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CHILD MANDATED REPORTER TRAINING

CHILD PROTECTION SYSTEM OVERVIEW

State Supervised Child Protection System

The Minnesota Department of Human Services (DHS) provides many functions to support county child welfare agencies and tribes.

These include:

- Providing Guidance to counties through developing legislation, policy, and rules which direct practice.
- Distributing federal and state funds.
- Monitoring program outcomes.
- Supporting the Social Service Information System which is a centralized data system for all cases in the Minnesota Child Protection System.
- Managing a state training system providing basic and advanced skill training for child protection workers and supervisors.

County Administered

Counties are self-administered:

Minnesota has a state supervised, county administered child protection system. This means that all 87 counties and two of the 11 tribes in Minnesota, Leech Lake and White Earth Bands of Ojibwa, independently develop child protection standards for their jurisdictions. The counties report to their county boards and the tribes report to their tribal councils.

STATEWIDE MINNESOTA CHILD MALTREATMENT SCREENING GUIDELINES

In July of 2007, the Minnesota Department of Human Services (DHS) published the Statewide Child Protection Screening Guidelines. These guidelines recommend a common set of screening criteria that are intended to narrow the differences in screening practices among the 87 counties. Many counties have adopted these guidelines. The guidelines can be found on the DHS public web site at [www.mn.dhs.state.mn.us](http://www.mn.dhs.state.mn.us)

RESPONDING TO CHILD PROTECTION REPORTS

Two methods of response:

Family Assessment-

- Most often used for moderate and low risk reports.
- Up to 5 days response time.
- Goal: Child safety through an assessment of safety, risk, and family needs and strengths. The goal is to determine need for service. Does not seek to determine whether maltreatment occurred.
- Purpose is to address child safety through family engagement and services.
- Uses strength based and family centered practices.

Investigations-

- Investigations are required for reports alleging severe harm or safety concerns that meet the statutory definition of substantial child endangerment.
- Require an immediate response.
- Goal: to accomplish child safety through an investigation while assessing for child safety and risk. The investigative findings determine whether maltreatment occurred and whether child protection services are needed.
- Interviews are tape recorded.

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- Interviews are conducted with law enforcement when involving allegation of a criminal offense.

### Why Two Responses?

The full protocol of an investigative response is not always needed or desirable. By far, most accepted reports are not headed to court and a response that is more proportional to the safety needs of the child is desirable. Family assessment provides a second method of assessing and achieving child safety that engages the family in necessary services and promotes a collaborative working relationship with the family.

### TYPES OF MALTREATMENT

Neglect- 61%

Physical Abuse-35.5%

Sexual Abuse-10.5%

Mental Injury- .7%

\*The sum of the percentage of maltreatment types exceeds 100% because a report may have more than one type of maltreatment alleged.

\*Approximately 50% of referrals to CPS comes from schools and law enforcement.

### RESPONSE TO REPORTS OF MALTREATMENT (2011)

Screening- 1/3 of reports are screened in  
2/3 of reports are screened out

Investigative Response- 31% in 2011

Family Assessment- 69% in 2011

- Some of the screened out reports are referred to community resources.
- A limited number of screened out reports are voluntarily assigned within the social service agency (When those services are available).

### REPORTERS OF ALLEGED CHILD MALTREATMENT (2011)

- Law enforcement/courts= 27.3%
- Social Worker/counselor= 13%
- School Personnel= 6.8%
- Health Practitioner= 10.6%
- Parent or Relative (out of the home)= 6.8%
- Other=7.6%
- Friend/Acquaintance/Neighbor= 4.1%
- Non-Relative Caregiver=2.1%
- Parent or Relative in the home= 3%
- Anonymous= 2.8%

\*50% of all reports of maltreatment are received from schools and law enforcement.

### POVERTY, NEGLECT AND RACIAL DISPARITIES

Poverty and Child Neglect:

There is a strong correlation between poverty and child neglect.

- Children living in low socioeconomic status households (SES) are 7 times more likely to be neglected than children not living in poverty. (National Incident Study-4, Report to Congress, January 2010).

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- When conditions of poverty create circumstances in which a child may be neglected solely due to conditions of poverty, Minnesota state policy directs child welfare agencies to assist the parent(s) in correcting the condition of neglect, but not to define their behavior as neglectful.

