

# Mandated Reporter Training



## Identifying and Reporting Child Abuse and Maltreatment/Neglect



New York State Office of Children and Family Services



# Mandated Reporter Training: Identifying and Reporting Child Abuse and Maltreatment/Neglect

## Mandated Reporters

The following persons and officials are required to report or cause a report to be made when they have reasonable cause to suspect that a child is an abused or maltreated child when the parent, guardian, custodian or other person legally responsible for such child comes before them in their professional or official capacity and states from personal knowledge, facts, conditions, or circumstances, which, if correct, would render the child abused or maltreated.

- Physician
- Surgeon
- Dentist
- Dental hygienist
- Chiropractor
- Podiatrist
- Medical examiner
- Coroner
- Osteopath
- Optometrist
- Resident
- Intern
- Registered nurse
- Registered physician's assistant
- Emergency medical technician
- Psychologist
- Mental health professional
- Substance abuse counselor
- Alcoholism counselor
- Christian science practitioner
- Peace officer
- Any other law enforcement official
- District attorney
- Assistant district attorney
- Investigator employed in the office of the district attorney
- School official
- Hospital personnel engaged in the admission, examination, care, or treatment of persons
- Any employee or volunteer in a residential care facility for children
- Any child care worker
- Any foster care worker
- Any day care worker
- Provider of family or group family day care
- Social Services worker



## Mandated Reporter Training: Identifying and Reporting Child Abuse and Maltreatment/Neglect

### **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 that knowingly and willfully fails to do so shall be civilly liable for the damages proximately caused by such failure.

### **Immunity from Liability**

Any person, official, or institution participating in good faith in the providing of a service pursuant to section four hundred twenty-four of this title, 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 criminal, that might otherwise result by reason of such actions. For the purpose of any proceeding, civil or criminal, the good faith of any such person, official or institution required to report cases of child abuse or maltreatment or providing a service pursuant to section four hundred twenty-four of this title shall be presumed, provided such person, official or institution was acting in the discharge of their duties and within the scope of their employment, and that such liability did not result from the willful misconduct or gross negligence of such person, official or institution.



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## Child Abuse

An abused child is a child whose parent or other person legally responsible:

- **Inflicted or allowed to be inflicted** upon a child an injury\*
- OR
- **Created or allowed to be created a substantial risk of injury\***  
to that child
- OR
- Committed or allowed to be committed against that child a sexual crime as defined in section 230.25, 230.30, 230.32, 255.25, or 263 of the penal code

\* In this context, the term injury means serious or protracted disfigurement, protracted impairment of physical, mental or emotional health, protracted loss of the function of any bodily organ or death.

## Maltreatment/Neglect

- Child's **physical, mental, or emotional condition must have been impaired** or placed in imminent danger of impairment
- AND
- **The subject failed to exercise a minimum degree of care:**
  - In supplying adequate food, clothing, or shelter
  - In supplying adequate education
  - In supplying medical or dental care though financially able to do so OR offered financial or other reasonable means to do so
  - In providing proper supervision or guardianship
  - By inflicting excessive corporal punishment
  - By misuse of drugs or alcohol
- AND
- There is a casual **connection** between the child's condition and the **subject's failure to exercise a minimum degree of care.**
- OR
- The parent has **abandoned** the child by demonstrating intent to **forego his/her parental rights.**



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## Physical Abuse

### Child's Physical Indicators

#### Unexplained bruises and welts:

- On face, lips, mouth;
- On torso, back, buttocks, thighs;
- In various stages of healing;
- Clustered, forming regular patterns, Reflecting shape of article used to inflict (electrical cord, belt buckle);
- On several different areas;
- Regularly appear after absence, weekend or vacation.

#### Unexplained fractures:

- To skull, nose, facial structure;
- In various stages of healing;
- Multiple or spiral fractures;
- Swollen or tender limbs.

