. One day, while reaching for his art supplies, his sleeves pull up to reveal cut marks on his arms. When confronted, he admits he cut himself intentionally. He explains that he is "evil" and that bad things happen to anyone with whom he associates, which is what his mother told him. A call to his mother confirms that she feels the boy is "evil." Your concerns that he may be suicidal are met with the statement: "Well, maybe that would be for the best."

Is this suspected child abuse?

If so, what type and why?

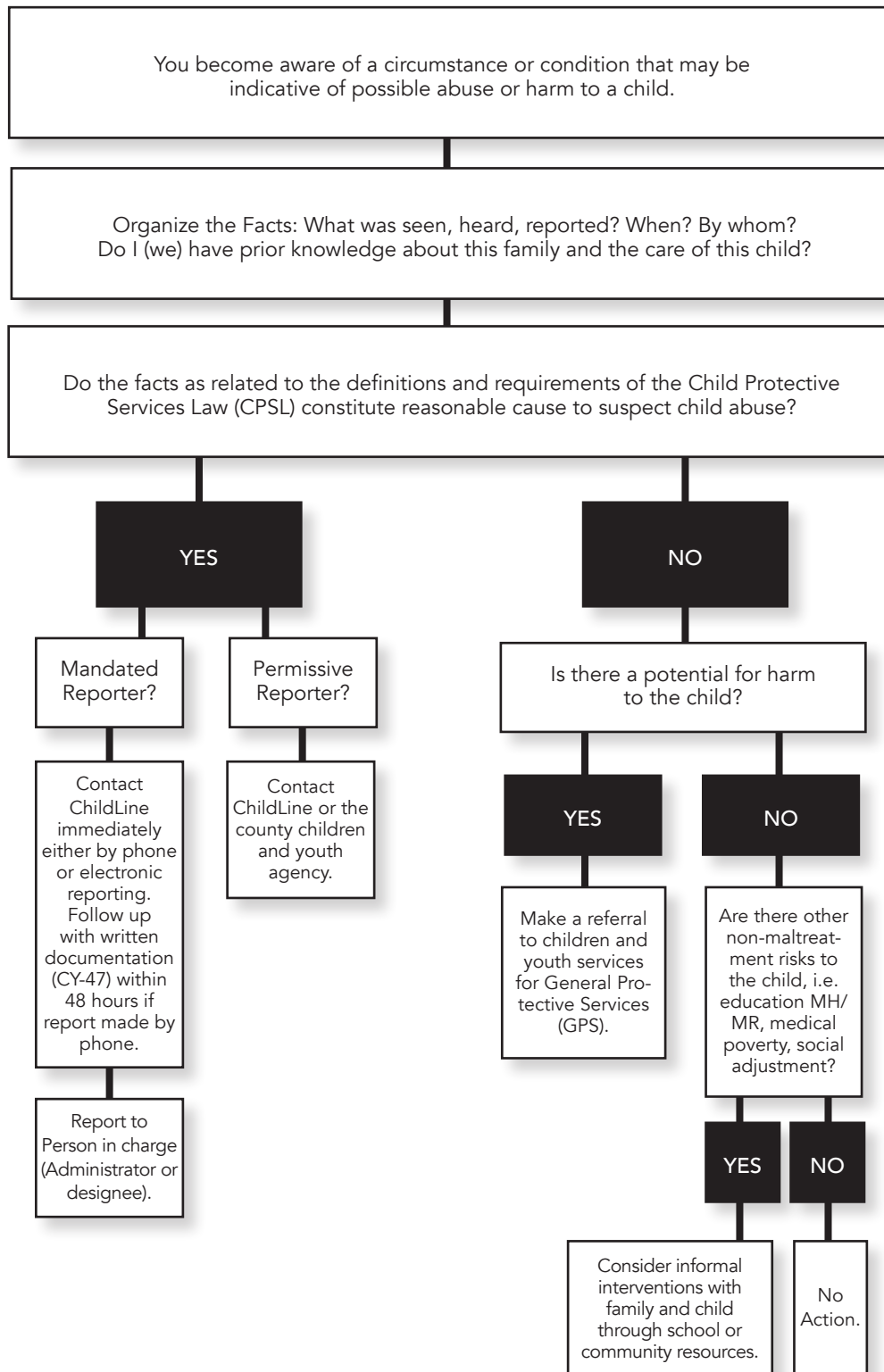
If not, why?

