

# MANDATED REPORTING

CATHOLIC CHARITIES OF CHENANGO COUNTY

In New York State

# *The Impact of Child Abuse*

- ❑ Every 36 seconds, a child is confirmed as being abused or neglected
- ❑ 4 Children are killed every day as the result of child abuse or neglect
- ❑ 4 million children a year suffer from abuse in the United States. This is thought to be half the actual number, as many cases are unreported.
- ❑ Children less than 1 year old, account for 41% of the child abuse and neglect deaths reported.
- ❑ In 2001, of the confirmed cases of abuse and neglect: 59% were neglect; 19% physical abuse; 10% sexual Abuse; 7% emotional abuse.

# *MANDATED REPORTERS in New York State*

- ▣ Certain professionals are required by law to report suspected child abuse or maltreatment to the New York State Central Register (SCR) of Child Abuse and Maltreatment, also known as the Child Abuse Hotline.
- ▣ The law also assigns civil and criminal liability to those professionals who do not comply with their mandated reporter responsibilities.

## *Who are Mandated Reporters?*

- ▣ New York State recognizes certain professionals to be specially equipped to hold the important role of mandated reporter of child abuse or maltreatment. Those professionals are:

# *Who are Mandated Reporters?*

- ▣ Surgeon
- ▣ Physician
- ▣ Dentist
- ▣ Dental hygienist
- ▣ Chiropractor
- ▣ Podiatrist
- ▣ Medical examiner
- ▣ Coroner
- ▣ Osteopath
- ▣ Optometrist
- ▣ Resident
- ▣ Intern
- ▣ Registered nurse
- ▣ Social Worker
- ▣ Registered physician's assistant
- ▣ Emergency medical technician
- ▣ Psychologist
- ▣ Mental health professional
- ▣ Substance abuse counselor
- ▣ Alcoholism counselor
- ▣ Provider of Family or Group Family Day Care
- ▣ Day care center worker
- ▣ Peace officer
- ▣ Licensed Creative Arts Therapist

# *Who are Mandated Reporters?*

- ▶ District attorney or assistant district attorney
- ▶ Police officer
- ▶ Investigator employed in the Office of the District Attorney
- ▶ Any other law enforcement official
- ▶ School official: Teacher, Guidance Counselor, or other licensed personnel
- ▶ Social services worker
- ▶ Christian Science practitioner
- ▶ Hospital personnel engaged in the admission, examination, care or treatment of persons
- ▶ Any employee or volunteer in a residential care facility
- ▶ Any child care worker
- ▶ Any other child care or foster care worker

# *The Role of the Mandated Reporter*

- ▣ Mandated reporters are required to report suspected child abuse or maltreatment – or cause a report to be made – when, in their professional roles, they are presented with reasonable cause to suspect child abuse or maltreatment.
- ▣ Reasonable cause to suspect child abuse or maltreatment means that, based on your observations (physical evidence), what you are told (the story) and/or your professional training and experience, you feel the parent or person legally responsible for a child up to 18 years old has harmed that child or placed that child in imminent danger of harm.

## *The Role of the Mandated Reporter*

- ▣ Those professional/paraprofessional staff who provide services to children under a contract with the local Social Services, are required to make a report whenever they have reasonable cause to suspect a child has been abused/maltreated when **any person** comes before them in their professional capacity, and states from personal knowledge facts, conditions or circumstances which if correct indicate a child has been abused or maltreated.



# *The Role of the Mandated Reporter VS Voluntary Reporter*

- ▶ Of course, anyone may report any suspected abuse or maltreatment at any time, and is encouraged to... you don't have to be a mandated reporter to do so
- ▶ If you see a child in immediate danger, you are encouraged to call 911 immediately and report it
- ▶ Voluntary reporters (neighbors, relatives and concerned citizens) may use the statewide, public toll free number to make reports based on what they have seen and/or heard If they suspect a child has been harmed or is at risk