### Child's Behavioral Indicators

- Wary of adult contacts;
- Apprehensive when other children cry;
- Behavioral extremes: aggressiveness, withdrawal, changes in behavior;
- Seeks affection from any adult;

### Parent's Behavioral Indicators

- Seems unconcerned about child;
- Takes an unusual amount of time to obtain medical care for the child;
- Offers inadequate or inappropriate explanation for child's injury;
- Gives different explanations for the same injury;
- Misuses alcohol or other drugs;

#### Unexplained burns:

- Cigar, cigarette burns, especially on soles, palms, back, buttocks;
- Immersion burns (sock-like, glove-like, doughnut shaped on buttocks or genitalia);
- Patterned (electric burner, iron);
- Rope burns on arms, legs, neck or torso.

#### Unexplained lacerations or abrasions:

- To mouth, lips, gums eyes;
- To external genitalia;
- On backs of arms, legs or torso;
- Human bite marks;
- Frequent injuries that are "accidental" or "unexplained".

- Frightened of parents;
- Afraid to go home;
- Reports injury by parents;
- Wears long-sleeved or similar clothing to hide injuries.

- Disciplines the child too harshly
- considering the child's age or what he/she did wrong;
- Sees the child as bad or evil;
- Has a history of abuse as a child;
- Attempts to conceal child's injury;
- Takes the child to a different doctor or hospital for each injury;
- Has poor impulse control.



# Mandated Reporter Training: Identifying and Reporting Child Abuse and Maltreatment/Neglect

## Maltreatment/Neglect

### Child's Physical Indicators

- Consistent hunger, poor hygiene, inappropriate dress;
- Consistent lack of supervision, especially in dangerous activities or long periods;
- Unattended physical problems, medical or dental needs;
- Abandonment.

### Child's Behavioral Indicators

- Begging or stealing food;
- Extended stays in school (early arrival and late departure);
- Infrequent school attendance;
- Consistent fatigue, falling asleep in class;
- Misuses alcohol and other drugs;
- States there is no caretaker.

### Parent's Behavioral Indicators

- Misuses alcohol or other drugs;
- Has disorganized or upsetting home life;
- Is apathetic, feels nothing will change;
- Is isolated from friends, relatives, neighbors;
- Cannot be found;
- Has history of neglect as a child;
- Exposes child to unsafe living conditions;
- Evidences limited intellectual capacity.
- Has long-term chronic illness;

## Emotional Maltreatment

### Child's Physical Indicators

- Conduct disorders (fighting in school, anti-social, destructive);
- Habit disorders (rocking, biting, sucking fingers);
- Neurotic disorders (speech, sleep, inhibition of play);
- Psycho-neurotic reactions (phobias, hysterical reactions, compulsion, hypochondria);
- Lags in physical development;
- Failure to thrive.

### Child's Behavioral Indicators

- Overly adaptive behavior (inappropriately adult or infantile);
- Developmental delays (mental, emotional);
- Extremes in behavior (compliant, passive, aggressive, demanding);
- Suicide attempts or gestures, self-mutilation.

### Parent's Behavioral Indicators

- Treats children in family unequally;
- Doesn't seem to care much about child's problems;
- Blames or belittles child;
- Is cold and rejecting;
- Inconsistent behavior towards child.



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## Sexual Abuse

### Child's Physical Indicators

- Difficulty in walking or sitting;
- Torn, stained or bloody underclothing;
- Pain or itching in genital area;
- Pregnancy, especially in early adolescent years.
- Bruises or bleeding in external genitalia;
- Sexually transmitted disease (especially in pre-adolescent age group, includes oral venereal infections).

### Child's Behavioral Indicators

- Unwilling to change for gym to participate in physical education class;
- Withdrawal, fantasy or infantile behavior;
- Bizarre sophisticated or unusual sexual behavior or knowledge;
- Self injurious behavior: suicide attempts;
- Poor peer relationships;
- Aggressive or disruptive behavior, delinquency, running away, or school truancy;
- Reports sexual assault by caretaker;
- Exaggerated fear of closeness or physical contact.