\*Low Socioeconomic status was determined by:

- Less than \$15,000 annual household income (Poverty threshold for 1 adult and 1 child)
- Less than a high school education (parents)
- Any household member is a participant in a poverty program (TANIF, Food Stamps, and Public Housing etc.).

Poverty and Racial Disparities:

Child Poverty and Race 2010\*

<u>Race</u>	<u>Minnesota</u>	<u>US</u>
White	10%	17%
African American	45.9%	38.2%
American Indian	45%	
Hispanic	29.3%	32.3%
Asian	23.9%	13%
2 or more races		26.7%

- The overall child poverty rate for the US is 21.6% (1 in 5 children live in poverty)
- The overall child poverty rate in MN is 15.2% (1 in about every 6 children live in poverty)

\*child poverty is US 2009-2010: Selected Race Groups and Hispanic origin, [www.census.gov/prod/2011pubs/acsbr10-05.pdf](http://www.census.gov/prod/2011pubs/acsbr10-05.pdf)

Racial Disparities in Minnesota Child Protection System:

American Indian and African American/Black children had the highest rates of contact with the child protection system. (2011 Child Welfare Report)

- American Indian children were more than 6 time more likely to be reported as abused or neglected than white children.
- African American children were 3 times more likely.

White children comprised the largest number of out of home care; however:

- American Indian children are 13 times more likely to be placed in out of home care than white children.
- African American children are 5 times more likely.
- African American children and children indicating two or more races are 4 times as likely.

Poverty, Race, Culture: Implications when reporting to child protection

- Neither race, culture, nor income should be a factor when deciding to make a report of maltreatment-Child safety alone should guide our decision making.
- Informing ourselves about other cultural practices may help us see protective capacities in families that were not previously apparent.
- The potential for bias underscores the importance of being aware of our own racial, cultural, and class values that influence our decision making.
- These values are the lenses through which we view the world and form our judgments.

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MANDATED REPORTERS IN MINNESOTA

The Law: M.S. 626.556 subd 3, (a) defines a person mandated to report as “a professional or professional’s delegate who engaged in the practice of the healing arts, social services, hospital administration, psychological or psychiatric treatment, childcare, education, correctional supervision, probation and correctional services, law enforcement or employed as a member of the clergy and received information while engaged in mistrial duties”.

M.S. 626.556 subd 3, (b)-(summarized) Member of the clergy are not required to report information that is considered privileged. (M.S. 585.02, subd. 1 (c)) This in part refers to information received in a confession by a member of the clergy, or other minister of any religion, and also applies to communications made by a person seeking religious or spiritual advice.

Examples of mandated reporters include:

- Mental Health Services
- Social Services
- Child Care Providers
- Law Enforcement, Probation, or Correctional Services or Supervision
- Clergy
- Healing arts
- Education Providers
- Hospital Administration
- Psychiatrist, Psychologists, Therapists and counselors
- Health Care workers

\*The law also allows for the voluntary reporting of child maltreatment by persons who are not required by law to report.

What to Report:

A Mandated reporter must report physical abuse, sexual abuse or neglect to a child when the reporter (knows of an incident) or has reason to believe (suspects) that a child has been abused or neglected within the preceding three years.

When to Report:

- A report must be made immediately...
- Orally within 24 hours
- Followed by a written report within 72 hours

Where to Report:

Maltreatment within the family unit: Reporting abuse or neglect of a child by a parent, guardian or individual functioning within the family unit can be made to the local child welfare agency or to law enforcement. These two agencies cross report.

Maltreatment outside of the family unit: Maltreatment that occurs outside of the family unit in licensed facilities (schools, hospitals, foster care settings, etc.) is reported to the governmental agency that licenses the facility. For example, maltreatment in a school would be reported to the Dept. of Education.

Other reports occurring outside the family unit are reported to law enforcement.

Emergencies/Imminent Danger: Call law enforcement. Only they can remove a child for immediate safety without a court order.

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Confused? Call your local child welfare agency and they will provide information to direct your report.

Why Report:

- To prevent harm to a child
- To assist families in receiving needed services
- To disrupt or terminate a cycle of maltreatment
- Besides, it is the law!
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What information is necessary to report?