# *Who is Reportable to the Child Protective System?*

- ▣ Parents or person(s) legally responsible, meaning person who continually or at regular intervals is found in the same household, or any person responsible for the child's care at the relevant time.  
example: Mother/Father; Foster Parent; Step-parent; Day-care provider
- ▣ Others suspected of child abuse are reportable to the legal system (Police)  
Example: Bus Drivers; Neighbors; Teachers; Baby Sitter

# *What is Abuse or Maltreatment of a Child?*

## **Abuse**

- ▶ According to NYS Social Services Law Section 412, abuse encompasses the most serious harms committed against children less than 18 years old (not in Residential care). An abused child is one whose parent or other person legally responsible for his or her care inflicts serious physical injury upon the child (by other than accidental means); creates a substantial risk of death or serious physical injury; or commits a sex offense against the child. A person can also be culpable of child abuse if he or she knowingly allows someone else to inflict such harm on a child.

# *What is Abuse or Maltreatment of a Child?*

## **Maltreatment (Including Neglect)**

**Maltreatment** means that a child's physical, mental or emotional condition has been impaired, or placed in imminent danger of impairment, by the parent or legal guardian's failure to exercise a minimum degree of care. This means that a parent or legal guardian:

- ▶ has failed to provide sufficient food, clothing, shelter, education;
  - ▶ has failed to provide proper supervision, guardianship or medical care (includes all medical issues including dental, optometric or surgical care);
  - or
  - ▶ has inflicted excessive corporal punishment, abandoned the child, or misused alcohol or other drugs to the extent that the child was placed in imminent danger.
- 
- ▶ **Poverty or other financial inability to provide the above is not maltreatment.**

# *Abused/Neglected Children in Residential Care*

- ▶ Section 412-a of the Social Services Law indicates a separate definition of a neglected/abused child in Residential Care. This pertains to children residing in a group residential facility under the jurisdiction of DSS, NYSOCFS, OASAS, Division for Youth, OMH, OPWDD or State Education Department.
- ▶ Providers include foster care agencies, detention programs, RHY shelters and residential programs

# Abused Children in Residential Care

- ▶ An abused child in residential care is one who is subjected to the following acts by a custodian, regardless of whether the child is injured.
  - This does not include those that are accidental, or done as an emergency safety intervention
- ▶ *Custodian* is defined as a Director, operator, employee or volunteer of a Residential Facility or program.

# Definitions of Abused Children in Residential Care

- ▶ Being thrown, shoved, kicked, pinched, punched, shaken, choked, smothered, bitten, burned, cut or stricken;
- ▶ The display of a weapon or other object that could reasonably be perceived as being meant to inflict pain or injury, in a threatening manner;
- ▶ The use of corporal punishment;
- ▶ The withholding of nutrition or hydration as punishment; or
- ▶ The unlawful administration of any controlled substance or alcohol beverage

# Definitions of Abused Children in Residential Care

- ▣ Or, an abused child in residential care is one who, by other than accidental means, has been inflicted upon the child a reasonably foreseeable injury that caused death or creates a substantial risk for:
  - death;
  - Serious or protracted disfigurement
  - Serious or protracted impairment of their physical, mental or emotional condition; or
  - Serious or protracted loss or impairment of the function of any organ



# Definitions of Abused Children in Residential Care

- ▣ Or, is subjected to a reasonably foreseeable and substantial risk of injury, by other than accidental means, which would be likely to cause:
  - death;
  - Serious or protracted disfigurement
  - Serious or protracted impairment of their physical, mental or emotional condition; or
  - Serious or protracted loss or impairment of the function of any organ

# Definitions of Abused Children in Residential Care

- ▣ Or, is the victim of sexual abuse, including sex offenses, use of a child for prostitution, use of a child for sexual performance and incest.
- ▣ No injury is needed for an allegation of sex abuse

# Neglected Children in Residential Care

- ▶ A neglected child in Residential Care is a child whose *is impaired physically, mentally or emotionally or is at substantial risk of impairment because of failure to receive:*
  - Adequate food, clothing, shelter, education, medical, dental, optometric or surgical care, or the use of isolation or restraint; or
  - Access to educational instruction in accordance to Education Law;
  - Proper supervision or guardianship
  