### Parent's Behavioral Indicators

- Very protective or jealous of child;
- Encourages child to engage in prostitution or sexual acts in the presence of the caretaker;
- Misuses alcohol or other drugs;
- Is geographically isolated and/or lacking in social and emotional contacts outside the family;
- Has low self-esteem.



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### Talking with Children

#### **Do:**

- Find a private place.
- Remain calm.
- Be honest, open and up front with the child.
- Remain supportive: Be an advocate.
- Listen to the child.
- Stress that it's not the child's fault.
- Report the situation immediately.

#### **Don't:**

- Overreact.
- Make judgments.
- Make promises.
- Interrogate child or try to investigate.
- This is especially important in sexual abuse cases.



# Mandated Reporter Training: Identifying and Reporting Child Abuse and Maltreatment/Neglect

## Reasonable Cause to Suspect

Certainty or proof is not required before reporting suspected child abuse or neglect. The law purposely requires only “reasonable cause to suspect” that a child is abused or maltreated.

A reasonable cause to suspect means that **based on what you have observed or been told, combined with your training and experience**, you feel **the harm or imminent danger of harm to the child could be the result of act or omission by the person legally responsible for the child**. Explanations that are inconsistent with your observations and/or knowledge may be a basis for your reasonable suspicion.

## Information for an Oral Report

At the time of the oral report, the Child Protective Services (CPS) specialist will request the following information:

- The names and addresses of the child and his/her parents or other person legally responsible for care.
- Location of the child at the time of the report.
- The child’s age, gender and ethnicity
- The nature and extent of the child’s injuries, abuse or maltreatment, including information on prior injuries, abuse or maltreatment to child or siblings.
- What is the effect on the child? The names of the person(s) you suspect are responsible for causing the injury, abuse or maltreatment.
- Family composition
- The source of the report
- The person making the report and contact information.
- The actions taken by the reporting source such as photographs, x-rays, removal or keeping of the child, or notifying the medical examiner or coroner.
- Are there any special needs?
  - Medications
  - Disabilities
  - Interpreter
  - Medications
- Are there any personal safety issues for CPS (weapons, dogs, etc).

A reporter is not required to know all of the above information in making a report; therefore, lack of complete information does not prohibit a person from reporting. However, an address is crucial. Persons should report each and all incidents of child abuse or maltreatment.