What would you do?

Lesson Three

PHYSICAL INDICATORS	CHILD'S BEHAVIORAL INDICATORS	PERPETRATOR'S BEHAVIORAL INDICATORS
BODILY INJURY		
<p>Unexplained:</p> <ul style="list-style-type: none"> • Burns (<i>forming a distinct pattern, sock or glove-like, cigarette burns especially on soles, palms, back, buttocks</i>) • Bruises, Welts and Bite Marks (<i>"grab marks", patterns reflecting an article, regularly appearing after an absence, in various stages of healing</i>) • Lacerations or Abrasions (<i>on back or arms, legs or torso – to external genitalia</i>) • Fractures • Head Injuries 	<ul style="list-style-type: none"> • Complains of soreness/pain • Reports injury by caretaker • "Accident prone" • Destructive to self and/or others • Behavioral extremes • Clothing covers body inappropriately (<i>hiding injury</i>) • Seeks affection from any adult • Intolerant of physical contact • Wary of adult contact (<i>seems frightened of caretaker</i>) • Afraid to go home (<i>runaway</i>) • Low self-esteem • Withdrawn • Depressed (<i>suicidal</i>) 	<ul style="list-style-type: none"> • Attempts to conceal child's injury or protect identity of person responsible • History of abuse as a child • Explanation of child's injury not consistent with type of injury • Offers no explanation for child's injury • Seems unconcerned about child • Sees child as evil or "bad" • Alcohol or drug abuse
SERIOUS PHYSICAL NEGLECT		
<ul style="list-style-type: none"> • Persistent hunger • Unattended medical needs • Developmentally delayed • Abandonment • Inappropriate dress (<i>clothing is wrong for weather conditions or dirty</i>) • Poor hygiene • Always tired 	<ul style="list-style-type: none"> • Begging for or stealing food • Reports no caretaker at home • Constant fatigue • Lying or stealing • Difficulty relating to others - (<i>emotionally and/or socially withdrawn</i>) • Chronic truancy • Alcohol or drug misuse 	<ul style="list-style-type: none"> • History of neglect as a child • Addictive disorders • Dysfunctional home life • Long-term chronic illness • Lethargic • Isolated from friends, relatives or neighbors
SERIOUS MENTAL INJURY		
<ul style="list-style-type: none"> • Mental or emotional developmental delays • Speech disorders • Depression • Signs of self mutilation • Signs of attempted suicide 	<ul style="list-style-type: none"> • Compulsive disorders • Conduct disorders (<i>antisocial, destructive, cruelty to animals</i>) • Neurotic traits • Delinquent behavior • Mental/emotional developmental deficiencies • Inappropriately adult or infantile 	<ul style="list-style-type: none"> • Blames or belittles child • Cold and rejecting • Withholds love • Children in family are treated unequally • Ignores child's problems
SEXUAL ABUSE OR EXPLOITATION		
<ul style="list-style-type: none"> • Injury to genitals • Difficulty walking or sitting • Sexually transmitted disease • Frequent urinary or yeast infections • Suspicious stains or blood on child's underwear • Painful bowel movements or retention • Early, unexplained pregnancy • Frequent unexplained sore throats 	<ul style="list-style-type: none"> • Verbal disclosure • Wearing excessive layers of clothing • Hiding stained or bloodied clothing • Precocious sexual knowledge/behavior • Seductive behavior toward adults • Excessive masturbation • Intolerance of physical contact • Role reversal • Specific fear of males or females 	<ul style="list-style-type: none"> • History of being sexually abused • Blurring of generational boundaries • Role reversal of mother and daughter • Jealous or overprotective of child • Alcohol or drug misuse • Frequent absences from home by caretaker • Justifies child's frequent absences from school

Lesson Three



Lesson Four

The System's Response to Child Abuse

Participants Will:

- Understand the process for investigating child abuse
- Identify types of abuse referred to law enforcement
- Define the status determinations
- Identify information mandated reporters are entitled to know

Once a report is made to ChildLine, it sets the investigation process in motion and the clock starts ticking.

Historically, almost 75% of child abuse is committed by a parent or another person who is related to the victim.