- Name of offender if known
- Name of alleged victim
- Nature and extent of the maltreatment
- Name and address of the reporter (for mandated reporters)

What happens after a report is made?

- Notification is given to mandated and voluntary reporters as to whether the report will be accepted or not: If requested, the child welfare agency will notify the reporter within 10 days of the report, either orally or in writing, as to whether their report met the legal threshold to be “screened in” for a child protection response or not. The reporter will also be provided with information as to whether the report was assigned for an investigation or a family assessment.
- Notification to the reporter of the findings of a completed investigation or family assessment.

Notifications to mandated reporters of investigation or assessment outcomes.

Mandated reporters shall receive a summary of the outcome of an investigation or family assessment, unless the disclosure would be detrimental to the best interests of the child.

The summary will include:

- The name of the social worker doing the investigation or family assessment.
- The nature of the maltreatment, if determined.
- Whether the case has been opened for ongoing child protection services or other services;
- And if a referral has been made to a community organization.

Notifications to Voluntary Reporters.

Voluntary reporters, upon request, shall receive a concise summary of the disposition, unless release would be detrimental to the best interest of the child.

A concise summary is limited to:

- The agency’s classification of the report (whether family assessment or investigation).
- A statement of whether child protection services are being provided.

Failure to Report: Penalties and Protections

Failure by a mandated reporter to report:

- Is a misdemeanor offense

Reporter Protections:

- Name of reporter is confidential (unless disclosed as part of court process)

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- Reporter is immune from civil or criminal liability when report is made in good faith.
- Employee and other retaliation is prohibited.

PHYSICAL ABUSE

Physical abuse is most often thought about as an intentional action that results in an injury to the child. While this is true, the statutory definition of physical abuse also includes other actions which present a dangerous level of risk of harm.

What is physical abuse?

- Any inflicted non-accidental physical injury, mental harm, or threatened injury, inflicted by a person responsible for the child's care.
- Certain actions done in anger or without due regard to the safety of the child.
- Any physical or mental injury that cannot be reasonably explained by the child's history of injuries.
- Or, unauthorized aversive or deprivation procedures.

What is NOT physical abuse?

- Reasonable and moderate physical discipline by a parent or guardian, which does not result in an injury.
- Reasonable restraint in schools.
- Accidental Injuries (However, unintentional injuries resulting from physical discipline are considered physical abuse).

Physical abuse that results in injury

Physical injury:

- Any inflicted non-accidental injury.
- Physical injury includes but is not limited to: marks, bruises, abrasions, swelling, as well as burns, broken bones, and internal injuries.

Mental injury:

- An inflicted injury to the psychological capacity or emotional stability of a child.
- As evidenced by an observable and substantial impairment in the child's ability to function as normal.
- Usually diagnosed by a professional (less than 1% of accepted referrals).

Dangerous Actions: Actions done in anger or without regard for safety include, but are not limited to:

- Throwing, kicking a child
- Striking a child with a closed fist
- Shaking a child under age of 3
- Striking a child under age of 1 on face or head
- Threatening a child with a weapon
- Unreasonable interference with a child's breathing
- Poisoning or chemical restraints
- Unreasonable physical confinement or restraint

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Threatened Injury: A statement, overt act, condition, or status that represents a substantial risk of physical or sexual abuse or mental injury. Includes, but not limited to:

- Exposure to dangerous persons or dangerous situations
- Threats of violence
- Threats of sexual abuse (also referenced in sexual abuse statutes)
- Exposing a child to a person responsible for the child's care who: has had a past involuntary termination of parental rights, or has had an involuntary transfer of custody of a child, has subjected a child to, or failed to protect a child from egregious harm

SEXUAL ABUSE

MN law includes sexual abuse of a child by a person who is:

- A person in a position of authority
  1. A person in a position of authority means a person who is a parent or acting in place of a parent or, a person charged with any duty or responsibility for the health, welfare, or supervision of a child... No matter how brief of a time. Psychotherapists are also included here.
- Responsible for a child's care (Outside of family unit)
  1. Persons outside the family unit having responsibilities for the care of the child Including:  
Teachers, school administrators, other school employees or agents, or other lawful custodians having either full-time or short term care responsibilities including, but not limited to, daycare, babysitting (paid or unpaid) counseling, teaching and coaching.
- Responsible for a child's care (Inside family unit)
  1. Persons inside the family unit including: Parent, guardian, or other persons functioning within the family unit having child care responsibilities and siblings.
- A person with a significant relationship to the child.
  1. Significant relationship means a relative relationship by blood, marriage or adoption. This includes: Parent, stepparent, guardian, brother, sister, stepbrother, stepsister, first cousin, aunt, uncle, nephew, niece, grandparent, great-grandparent, great-uncle and great-aunt.

Child sexual abuse includes violations of 1<sup>st</sup>-5<sup>th</sup> degree criminal sexual conduct:

- Criminal sexual conduct generally consists of penetration or sexual contact with a child  
Penetration is defined as: Any intrusion into a genital or anal opening for purposes of sexual gratification and any form of oral sex.  
Sexual contact is defined as: the touching of a child's "intimate parts" or having the child touch the intimate parts of the offender (or another person) either on or under the clothing, when the action is performed with sexual or aggressive intent.  
Intimate parts are defined as: the primary genital area, groin, inner thigh, buttocks or breast of a human being.

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- The use of force, or threats, or infliction of harm, as well as the age and vulnerability of the child are aggravating factors that separate the degrees of criminal sexual conduct.

Child sexual abuse also includes:

- Violation of the prostitution laws, involving a minor;
- Involving a child in a sexual performance (photography, filming, live performances).
- Threatened sexual abuse would include, but not be limited to:
  - allowing unsupervised exposure to a person who has offended against children;  
(This is defined by the MN statewide child protection screening guidelines as a person who has not successfully completed a sexual offender treatment program and who has been convicted of criminal sexual conduct, has been determined to have sexually abused a minor as part of a maltreatment determination conducted by a child welfare agency, or as person who is otherwise required to register as a sex offender.)
  - purposely exposing ones private parts to a child; purposely walking in on a child when the child is bathing or dressing; or peeping on a child; when these actions are done for purposes of sexual gratification or aggressive intent.

Other actions that may meet the definition of sexual abuse per state guidelines:

- Attempting to engage in sexual activity with a child by soliciting, asking, commanding, attempting to persuade by telephone, letter, or computerized/electronic means.
- Unexplained injuries to genitals suspicious for sexual abuse.
- Purposely exposing a child to sexual activity.
- Children with sexually transmitted diseases.

### NEGLECT

When is neglect, neglect?

Neglect is the most difficult category to define. After all, the definition of what is necessary food, clothing, shelter, supervision, etc. Means different things to different people.

MN statutes and the state wide child protection screening guidelines attempt to clarify and make decision making easier by including:

Descriptive language such as “seriously endanger,” “serious risk,” “significant health or safety hazard” that offer modifiers which set the bar high for government to become involved in family life. Remember, 2/3’s of all reports are not accepted for a child protection response.

- Examples to help guide reporter and decision makers
  - The use of modifying factors such as age, maturity level, vulnerability, mental and physical disabilities, etc. that sometimes come into play when assessing risk.
1. Medical-Refusal, failure to seek, failure to obtain, or failure to follow through with necessary medical care if there is serious risk to a child, as documented by reports from health care professionals. Reports should include:

- Identification of medical problem or condition that needs attention and identification of the recommended intervention.
- Identification of serious risk to a child's physical or mental health if the child does not receive the necessary medical treatment.
- Documentation of a parent or guardian's failure to provide needed interventions.

2. Medical neglect also includes inorganic failure-to-thrive that has been diagnosed by a physician and is due to parent neglect.
- Medical neglect does not include a parent's choice to solely rely on spiritual means or prayer.
  - The child welfare agency may petition the court if the lack of medical care substantially endangers the child's health.

#### Prenatal Exposure to controlled substances and alcohol

Reporting at birth: Prenatal exposure to controlled substances becomes neglect after the birth of a child. It is diagnosed by:

- Toxicology screens done on the mother or infant at the time of birth.
- Infant withdraw symptoms at the time of birth.
- Developmental delays detected in the first year of life which are due to prenatal exposure  
(For this statute, controlled substances means: cocaine, heroin, phencyclidine (PCP), methamphetamines, amphetamines, marijuana and alcohol).