## Mandated Reporter SCR Telephone Number

**1-800-635-1522**

**Use this number when reporting suspicion within your professional capacity.**

**Non-Mandated SCR Telephone Number 1-800-343-3720**

**Use this number when reporting suspicion outside your professional capacity.**

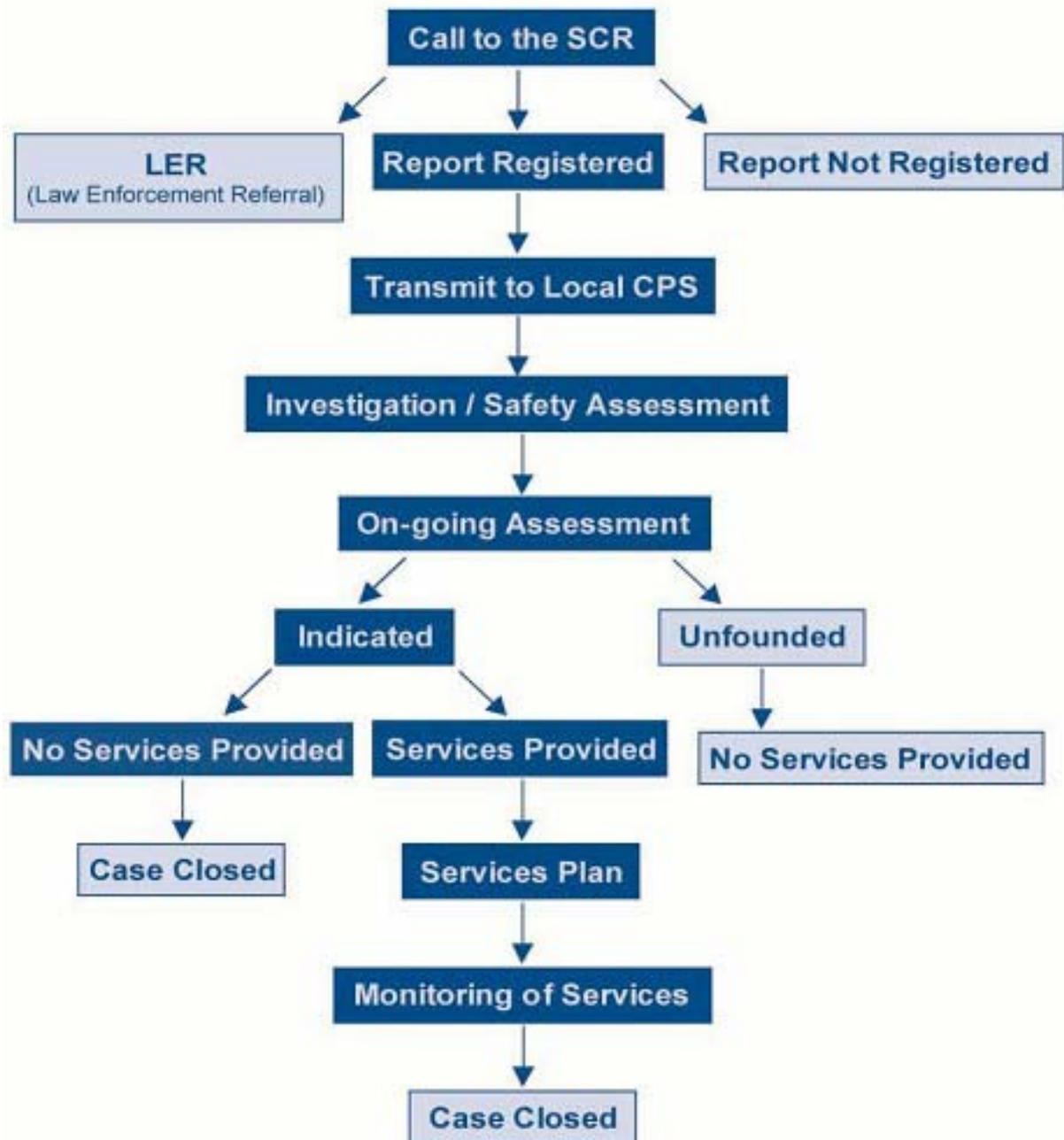
Monroe County may call: 1-585-461-5690

Onondaga County may call: 1-315-422-9701

**Form LDSS 2221-A must be submitted within 48 hours to the appropriate local Child Protective Services.**



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## Abandoned Infant Protection Act

The Abandoned Infant Protection Act is part of New York State's efforts to stop people from abandoning newborns in unsafe and dangerous places. Each year newborn children are found in public places where they have been left - abandoned - with no plan and no one to care for them.

The Abandoned Infant Protection Act (AIPA) created an affirmative defense to the criminal charges of abandonment of a Child and Endangering the Welfare of a Child. In short, an affirmative defense means that a person accused of a crime *did* not commit the criminal act but will not suffer a conviction so long as the elements of the affirmative defense are met. Under AIPA the elements of the affirmative defense are:

- 1) The abandoned infant can be no more than 5 days old.
- 2) The person abandoning the infant must have intended the child be safe and well cared for. They cannot have intended the child any harm.
- 3) The infant must be left with an appropriate or suitable location. Should the infant be left in a suitable location, an appropriate person must be notified immediately of the child's location so the child can be taken into custody and cared for.