Responding to Reports of Child Abuse

- Available 24/7 to receive reports of abuse
- Investigation Begins
- Risk and Safety Assessment
- Visit to Child's Home
- Emergency Protective Custody
- Interviews
- Photos
- Evidence Collection
- Services
- Referral to Law Enforcement

Both ChildLine and Children and Youth personnel are available 24 hours, seven days a week. After business hours, the process for reaching Children and Youth staff may be different, but there is always someone who is on call. Should you be unable to reach a live person and you feel the situation is serious and requires immediate action, be sure to call ChildLine back and inform them that you were unable to reach someone at the county Children and Youth office. ChildLine has contact information for reaching each office after hours and will be able to contact someone for you.

Even when the child is not at high risk for additional abuse, Children and Youth are required to visit the child within 24 hours of the call to ChildLine. They will begin the Safety Risk Assessments at that time, including interviews and the collection of other evidence. If emergency protective custody is needed, Children and Youth must petition the court for an order to do so. Only law enforcement and physicians or the medical director of a facility may take immediate protective custody of children who are suspected of being abused.

Lesson Four

Referrals to Law Enforcement

- Homicide
- Sexual Abuse and Exploitation
- Bodily Injury
- Serious Bodily Injury
- Non-CPSL perpetrator
- Crime against a child
- Severe forms of trafficking in persons or sex trafficking

In certain circumstances, such as those listed, Children and Youth are required to automatically refer the allegation to law enforcement for criminal investigation as well. In these circumstances, Children and Youth and law enforcement officials will coordinate their investigations to the extent possible.

NOTES

Lesson Four

Status Determinations

- Unfounded
- Indicated
- Founded
- Pending Juvenile Court Action
- Pending Criminal Court Action

Children and Youth have 30 days during which to complete the investigation. Under certain conditions, the time frame may be extended to 60 days. If the investigation is incomplete after 60 days and is not pending court action, then the abuse allegation would be considered unfounded.

Unfounded: There is no evidence or insufficient evidence to support a report of suspected child abuse.

Indicated: A report of suspected child abuse could be substantiated through the evidence discovered during the investigation, admission by the perpetrator, or medical evidence. The name of the perpetrator would remain in the Child Abuse Registry indefinitely. Indicated reports are approved by the Children and Youth Administrator and reviewed by the solicitor.

Founded: A founded report is one in which there has been a court determination that the child was abused. Perpetrators of founded reports are also kept in the Child Abuse Registry indefinitely.

Almost 1,500 children die each year in the United States from abuse or neglect.

NOTES

Lesson Four

Follow-Up Results

- Child Abuse Certifications
- Mandated Reporter's Right to Know

Organizations that work with children are required to obtain both criminal background checks and Child Abuse Certifications for prospective employees. Child Abuse Certifications are obtained from ChildLine's child abuse registry.

Mandated reporters of child abuse are entitled to information regarding the outcome of the report they made. That information is limited to the final status determination of the investigation and what services and/or supports were provided or arranged for by the county agency to protect the abused child. ChildLine will send the information to the mandated reporter who made the report within three days of receiving the status determination from the county children and youth agency.

NOTES

Teaming With Children and Youth

- Be open-minded and positive
- Avoid judgments and gossip
- Focus on building positive relationships
- Be proactive and communicate with others
- Acknowledge positive experiences
- Become part of the multidisciplinary team
- Find solutions to chronic problems together
- Cooperation with C&Y is part of legal obligation

NOTES

Being abused or neglected as a child almost doubles the odds that the child will commit a crime as a juvenile.

Lesson Five

CEs for Health Related Licenses Act 31 and Act 48 Continuing Professional Education Requirements

Participants who need CEs for Act 31 health-related state license or for Act 48 Continuing Professional Education Requirements must go to training.pafsa.org and complete the corresponding web form. After confirming your attendance, PFSA will upload your information to either the Department of State or the Department of Education. You will not receive credit towards your health-related license licensure or renewal or maintaining your teaching certificate without completing the web form. If you need credits for both Act 31 and Act 48, you must complete both web forms.

Conclusion:

NOTES

Childline: 1-800-932-0313

County Children and Youth in My County: _____

Pennsylvania Family Support Alliance: 1-800-448-4906 or 717-238-0937

Web site: www.pafsa.org

Address: 2000 Linglestown Road, Suite 301, Harrisburg, PA 17110

Pennsylvania Department of Human Services

Mandated reporter and clearance
information keepkidssafe.pa.gov

Child Welfare Information Gateway 1-800-394-3366

childwelfare.gov

National Center for Missing and Exploited Children:

1-800-843-5678 2101 Wilson Blvd, Suite 550, Arlington, VA 22201
missingkids.com

Answers for Activities

ACTIVITY:

Lesson 1

GPS vs. CPS – What Would You Do?

