Mandated Reporter: Quick Guide

Summerville Catholic School, South Carolina

| Indicators of Maltreatment | Signs of Physical Abuse |
|---|--|
| Child: | Child: |
| Shows sudden changes in behavior or school performanceHas not received help for | Has unexplained burns, bites, bruises, broken bones, or black eyes |
| physical or medical problems brought to the parents attention | ☐ Has injuries that mirror the shape of an object |
| Is always watchful, as though preparing for something bad to happen | Has bruises in various stages of healing, or on different body planes |
| Is overly compliant, passive, or withdrawn | Has bruises on the fleshy parts of the body |
| ☐ Comes to school or other activities early, stays late, or does | ☐ Has fading injuries after an absence from school |
| not want to go home Parent: | ☐ Attempts to hide injuries |
| Shows little concern for the child | ☐ Seems frightened of the parents |
| ☐ Treats one child differently from | and does not want to go home ☐ Shrinks at the approach of adults |
| siblings | Reports injury by a parent or |
| ☐ Denies the existence of – or | guardian |
| blames the child for – the child's | Parent: |
| problems ☐ Asks teachers or other caretakers to use | Offers conflicting, unconvincing, or no explanation for the child's injuries |
| harsh physical discipline if child misbehaves | Does not seek medical care when needed for the child's |
| Sees the child as entirely bad, | injuries |
| worthless, or burdensome | Describes the child in a very |
| ☐ Demands a level of physical or | negative way |
| academic performance the child cannot achieve | Uses harsh physical discipline with the child |
| Looks primarily to the child for care, attention, and satisfaction of emotional needs | ☐ Has a history of abuse as a child |

| <u>Signs</u> | s of Neglect | Signs of Sexual Abuse |
|--------------|------------------------------------|---|
| Child: | | Child: |
| | Is frequently absent from or late | ☐ Reports sexual abuse |
| | to school | Has difficulty walking or sitting |
| | Is always hungry; begs or steals | Refuses to change for P.E. or |
| | food or money | participate in activities |
| | Is constantly tired | Reports nightmares or |
| | Has slow physical development | bedwetting |
| | or is underweight | Experiences a sudden change in |
| | Lacks needed routine or urgent | appetite or weight |
| | medical or dental care | Has a sudden change in grades |
| | Has poor hygiene; is consistently | ☐ Appears withdrawn or depressed |
| | dirty and has a body odor | Demonstrates unusual sexual |
| | Lacks appropriate clothing for the | knowledge or behavior |
| | weather | ☐ Becomes pregnant or contracts a |
| | Abuses alcohol or other drugs | sexually transmitted disease, |
| | States that there is no one at | particularly if under 14 |
| | home to provide care or | Runs away from home |
| _ | supervision | Parent: |
| Paren | | Is unduly protective of the child or |
| | Appears to be indifferent to the | severely limits the child's contact |
| _ | child | with other children, especially of |
| | Seems apathetic or depressed | the opposite sex |
| | Behaves irrationally or in a | |
| _ | bizarre manner | |
| | Is abusing alcohol or drugs | |
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| <u>Signs of Mental Injury</u> | NOTES: | |
|---|--------------|---|
| Child: | | |
| Shows extremes in behavior, such as overly compliant or | | _ |
| demanding behavior, extreme | | _ |
| passivity, or aggression | | _ |
| ☐ Is either inappropriately adult | | |
| (e.g., parenting other children) or | | |
| inappropriately infantile (e.g., | | _ |
| rocking or head-banging) | | — |
| Has attempted suicide or engaged in self-harm | Ш | — |
| ☐ Exhibits a lack of attachment to | | _ |
| parents | | _ |
| Parent: | | _ |
| ☐ Constantly blames, belittles, or | | _ |
| berates the child | | _ |
| ☐ Is unconcerned about the child | | _ |
| and refuses to consider offers of | | _ |
| help for the child's problems | , | _ |
| ☐ Overtly rejects the child | | |
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Steps for Reporters:

1) Create a safe environment

- a) Students have a right to feel safe in school. Safe environments will allow reporters to protect children.
- b) OR send the child to another trusted adult that can provide a safe environment such as the counselor.