Neither the term "suitable location" nor "appropriate person" is defined by law. However, district attorneys have stated that hospitals, police stations and fire stations could be suitable locations if they are open and staff is present. Appropriate persons would be employees of the suitable location that are trained to deal with emergency situations. At a hospital, a Doctor, Nurse or Emergency Room personnel would be suitable. Any on-duty police officer at a police station or fire-persons or EMT's at a fire station would also be appropriate.

It is important to know that AIPA **does not affect your responsibilities as a mandated reporter** of suspected child abuse or maltreatment. AIPA does not amend the law in regard to mandated reporters and does not in any way change or lessen the responsibilities of mandated reporters. **Any mandated reporter who learns of abandonment is still obligated to fulfill their mandated reporter responsibilities.** Even if you are unsure of the name of the person who abandoned a child, the reporter must nevertheless make a report. The unknown parties will be listed, as "unknown" but the mandated reporter will still have fulfilled his/her legal responsibility.

It is also important to be aware that AIPA does not change the laws pertaining to child abuse or maltreatment in either the Social Services Law or the Family Court Act. Persons who abandon infants under AIPA will still be indicated as subjects of child maltreatment reports and may still have petitions for child neglect brought against them in family court.

If you have any questions, please call the AIPA Informational Hotline operated by the New York State Office of Children and Family Services (OCFS) at 1-866-505-SAFE. Alternatively, you may contact the OCFS Public Information Office at (518) 473-7793.



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## Evaluating Your Response

*Please evaluate the following cases and rate them by category:*

- Category A** This should be left to the family.
- Category B** Assistance to seek community agency or resource as appropriate.
- Category C** Report to the State Central Register (SCR)
- Category D** Call the police immediately.

**Case 1** Mrs. Pitt has two daughters ages 1 and 4. The children suffer from impetigo, a contagious skin disease. Mrs. Pitt has not kept clinic appointments nor carried out the doctor's instructions.

**Case 2** The Ross family has one child, a girl of 5. The mother takes good care of her, but is extremely worried the child will contract a disease. As a result, she doesn't allow her daughter to socialize with other children.

**Case 3** You make a follow-up home visit. Upon your arrival, you find 12 year old Rasheem home with five younger siblings and things are chaotic and out of control. Rasheem has no idea where his mother is or when she will return.

**Case 4** Mrs. Young is a divorced woman with three children under school age. She is fond of her children and gives them good physical care. She is sexually promiscuous, however, and often has men staying overnight at her apartment.



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## Mandated Reporter Quiz

1. A mandated reporter is required to make an oral report of suspected child abuse or maltreatment/neglect immediately and submit a written report (LDSS 2221-A) within seventy-two hours. T F
2. A mandated reporter should have clear and sufficient evidence before reporting any allegations of abuse or maltreatment/neglect. T F
3. In New York State, a maltreated child is under the age of sixteen, while an abused child is anyone under the age of eighteen. T F
4. Any social worker may take a child into protective custody. T F
5. If a child discloses sexual abuse, be sure to interview the child thoroughly to obtain a detailed and complete assessment. T F
6. If you have notified the person designated to report in your agency and you learn a call was not made to the SCR, your obligation as a mandated reporter has been fulfilled. T F
7. A mandated reporter would be liable only if the original report was later considered unfounded. T F
8. If a mandated reporter has a reasonable cause to suspect that a child is being maltreated/neglect and fails to report, this would be considered a class A misdemeanor . T F
9. When a mandated reporter makes a report to the New York State Central Register, every effort is made to maintain the confidentiality of the reporter and/or the source of the report. T F
10. Mandated reporters are required to inform the parents of the child that a suspected child abuse or maltreatment/neglect report is being made. T F