1. GPS – There are concerns that speak to a potential for harm and issues of truancy. Refer to county Children and Youth services.
2. CPS – There are indicators of serious abuse. Report to ChildLine immediately.
3. GPS – No actual harm has come to the child in the mother's absence. Issues of abandonment may be referred to GPS.
4. CPS – Injuries are indicative of abuse and not consistent with the mother's explanation. Report to ChildLine immediately. As a mandated reporter, the physician should also make a report.

ACTIVITY:

Lesson 2

Recognizing and Reporting Child Abuse

1. True – Anyone may report suspected child abuse.
2. True – Someone has disclosed abuse about a child who is identifiable. The mandated reporter must report this suspected abuse immediately.
3. False – The law protects mandated reporters from civil and criminal liability if they photograph a child's injury but the law does not require a photograph to be taken by the mandated reporter.
4. False – A report made to ChildLine via the telephone requires that a written report be made using a CY-47.
5. False – The CY-47 should be completed as much as possible and then submitted within 48 hours.
6. True – This is a case of suspected bodily injury and must be reported immediately.
7. True – If the child abuse report is made via telephone to ChildLine then it must be followed up with a written report. If the report is made using the self-service portal then no other action is required from the mandated reporter.
8. False – A mandated reporter need only have reasonable suspicion that abuse has occurred.

9. True – The first offense for willful failure to report is punishable by up to \$5,000 in fines and/or up to two years in jail. Penalties are increased for second and subsequent offenses, if the abuse to the child continues and if the abuse to the child constitutes a felony offense.
10. False – Only law enforcement, physicians, and medical directors are permitted to take immediate protective custody of a child. If you feel this is necessary, you should contact law enforcement.

ACTIVITY:

Lesson 3

Is This Suspected Abuse?

1. Yes – This is a case of likelihood of bodily injury. The child would have been injured had the chair struck her. Report to ChildLine immediately.
2. Yes – Per se definitions – having a child present at a meth lab. The fact that the child was present where meth was being made in of itself would be considered child abuse. This situation must be reported to ChildLine as a suspected child abuse report.
3. Yes – This is a case of likelihood of sexual abuse or exploitation. Even though there were no offers, the mother placed her child in a situation that put her at risk for serious danger. Report to ChildLine immediately.
4. Yes – This is a case of Bodily Injury. Report to ChildLine immediately.
5. No – The suspected abuser does not fit into one of the categories of perpetrator as listed in the CPSL. However, a report to ChildLine must still be made immediately.
6. Yes – This is a case of Serious Physical Neglect. The condition was allowed to worsen to the point where there is a serious physical condition causing serious pain. Report to ChildLine immediately.
7. Yes – This is a case of Sexual Abuse/Exploitation, because the brother was acting in the role of a caretaker. In addition, he is a household member over the age of 14. Report to ChildLine immediately.
8. Yes – This is a case of Serious Mental Injury. There is at least a reasonable cause to suspect that the mother's actions have lead to the student harming himself and possibly becoming depressed.