- ▶ Or a child who is inflicted with a non-accidental physical, mental or emotional injury, excluding minor injuries, or is subjected to the risk of a physical, mental or emotional injury, excluding minor injuries, where such injury or risk was reasonably foreseeable
  
- ▶ Or a child who is inflicted with a non-accidental physical, mental or emotional injury, excluding minor injuries, or is subjected to the substantial risk of a physical, mental or emotional injury, excluding minor injuries, as a result of a failure to implement an agreed upon plan of prevention and remediation
  
- ▶ Or the Intentional administration of any prescription or non-prescription drug other than in compliance with a prescription or order from a licensed qualified health care practitioner

# Indicators

The list that follows contains some common indicators of abuse or maltreatment. This list is not all-inclusive, and some abused or maltreated children may not show any of these symptoms.

Indicators of *Physical Abuse* can include:

- ▶ Injuries to both eyes or both sides of the head or body (accidental injuries typically only affect one side of the body);
- ▶ Frequently appearing injuries such as bruises, cuts and/or burns, especially if the child is unable to provide an adequate explanation of the cause. These may appear in distinctive patterns such as grab marks, human bite marks, cigarette burns or impressions of other instruments (belts, switches);
- ▶ Destructive, aggressive or disruptive behavior;
- ▶ Passive, withdrawn or emotionless behavior;
- ▶ Fear of going home or fear of parent(s).

# Indicators-Bruising

- ▶ Bruising occurs when blunt mechanical force is applied to the child's skin to such a degree that capillaries (and potentially larger vessels) become disrupted resulting in the leakage of blood into the subcutaneous tissue. The amount of blood and size and location of the involved area account for the appearance of the bruise. If force is applied via an object, the bruise may reflect the shape and geometry of the object.
- ▶ In general, a bruise progresses through a series of colors beginning with deep red, blue, or purple, then changes to a deep blue, then greenish, and, finally, resolves with a yellowish brown color.

# Indicators-Bruising

- ▣ Bruises are the most common manifestation of physical child abuse. Child abuse can be suspected whenever bruises are (1) over soft body areas, such as the thighs, buttocks, cheeks, abdomen, and genitalia, since common childhood activities do not commonly cause trauma to these areas; (2) more numerous than usual; (3) of different ages (suggests repeated episodes of abuse); (4) the shape of objects such as belts, cords, or hands (demonstrates that the injuries were inflicted); or (5) noted in young, non-ambulating children (infants are not capable of getting into accidents)....

# *Indicators-Bruising*



Pattern bruising on  
legs



Handprint on  
leg



Slap mark on  
face



Normal bruising on  
4 yr old

# Indicators

Indicators of *Sexual Abuse* can include:

- ▣ Symptoms of sexually transmitted diseases;
- ▣ Injury to genital area;
- ▣ Difficulty and/or pain when sitting or walking;
- ▣ Sexually suggestive, inappropriate or promiscuous behavior or verbalization;
- ▣ Expressing age-inappropriate knowledge of sexual relations; and
- ▣ Sexual victimization of other children.



# Indicators

Indicators of *Maltreatment/Neglect* can include:

- ❑ Obvious malnourishment, listlessness or fatigue;
- ❑ Stealing or begging for food;
- ❑ Lack of personal care – poor personal hygiene, torn and/or dirty clothes;
- ❑ Untreated need for glasses, dental care or other medical attention;
- ❑ Alcohol or drug abuse; delinquency
- ❑ Frequent absence from or tardiness to school; and
- ❑ Child inappropriately left unattended or without supervision.

# *Reporting Domestic Violence*

- ▣ It is often unclear as to when it becomes necessary to make a report in a domestic violence situation, when the child is not necessarily the primary victim. A correlation must be made between the abusive action and the impact on the child. Consider the following questions:

# Domestic Violence

- ▣ Where is the child during the violent incidents?
- ▣ How frequent are the episodes?
- ▣ What is the nature of the violence?
- ▣ Is there a weapon in the home? Has it been used as a threat during the incident?
- ▣ What is the impact on the child?