**This is to certify that**

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**Participated in**

**Mandated Reporter Training for  
Public and Private Social Services Staff**

**Presented by**

**New York State Office Children and Family Services**

**This 2 hour training can be used to fulfill training requirements**

**M**andated  
**R**eporter



# **This Information is provided on the NYC Administration for Children's Services (ACS) Web Site:**

**<http://www.ci.nyc.ny.us/html/acs>**

## **ACS Main Office**

Call 1-877-KIDSNYC (543-7692)  
Outside NYC: 212-341-0900

150 William Street 18th Floor,  
New York, NY 10038

### Prevent Child Abuse and Neglect

ACS works with a network of neighborhood-based service providers to offer children and families throughout the city support within their own community. These services include:

- Community-based preventive services, such as crisis intervention, individual and family counseling, parenting skills training and referrals to public assistance, day care and other subsidized programs.
- Family Preservation Program – Provides six- to eight-week crisis intervention and family preservation services through specially trained workers who work with only two families at a time. Volunteer mentors work with the family intensively for up to 20 hours a week to provide further support.
- Family Rehabilitation Program – Serves families in which a parental substance abuse problem exists; family must have at least one child under six years old.
- Respite Care Programs – Provide families with brief and temporary care for children from birth to 17 years of age for 24 hours and up to 30 consecutive days. Respite care is provided in the homes of specially trained, certified foster parents who provide short-term care for children who remain in the custody of their parents or legal guardians.

### How You Can Help

Studies have shown that neighbors can reduce violence and crime in a community simply by increasing their awareness and working together. Similarly, neighbors can help stop child abuse and neglect.

Here are some things you can do to make children and families safe and secure in your neighborhood:

**Understand** the causes and effects of abuse and neglect. If you know a parent who is under stress, encourage them to seek help. To locate a parenting program that can provide guidance and support, call the Prevention Information and Parent Helpline at 1-800-342-7472.

**Learn** to identify the warning signs of child abuse and neglect. Abuse can include physical, emotional, and sexual abuse. Neglect is the failure by a caretaker to provide a child with adequate food, clothing, shelter, medical care, supervision, or emotional support.

**Report** any known or suspected case that you observe. Reporting abuse can protect children from further harm and help a family address its problems. All reports are confidential and may be made anonymously.

## **Neighborhood Based Services**

ACS's Neighborhood Based Services unit oversees the agency's efforts to create a strong safety net for every child and family in New York City by providing culturally, linguistically and need-driven services within their own community. The unit works to ensure that families can access programs and services available through all divisions of ACS and its partners in the child welfare community. The unit also collaborates with community service providers and stakeholders in 25 Neighborhood Networks.

### **What are Neighborhood Based Services?**

ACS believes that safety and permanency for children and families is best served through a neighborhood-based approach that seeks to provide every child and family with culturally, linguistically and need-driven services within their own communities.

Neighborhood Based Services are key to ACS's reform efforts, which began with the agency's formation in 1996. Following this strategy, ACS works to:

- provide preventive services at the community level to make them more accessible to families in all neighborhoods;
- recruit and retain strong, nurturing foster and adoptive families within all neighborhoods, especially those within the city's 18 highest needs community districts;
- place children in foster care within their own community so that they may stay in contact with their own schools, friends, relatives, and neighbors; and
- identify and coordinate the delivery of neighborhood-based resources that can and do provide effective services (including medical, mental-health, and substance-abuse) to children and families.

As part of its Neighborhood Based Services strategy, ACS realigned its service divisions by community district to deliver preventive, protective, case management and administrative, childcare and Head Start services at the neighborhood level.

To learn more, call ACS's Division of Neighborhood Based Services (NBS) at 212-341-3060 and ask for a copy of the *Parents' Guide to New York State Child Welfare*

*Laws.* NBS can also send a representative to speak in your community about child abuse and neglect.