Reporting during pregnancy: Mandated reports must also report a pregnant woman's use of these controlled substances prior to the child's birth, and must report alcohol use that is chronic or excessive.  
(Exception to mandated reporter reporting of prenatal exposure to alcohol and marijuana)

- Health care professionals and social service professionals are exempt from reporting a woman's use or consumption of marijuana or alcoholic beverages during pregnancy if the professional is providing the woman with prenatal care or other health care services.
- Prenatal care means the comprehensive package of medical and psychological support provided throughout pregnancy.
- When a report is received, the agency shall immediately conduct an appropriate assessment and offer voluntary services which may include, but are not limited to: a chemical dependency assessment, a referral for chemical dependency treatment if recommended, and a referral for prenatal care.

#### SUPERVISION

This means the failure to provide for necessary supervision or child care arrangements.

Examples of not providing adequately for a child's supervision and safety includes, but is limited to:

- failing to provide supervision of children in bathtubs, near swimming pools, lakes, ponds, holding tanks, machinery, busy streets, and alleys.
- selecting an unreliable person to provide child care.

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Ages and allowable length of time for a child to be left alone:

- Children 7 and under should not be left alone for any period of time.
- 8-10 up to 3 hours.
- 11-13 up to 12 hours.
- 14-15 up to 24 hours.
- 16-17 over 24 hours with a plan in place concerning how to respond to an emergency.

Babysitting:

Children under age 11 should not provide child care.

Children ages 11-17 placed in a childcare role are subject to the same time restrictions of being left alone as listed above.

\*modifying factors are age, vulnerability, maturity, disability, etc.

Educational Neglect

Education:

- unexcused absences on 7 school days for a child in elementary school.
- or unexcused absences of one or more school periods on 7 school days if the child is in middle school, junior high, or high school.
- referrals for educational neglect come from schools.

Requirements:

- Children between 7 and 18 are subject to mandatory attendance requirements.
- Children 16 and 17 maybe legally withdrawn from school after a student, parent, school meeting and a written notice of intention to withdraw is signed by the parent or guardian.
- Children under the age of 7 who enroll in half day or full day kindergarten are subject to mandatory attendance requirements.

Food and Clothing:

Food- This means the lack of necessary food which result in conditions such as, but not limited to:

- malnutrition, a pattern of weakness, inability to concentrate in school or to sleep, low weight and height significantly out of the norm and that are not due to organic or medical causes.
- A growth delay, which may be referred to as failure to thrive, as diagnosed by a physician.

Clothing:

Failure to provide clothing that is necessary for the weather or other environmental conditions, and the failure to provide this clothing would seriously endanger the child.

Shelter:

Failure to provide necessary shelter means dangerous living conditions which fail to provide protection from weather conditions, or from environmental hazards in the dwelling, or other conditions on the property, that have the potential for injury, illness and/or disease which fall under the control of the parents.

- Failure to provide heat and sanitation that poses a safety risk.
- Gas leaks, exposed electrical wiring, open wells without covers, discarded refrigerators with doors, blocked exits due to extreme clutter, guns not stored safely, dangerous drugs, controlled substances, or household poisons that are accessible to children.

-Methamphetamine related environmental hazards (this includes manufacturing, storing of precursors or waste products).

Examples of failure to protect a child from serious danger would include, but not limited to:

- The failure to protect a child from a person who poses a threat of serious danger to the child. An example would include a parent who leaves their child with a baby sitter that they know, or reasonably should know, is an unsafe or unreliable caretaker who should not be given this responsibility.
- Involving the child in committing a criminal act that seriously endangers the child.
- Reports of ongoing abuse between siblings that result in physical injury and the parent does not protect.
- Person responsible for the child's care is arrested for driving under the influence of drugs or alcohol with children in the vehicle.

**REMEMBER**

- Be aware of your personal cultural and class values when making a decision to report.
- Neither race nor income should be a factor when deciding to make a report of maltreatment. Child safety issues alone should guide our decision making.
- When in doubt, and there is a significant safety concern, call the local child welfare agency who will offer guidance.