# Examples of Reportable Situations

- ▶ A school principal calls the State Central Register (SCR the Hotline) and reports that a 10 year old pupil has told him repeatedly for several weeks that he does not get enough to eat at home. The child appears pale and eats excessively at the school lunch program.
- ▶ May brings her four-year-old daughter to the emergency room because of a vaginal discharge. The child is diagnosed to have gonorrhea.
- ▶ A five-year-old boy is continually brought to the school nurse for an advanced case of head lice.
- ▶ A 3-year-old is brought to the emergency room and is diagnosed to have second-degree immersion burns.
- ▶ A school counselor calls the SCR and states that a student has missed 34 out of a possible 95 days of school. The parents submitted an excuse for 10 of his absences. The school has attempted to contact the parents. The parents have not responded to the contacts.
- ▶ A neighbor calls the SCR and states that a three-year-old and four-year-old sit on the windowsill every day during warm weather. The family live in a fourth floor apartment without any screens
- ▶ A mother calls the SCR and reports that she is afraid her husband is going to harm her six-month-old baby. He has on more than one occasion violently shaken the baby when the baby doesn't stop crying.
- ▶ A Grandmother reports that her Daughter-in-law treats her eight-year-old Grandson terribly. She verbally abuses him by calling him filthy names and makes him cry.
- ▶ A neighbor calls the SCR and states that three young children, who live two trailers down, roam the trailer park all night long vandalizing neighbors' property.
- ▶ A 16-year-old boy routinely drinks alcohol in front of his mother. The aunt is concerned and calls the SCR.

# *Internal Reporting*

- ▶ Staff that have first hand knowledge of the suspected abuse are responsible to make the call themselves.
- ▶ If you can, review the information that you have with your Supervisor (or designated alternate) first, to assure you have adequate and appropriate information to call in the report. However, **if no-one is available, call the hotline immediately**, and inform your Supervisor that the report has been made when available.
- ▶ Your Supervisor will also instruct you to complete internal reports if applicable.

# *Calling the State Central Register*

- ▣ As soon as you suspect abuse or maltreatment you must report your concerns by telephone to the SCR. The SCR is open 24-hours-a-day, seven-days-a-week, to receive your call. The timeliness of your call is vital to the timeliness of intervention by local Child Protective Services (CPS).
- ▣ You **must** call the Hotline: without an official report, local CPS do not have the authority to intervene.

The telephone numbers are:

- ▣ Mandated Reporter ..(800) 635-1522
- ▣ Public Hotline .....(800) 342-3720

# *Calling the State Central Register*

Be prepared to include in your report:

- ▣ Names and addresses of the child & his/her parents or other person responsible for their care;
- ▣ Child's age, gender and race;
- ▣ The nature and extent of the injuries, abuse or maltreatment, including any evidence of prior injuries/abuse/maltreatment to the child an/or siblings;
- ▣ Name of the person(s) responsible for causing the injury/abuse/maltreatment;
- ▣ Family composition
- ▣ Source of the report
- ▣ Person making the report and contact numbers/information
- ▣ Actions taken by the reporting source ie: photos/X-rays taken
- ▣ Any additional information which may be helpful

# Written Reports

- Oral reports must be followed within **48 hours** by a written report to the local CPS. A copy of the current Mandated Reporter Form (LDSS Form 2221A) can be obtained by contacting your local CPS office, or by accessing the OCFS mandated reporters web page at [www.ocfs.state.ny.us](http://www.ocfs.state.ny.us) and clicking on the “Child Protective Services” or “How Do I Report Child Abuse” buttons.
- Mail to: Chenango County Department of Social Services
- Child Protective Services  
5 Court Street  
Norwich, NY 13815



## *What to Expect When You Call the SCR Hotline*

- ▣ There may be times when you have very little information on which to base your suspicion of abuse or maltreatment, but this should not prevent you from calling the SCR. A CPS specialist will help to determine if the information you are providing can be registered as a report.
- ▣ The mandated reporter form can be used to help you organize the identifying or demographic information you have at your disposal.