## **Neighborhood Networks**

ACS has established 25 Neighborhood Networks to serve as a cornerstone of the Neighborhood Based Services strategy. A Neighborhood Network is a collaboration among community-based ACS staff, ACS contract agencies assigned to specific community districts, other local service providers and community stakeholders. Each Network is designed to improve the well being of children and families in the child welfare system and reduce the use of foster care services in their community. Neighborhood Networks provide a forum to form local partnerships to share resources, ideas and referrals. Neighborhood Network participants also engage in joint planning, training and advocacy.

To find out more about a Neighborhood Network in your community, please call:

### **BRONX:**

Francis Ayuso 1-212-227-6501

### **Brooklyn:**

Nigel Nathaniel 1-212-341-2913

### **Manhattan:**

Gladys Screen 1-212-341-2910

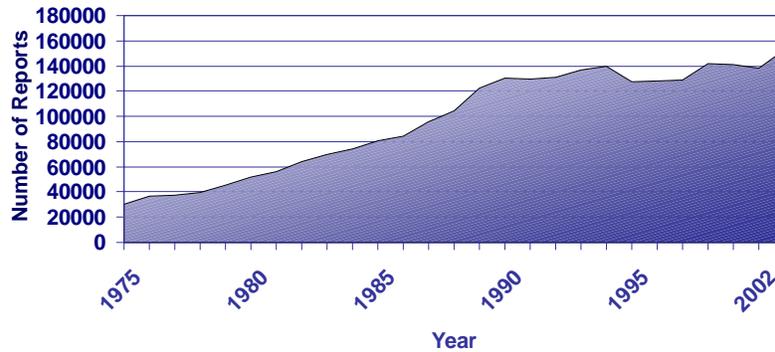
### **Queens:**

Elisabeth Jackson 1-212-341-2909

### **Staten Island:**

Laura White-Haynes 1-212-227-6376

# SCR Reports Registered By Year



# Child Protective Services Act of 1973

Mandated Reporter

Local Child Protective Services



State Central Register

## Role of Mandated Reporter

**To report suspected incidents of child abuse and maltreatment / neglect while acting in their official capacity**

## Legal Framework

- Immunity
- Confidentiality
- Penalties

## Abuse

- **Inflicts or allows to be inflicted serious injury**
- **Creates or allows to be created substantial risk of injury**
- **Commits or allows to be committed a sex offense**

## Maltreatment/Neglect

- **A child whose physical, mental, or emotional condition has been impaired**
- **A parent or custodian's failure to provide a minimum degree of care**

## Types of Neglect

Fails to provide:

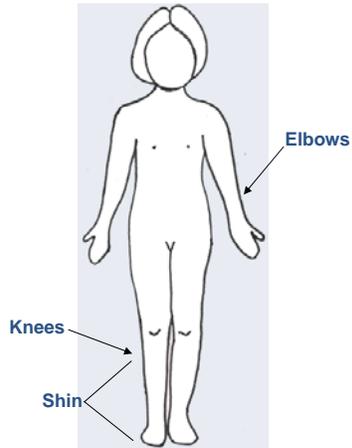
- **Adequate food, clothing, shelter, education, and medical care**
- **Proper supervision**

OR

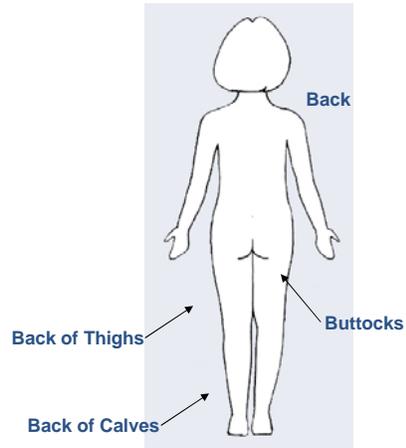
- **Inflicts/allows to be inflicted harm including the infliction of excessive corporal punishment**
- **Misuses alcohol or other drugs**
- **Abandonment**

## Normal and Suspicious Bruising Areas

Normal Bruising Areas



Suspicious Bruising Areas



## Handprint Injury



## Looped Cord Injury



## Steam Iron Injury



## Talking with Children

- **Find a private place to talk**
- **Remain calm**
- **Listen to the child**
- **Be honest, open, up-front, supportive**