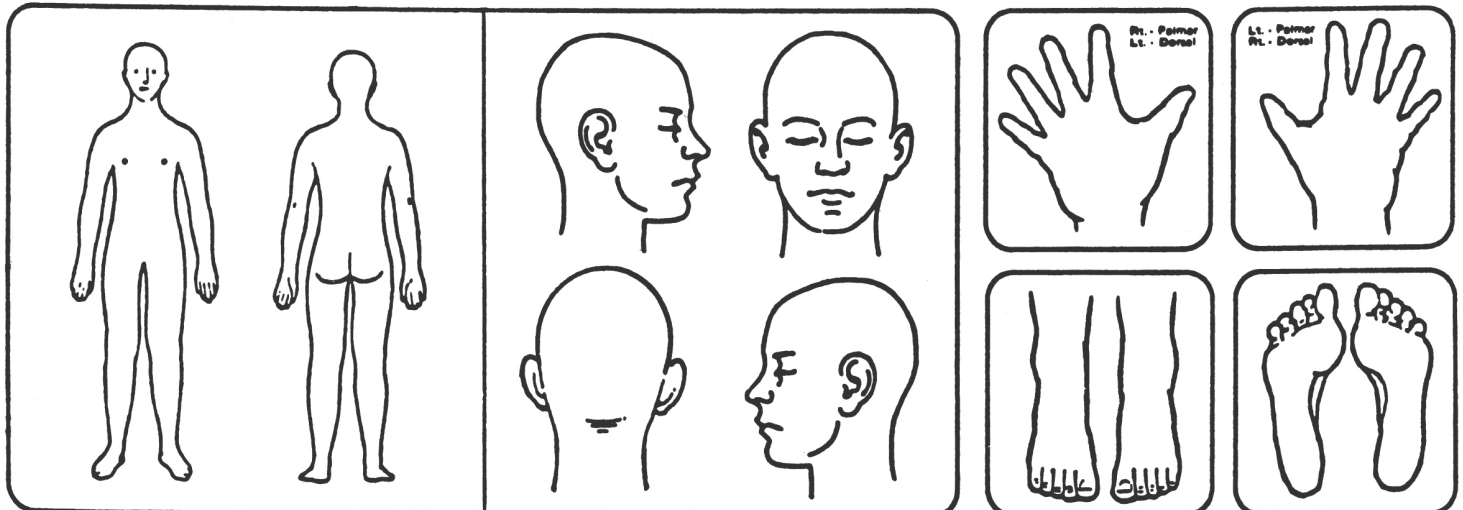
Notes

REPORT OF SUSPECTED CHILD ABUSE

(CHILD PROTECTIVE SERVICE LAW - TITLE 23 PA CSA CHAPTER 63)

PLEASE REFER TO INSTRUCTIONS ON REVERSE SIDE. EXCEPT FOR SIGNATURE, PLEASE PRINT OR TYPE

1. NAME OF CHILD (Last, First, Initial)		SSN	BIRTHDATE	SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS (State, City, State & ZIP Code)			COUNTY	
1A. PRESENT LOCATION IF DIFFERENT THAN ABOVE			COUNTY	
2. BIOLOGICAL/ADOPTIVE MOTHER (Last, First, Initial)		SSN	BIRTHDATE	TELEPHONE NO.
ADDRESS (City, State & ZIP Code)			COUNTY	
3. BIOLOGICAL/ADOPTIVE FATHER (Last, First, Initial)		SSN	BIRTHDATE	TELEPHONE NO.
ADDRESS (City, State & ZIP Code)			COUNTY	
4. OTHER PERSON RESPONSIBLE FOR CHILD		SSN	BIRTHDATE	RELATIONSHIP TO CHILD SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS (City, State & ZIP Code)			COUNTY	TELEPHONE NO.
5. ALLEGED PERPETRATOR (Last, First, Initial)		SSN	BIRTHDATE	RELATIONSHIP TO CHILD SEX <input type="checkbox"/> M <input type="checkbox"/> F
ADDRESS (City, State & ZIP Code)			COUNTY	TELEPHONE NO.
NAME OF ALLEGED PERPETRATOR'S EMPLOYER AND EMPLOYER'S ADDRESS				
6. FAMILY HOUSEHOLD COMPOSITION (Excluding Above Names)		RELATIONSHIP TO CHILD	NAME (Last, First, Initial)	RELATIONSHIP TO CHILD
NAME (Last, First, Initial)				
A.			D.	
B.			E.	
C.			F.	
ADDRESS WHERE THE SUSPECTED ABUSE OCCURRED			COUNTY	
DESCRIBE THE NATURE AND EXTENT OF THE SUSPECTED CHILD ABUSE, INCLUDING ANY EVIDENCE OF PRIOR ABUSE TO THE CHILD OR ANY SIBLING OF THE CHILD. ALSO INCLUDE ANY EVIDENCE OF PRIOR ABUSE BY THE ALLEGED PERPETRATOR(S) TO OTHER CHILDREN. PLEASE NOTE EXACT LOCATION OF THE INJURY(S) ON MODEL BELOW.			DATE OF INCIDENT	



7. ACTIONS TAKEN OR ABOUT TO BE TAKEN BY THE PERSON MAKING THE REPORT:

- NOTIFICATION OF CORONER OR MEDICAL EXAMINER
 X-RAYS
 PHOTOGRAPHS
 HOSPITALIZATION
 POLICE NOTIFIED
 MEDICAL TEST(S)
 TAKEN INTO PROTECTIVE CUSTODY
 OTHER (Specify)