# The Report

LDSS-2221-A (Rev. 10/2002) FRONT

NEW YORK STATE  
OFFICE OF CHILDREN AND FAMILY SERVICES  
**REPORT OF SUSPECTED  
CHILD ABUSE OR MALTREATMENT**

Report Date	Case ID	Call ID
Time AM/PM	Local Case #	Local Dist/Agency

**SUBJECTS OF REPORT**

Line #	Last Name	First Name	Aliases	Sex (M, F, Unk)	Birthday or Age (Mo/Day/Yr)	Ethnic Code	Relation Code	Role	Lang.
1.									
2.									
3.									
4.									
5.									
6.									
7.									

MORE

List Addresses and Telephone Numbers (Using Line Numbers From Above)

Telephone No. ( ) - -
( ) - -
( ) - -

**BASIS OF SUSPICIONS**

Alleged suspicions of abuse or maltreatment. Give child(ren)'s line number(s). If all children, write "ALL".

<input type="checkbox"/> DOA/Fatality	<input type="checkbox"/> Child's Drug/Alcohol Use	<input type="checkbox"/> Swelling/Dislocation/Sprains
<input type="checkbox"/> Fractures	<input type="checkbox"/> Poisoning/Noxious Substances	<input type="checkbox"/> Educational Neglect
<input type="checkbox"/> Internal Injuries (i.e. Subdural Hematoma)	<input type="checkbox"/> Choking/Twisting/Shaking	<input type="checkbox"/> Emotional Neglect
<input type="checkbox"/> Lacerations/Bruses/Welts	<input type="checkbox"/> Lack of Medical Care	<input type="checkbox"/> Inadequate Food/Clothing/Shelter
<input type="checkbox"/> Burns/Scalding	<input type="checkbox"/> Malnutrition/Failure to Thrive	<input type="checkbox"/> Lack of Supervision
<input type="checkbox"/> Excessive Corporal Punishment	<input type="checkbox"/> Sexual Abuse	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Inappropriate Isolation/Restraint (Institutional Abuse Only)	<input type="checkbox"/> Inadequate Guardianship	<input type="checkbox"/> Parent's Drug/Alcohol Misuse
<input type="checkbox"/> Inappropriate Custodial Conduct (Institutional Abuse Only)	<input type="checkbox"/> Other specify _____	

State reasons for suspicion, including the nature and extent of each child's injuries, abuse or maltreatment, past and present, and any evidence or suspicions of "Parental" behavior contributing to the problem. (If known, give time/date of alleged incident)

MO \_\_\_\_\_ DAY \_\_\_\_\_ YR \_\_\_\_\_

The Mandated Reporter Requests Finding of Investigation  YES  NO

**CONFIDENTIAL**

**SOURCE(S) OF REPORT**

NAME	TELEPHONE ( ) - -	NAME	TELEPHONE ( ) - -
ADDRESS		ADDRESS	
AGENCY/INSTITUTION		AGENCY/INSTITUTION	

**RELATIONSHIP (✓ = REPORTER, X = SOURCE)**

Med. Exam/Coroner  Physician  Hosp. Staff  Law Enforcement  Neighbor  Relative  Instat. Staff

Social Services  Public Health  Mental Health  School Staff  Other Specify \_\_\_\_\_

**For Use By Physicians Only**

Medical Diagnosis on Child \_\_\_\_\_ Signature of Physician who examined/treated child \_\_\_\_\_ Telephone No. ( ) - -

Hospitalization Required:  None  Under 1 week  1-2 weeks  Over 2 weeks

Actions Taken Or About To Be Taken  Medical Exam  X-Ray  Removal/Keeping  Not. Med. Exam/Coroner  Photographs  Hospitalization  Returning Home  Notified DA

Signature of Person Making This Report \_\_\_\_\_ Title \_\_\_\_\_ Date Submitted Mo. Day Yr. \_\_\_\_\_

LDSS-2221-A (Rev. 9/2002) REVERSE

NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES

TO ORDER MORE LDSS-2221A FORMS: Internet: <http://www.ocfs.state.ny.us/main/forms/>. Difficulty accessing the order form? Call (518) 473-0971.