## Talking with Children

- **Don't make judgments or promises**
- **Report the situation immediately**

## Evaluating Your Response

**Category A: This should be left to the family**

**Category B: Assistance to seek community agency or resource as appropriate**

**Category C: Report to the State Central Register (SCR)**

**Category D: Call the Police Immediately**

## Making the Call

**New York State Child Abuse and  
Maltreatment Register**

**1-800-635-1522**

**Mandated Reporter Express Line**

## New York State Child Protective Services System



## New York State Child Protective Services System



# Following up the Call

- Within 48 hours
- To local CPS

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**  
List all children in household, adults responsible and alleged subjects.

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.
	( ) - -
	( ) - -
	( ) - -

# Following up the Call

- Within 48 hours
- To local CPS

**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

# Following up the Call

- Within 48 hours
- To local CPS

CONFIDENTIAL		SOURCE(S) OF REPORT		CONFIDENTIAL	
NAME	TELEPHONE ( ) -	NAME	TELEPHONE ( ) -		
ADDRESS			ADDRESS		
AGENCY/INSTITUTION			AGENCY/INSTITUTION		
RELATIONSHIP ( ✓ = REPORTER, X = SOURCE)					
<input type="checkbox"/> Med. Exam/Coroner <input type="checkbox"/> Physician <input type="checkbox"/> Hosp. Staff <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Neighbor <input type="checkbox"/> Relative <input type="checkbox"/> Instt. Staff <input type="checkbox"/> Social Services <input type="checkbox"/> Public Health <input type="checkbox"/> Mental Health <input type="checkbox"/> School Staff <input type="checkbox"/> Other Specify)					
For Use By Physicians		Medical Diagnosis on Child		Signature of Physician who examined/treated child	
				X	
		Hospitalization Required:		Telephone No. ( ) -	
		<input type="checkbox"/> None <input type="checkbox"/> Under 1 week <input type="checkbox"/> 1-2 weeks <input type="checkbox"/> Over 2 weeks			
Actions Taken Or		About To Be Taken			
<input type="checkbox"/> Medical Exam <input type="checkbox"/> X-Ray <input type="checkbox"/> Removal/Keeping <input type="checkbox"/> Not Med Exam/Coroner		<input type="checkbox"/> Photographs <input type="checkbox"/> Hospitalization <input type="checkbox"/> Returning Home <input type="checkbox"/> Notified DA			
Signature of Person Making This Report			Title		Date Submitted Mo. Day Yr.

<http://www.dfa.state.ny.us/ohrd/MRCertification/>

The screenshot shows a web browser window with the URL <http://www.dfa.state.ny.us/ohrd/MRCertification/>. The page header includes the New York State logo and navigation links for Governor Paterson, map-NY, e-SUNYS, and Citizens Guide. The main heading is "Office of Children & Family Services Bureau of Training - Mandated Reporter Certification Request". Below the heading, it says "Fill out the form below and click 'Submit'." and "ALL FIELDS ARE REQUIRED". The form fields are: Name (Max. 36 chars), SSN (E-666128888), DOB (Format MMDDYY), Profession Code (Default from Below, dropdown menu showing "Teacher"), License # (Max. 6 chars), License State (2 Letter Abbr., dropdown menu showing "NY"), Date Attended (Format MMDDYY, dropdown menu showing "9/2/03"), Address Line 1 (Max. 21 chars), Address Line 2 (Max. 21 chars), Address Line 3 (Max. 21 chars), City (Max. 19 chars), Zip (Max. 9 chars), and Email (Max. 100 chars). A "Submit" button is located at the bottom of the form.

## To Evaluate Online (Internet): <http://www.dfa.state.ny.us>



## To Evaluate Online (Intranet): <http://sdssnet5/>