2) Listen to the Child

- a) Do not probe for details. Do not attempt to investigate.
- b) Do not indicate doubt, disbelief, shock or anger towards the child or possible perpetrator. The child usually loves the perpetrator.
- c) You may take photos of visible trauma but child cannot remove clothing.

3) Tell the Child what you will do

- a) (e.g., that you are going to contact DSS and a caseworker will come to talk with the child).
- b) Do not give the child false assurances or promise that you will keep the information confidential.

4) Documentation (See example below)

- a) Document the basis of your concerns, including physical and behavioral signs.
- b) Document the child's statements to you. Try to use the child's exact words.
- c) Document the child's demeanor while talking with you. Note any signs of fear or distress.
- d) If you make the report orally, record the date, time, and the person and agency you contacted. If you make the report in writing, keep a copy of the correspondence.
- e) Be aware that your records concerning the report may be subject to subpoena. Do not put your personal opinion or feelings.

5) Inform

- a) Inform School Principal, Vice Principal, or School Counselor of what the student reported. School Administration will support you in reporting if necessary.
- b) School Counselor can assist you in making actual report to DSS

6) Making the Report

- a) Make the report as soon as possible
- b) You must personally make the report. You cannot delegate this to someone else.
- c) You do not need to have conclusive proof. The law requires you to report when you have "reason to believe" a child is being or may be abused or neglected.

PHONE CALL:

Calling is much more effective than making an online report.

- d) DSS will need this info: (Have RenWeb/FACTS open).
 - i) Child's name, age, birthdate, address
 - ii) Parent's name, address, all phone numbers
 - iii) Sibling's names, age, birthdate
 - iv) Any other individuals that live in the home.
 - v) SCS's address and phone number.
- e) Explain why you are concerned about the child when making the report
 - i) Use your documentation
 - ii) Although reports can be made anonymously, it is often helpful to provide your name and telephone number in the event that further information is needed.
- f) At the time the report is made, you can request to be notified of the outcome of the investigation.
- g) After you have made a report, if you learn new information or additional information, report it to DSS or law enforcement.

Contact with Parents

- In general, it is best not to contact the child's parents about your suspicions before making the report.
- Informing parents before the appropriate intervention can be made may lead to retribution against the child or destruction of evidence.
- Never accuse a parent of abuse or neglect.

Documentation Example:

06/05/2081 Student X, 7th grade.

Student approached this counselor in her office on 06/05/2081 at 11am. Student's appearance appeared to be within normal limits. Students' mood and facial expressions appeared to be down and hesitant throughout this meeting. When student was asked how her day was going, student replied "okay". Student reported that "things are stressful at home". This counselor asked student if she would like to share more about this. Student reported that her "dad has been gone for 3 days". Student expressed that she and her mom "don't know where he is". Student reported that her mom and dad "fight a lot". Student described that fighting includes "yelling", parents "throwing" items at each other, and are often "drunk". Student described that her mom and dad will "drink a lot", especially mom when "dad leaves". Student described that her mom "can be really nice" to her or "really mean". Student reported that she is "scared" to go home because she "doesn't know what home will be like". When asked if she feels safe going home today, student reported "I don't know" and appeared to shrug.

This counselor reported the above information to the school Principal. School Principal advised this counselor to report to DSS.

12:15pm- This counselor made a call to DSS and reported the above. DSS reported that they will "report to supervisor" and give the counselor a call back with a decision of further action.

2pm: DSS called this counselor back to inform her that DSS personnel will be coming to the school today to speak with the student.

Personal NOTES:

- Student appears to have a good rapport and trust with this counselor.
- No past reports of this.
- Child has frequent tardiness and 8 unexcused absences