TO ACCESS FORM LDSS-2221A electronically: Internet: <http://www.ocfs.state.ny.us/main/forms/>. YOU MUST SUBMIT A PAPER COPY, ORIGINALLY SIGNED LDSS-2221A FORM to the local child protective services.

**KEY TO CODES ON THE FRONT PAGE OF FORM LDSS-2221A**

ETHNICITY CODES	RELATION CODES FAMILIAL REPORTS	ROLE CODES	LANGUAGE
AA: African-American	AU: Aunt/Uncle	XX: Other	AB: Abused Child
AS: Asian	CH: Child	Parent	PA: MA: Maltreated Child
CW: Caucasian	GP: Grandparent	Parent Substitute	PS: UA: Alleged Subject (Perpetrator)
HL: Hispanic	FM: Other Fam. Member	Unrelated Home Mem. Unknown	UK: No Role
UK: Unknown	FP: Foster Parent		GC: German
XX: Other	DC: Daycare Provider		HI: Hindi
			HW: Hebrew
			IT: Italian
			JP: Japanese
			KR: Korean
			MJ: Multiple
			PL: Polish
			FR: French
			RU: Russian
			SI: Sign
			SP: Spanish
			VT: Vietnamese
			XX: Other

**Abstract Sections from Article 6, Title 6, Social Services Law**

**Section 412. Definitions**

1. **Definition of Child Abuse** (see N.Y.S. Family Court Act Section 1012(e))  
An "abused child" is a child less than eighteen years of age whose parent or other person legally responsible for his care:  

- 1) Inflicts or allows to be inflicted upon the child serious physical injury, or
- 2) Creates or allows to be created a substantial risk of physical injury, or
- 3) Commits or allows to be committed against the child a sexual offense as defined in the penal law.

2. **Definition of Child Maltreatment** (see N.Y.S. Family Court Act, Section 1012(f))  
A "maltreated child" is a child under eighteen years of age whose physical, mental or emotional condition has been impaired or is in danger of becoming impaired as a result of the failure of his parent or other person legally responsible for his care to exercise a minimum degree of care:  

- 1) in supplying the child with adequate food, clothing, shelter, education, medical or surgical care, though financially able to do so or offered financial or other reasonable means to do so; or
- 2) in providing the child with proper supervision or guardianship; or
- 3) by unreasonable inflicting, or allowing to be inflicted, harm or a substantial risk thereof, including the infliction of excessive corporal punishment; or
- 4) by using a drug or drugs; or
- 5) by using alcoholic beverages to the extent that he loses self-control of his actions; or
- 6) by any other acts of a similarly serious nature requiring the aid of the Family Court.

**Section 415. Reporting Procedure.** Reports of suspected child abuse or maltreatment shall be made immediately by telephone\* and followed in writing (on LDSS-2221A) within 48 hours after such oral report.

**NYS CHILD ABUSE AND MALTREATMENT REGISTER:**  
1-800-635-1522 (For Mandated Reporters Only) 1-800-342-3720 (For Public Callers)

**Section 419. Immunity from Liability.** Any person, official or institution participating in good faith in the making of a report, the taking of photographs, or the removal or keeping of a child pursuant to this title shall have immunity from any liability, civil or of any person required to report cases of child abuse or maltreatment shall be presumed.

**Section 420. Penalties for Failure to Report.**

1. Any person, official, or institution required by this title to report a case of suspected child abuse or maltreatment who willfully fails to do so shall be guilty of a class A misdemeanor.
2. Any person, official, or institution required by this title to report a case of suspected child abuse or maltreatment who knowingly and willfully fails to do so shall be civilly liable for the damages proximately caused by such failure.

**TO SUBMIT FORM LDSS-2221A:** A paper copy originally signed, must be submitted to the County Department of Social Services where the subject(s) of the report reside. See Section 415 above.