8. SAFETY CONCERNS AND RISK FACTORS:

A. DESCRIBE THE CHILD(REN)'S PHYSICAL AND BEHAVIORAL HEALTH, GOOD MOOD AND TEMPERAMENT. DESCRIBE CHILD(REN)'S INTELLECTUAL FUNCTIONING, COMMUNICATION AND SOCIAL SKILLS, SCHOOL PERFORMANCE AND PEER RELATIONS. INCLUDE WHETHER THE CHILD(REN) HAS EXPRESSED ANY SUICIDAL/HOMICIDAL IDEATION OR PLANS. INFORMATION UNKNOWN

B. DESCRIBE HOW THE ADULT CAREGIVERS FUNCTION COGNITIVELY, EMOTIONALLY, BEHAVIORALLY, PHYSICALLY AND SOCIALLY. INCLUDE WHETHER THE ADULTS HAVE ANY MENTAL HEALTH, SUBSTANCE USE ISSUES AND/OR CRIMINAL HISTORY. DOCUMENT ANY PAST OR PRESENT DOMESTIC VIOLENCE. RECORD THE EMPLOYMENT STATUS/SOURCE OF INCOME AND WHETHER THERE ARE ANY FINANCIAL STRESSORS IN THE HOME. INCLUDE ANY SAFETY OR SANITARY CONCERNS REGARDING THE CONDITIONS OF THE HOME AND WHETHER THERE ARE WORKING UTILITIES. WHAT IS THE PRIMARY LANGUAGE OF THE HOUSEHOLD? INFORMATION UNKNOWN

C. DESCRIBE WHETHER THE CAREGIVERS HAVE THE APPROPRIATE KNOWLEDGE, EXPECTATIONS AND SKILLS TO PARENT THE CHILD(REN) ADEQUATELY. DOES THE CAREGIVER ADEQUATELY SUPERVISE THE CHILD(REN)? ARE THEY WILLING AND ABLE TO PROTECT THE CHILD(REN)? DESCRIBE THE ABILITY OF THE CAREGIVER TO EMPATHIZE, NURTURE AND ADVOCATE FOR THE CHILD(REN). INFORMATION UNKNOWN

D. DESCRIBE THE CAREGIVERS' APPROACH/METHODS OF DISCIPLINING THE CHILD(REN). DESCRIBE WHEN DISCIPLINE OCCURS AND WHETHER DISCIPLINARY METHODS ARE AGE-APPROPRIATE? ARE THERE ANY CULTURAL PRACTICES IN THE HOME THAT WOULD INFLUENCE THE DISCIPLINARY METHODS USED? INFORMATION UNKNOWN

E. PLEASE PROVIDE ANY ADDITIONAL INFORMATION RELEVANT TO THE INVESTIGATION PROCESS THAT HAS NOT ALREADY BEEN ENTERED IN THIS REFERRAL. THIS MAY INCLUDE ADDITIONAL ADDRESSES TO LOCATE THE CHILD OR PERPETRATOR, ADDITIONAL RESOURCES FOR THE CHILD, EMAIL ADDRESSES, INFORMATION ABOUT ANY WEAPONS IN THE HOME OR CONCERNS YOU MAY HAVE FOR THE CASEWORKER'S SAFETY. INFORMATION UNKNOWN

INSTRUCTIONS TO MANDATED PERSONS:

A mandated reporter making an oral report of suspected child abuse to the department via the Statewide toll-free telephone number (800-932-0313) must also make a written report, which may be submitted electronically, within 48 hours to the department or county agency assigned to the case by using this form. If needed, attach additional sheet(s) of paper to provide all of the requested information on this form.

NOTE:

If the child has been taken into custody, you must immediately contact the county children and youth agency where the abuse occurred.

REPORTING SOURCE:

PRINTED NAME AND SIGNATURE:		DATE OF REPORT:	
ADDRESS:			
TITLE OR RELATIONSHIP TO CHILD:	FACILITY OR ORGANIZATION:	TELEPHONE NUMBER:	EMAIL ADDRESS:

Notes



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2000 Linglestown Road | Suite 301 | Harrisburg, PA 17110
Phone: 717-238-0937 | **Fax:** 717-238-4315 | **PA Toll Free:** 800-448-4906
info@pafsa.org | www.pafsa.org | [f](#) ProtectPAKids | [t](#) PAFamilySupport

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