**Residential Institutional Abuse Reports:** A paper copy of the form LDSS 2221A, originally signed, must be submitted directly to the State Central Register, P.O. Box 4480, Albany, New York 12204-0480. See Section 415 above.

## *What to Expect When You Call the SCR Hotline*

- ▣ Be sure to ask the CPS specialist for the “Call I.D.” assigned to the report you have made.
- ▣ If the SCR staff do not register the child abuse or maltreatment report, the reason for the decision should be clearly explained to you. You may also request to speak to a supervisor who can help make determinations in difficult or unusual cases.

# *Source Confidentiality*

- ▣ The Social Services Law provides confidentiality for mandated reporters and all sources of child abuse and maltreatment reports. OCFS and local CPS are not permitted to release to the subject of the report any data that would identify the source of a report unless the source has given written permission to do so.
- ▣ Information regarding the source of the report may be shared with court officials, police and district attorneys but only in certain circumstances.

# *Local CPS Role and Responsibilities*

- ▶ When a report is registered at the SCR, the local Department of Social Services is immediately notified for investigation and follow-up.
- ▶ A CPS specialist will investigate the report within 24 hours.
- ▶ CPS intervention consists of an evaluation of the child and other children in the home, a determination of risk to the children remaining in the home, and the development of a plan to meet the needs and safety of the child and family.
- ▶ If there is an immediate threat to the child's life or health, CPS may remove the child from the home.
- ▶ No later than 60 days after receiving the report, CPS must determine whether the report is indicated or unfounded. As a mandated reporter, you may be informed of the outcome of the report, if you wish.

# *Law Enforcement Referrals*

- ▣ When SCR staff receive information that leads them to believe there is an immediate threat to a child or that a crime has been committed against a child, but the SCR is unable to register a report (because it doesn't involve a parent or other person legally responsible for the child), the SCR staff will make a Law Enforcement Referral (LER).
- ▣ The relevant information will be recorded and transmitted to the New York State Police Information Network or to the New York City Special Victims Liaison Unit for action. Local CPS will not be involved.

## *Penalties for Failure to Report*

- ▣ Anyone who is mandated to report suspected child abuse or maltreatment – and fails to do so – could be charged with a Class A misdemeanor and subject to criminal penalties.
- ▣ Further, mandated reporters can be sued in a civil court for monetary damages for any harm caused by the mandated reporter's failure to make a report to the SCR.

## *Immunity from Liability*

- ▣ If a mandated reporter makes a report with earnest concern for the welfare of a child, he or she is immune from any criminal or civil liability that might result. However, this good faith immunity is not available where the liability results from willful misconduct or gross negligence by the mandated reporter.



# Conclusion

- Protecting children and preventing child abuse and maltreatment does not begin or end with reporting. Efforts to prevent child abuse and maltreatment can only be effective when mandated reporters and other concerned citizens work together to improve the safety net in their community.
- To be most effective, your local Child Protective Service needs strong partnerships within your community.
- By getting to know the staff in your local CPS unit, you will gain a better understanding of how your local program is structured and CPS will better understand how to work more effectively with you.
- **By working together, we can protect our vulnerable children.**

# Conclusion



Office of Children & Family Services

- ▶ New York State Office of Children & Family Services: Gladys Carrion, Commissioner  
Capital View Office Park  
52 Washington Street  
Rensselaer, New York 12144
- ▶ Pursuant to the Americans with Disabilities Act, the New York State Office of Children and Family Services will make this material available in large print or on audiotape upon request.  
Visit our website at: [www.ocfs.state.ny.us](http://www.ocfs.state.ny.us)
- ▶ **Mandated Reporters Hotline** for child abuse and maltreatment reports:  
**1-800-635-1522**
- ▶ To report child abuse and neglect, call:  
**1-800-342-3720**
- ▶ For child care, foster care and adoption information, call:  
**1-800-345-KIDS**
- ▶ For information on the Abandoned Infant Protection Act, call:  
**1-866-505-SAFE**

***"Please now complete the Mandated Reporter quiz and sign-off."***