

YOU are a mandated reporter.

The Michigan Child Protection Law requires that certain persons report any case of suspected child abuse or child neglect to the Michigan Department of Human Services (DHS). The definition of mandated reporter includes ***physicians***.



Why this is your responsibility

Physicians play an important role in the lives of children. You are in a unique position to observe and interact with children. You see changes in children that may indicate abuse or neglect. Because of this special relationship, you may learn information that suggests a child is being abused or neglected.

Once you file a report, the child and family may become eligible to receive a wide variety of services that will improve the family's ability to care for the child. The family may be provided parenting classes, counseling, treatment for substance abuse, medical services, anger management education and other services designed to meet the family's specific needs.

The legal standard for reporting

The Michigan Child Protection Law requires you to file a report when you have **reasonable cause** to suspect abuse or neglect. This is an extremely low legal standard. This pamphlet describes some signs of abuse and neglect. However, you must keep in mind that you **are not** required to determine whether abuse or neglect **has actually occurred**. DHS is responsible for investigating reports of suspected abuse and neglect and for determining how each case progresses. You must make a report whenever you **suspect** that abuse or neglect **may have occurred**.

Your liability for failure to report

If you fail to file a report of suspected abuse or neglect, you will be subject to both civil and criminal liability. In a civil action you may be held liable for **damages that any person suffers** due to your failure to file a report. In a criminal action, you may be found guilty of a **misdemeanor punishable by imprisonment for up to 93 days and a fine of \$500**.

Notifying a hospital administrator **DOES NOT** satisfy your legal obligation to file a report with DHS.

There are NO excuses for failing to report

You may believe that filing a report will not lead to any benefit to the child involved. You may believe that filing a report may actually place the child at an increased risk of abuse or neglect. You may feel uncertain that abuse or neglect has actually occurred. Such concerns of any nature **DO NOT** discharge your legal obligation to file a report. Such concerns **WILL NOT** protect you from liability for failing to report.

You CANNOT be “punished” for filing a report

When you file a report in good faith, you cannot be held liable to any person for any damages they may suffer. You are immune from any criminal and civil liability that could otherwise result. **When you file a report, you are PRESUMED to have acted in good faith.** A person suggesting false reporting would have the burden of proving that you made a report for some reason unrelated to the well-being of the child who was the subject of your report. This burden could not be met if you filed a report due to your concern for a child’s well-being.

Further, you cannot be penalized for making a report required by the Child Protection Law or for cooperating in an investigation.

Your identity must be kept confidential

When you file a report with DHS, your identity may not be shared with any person unless you agree to that disclosure or a judge orders such disclosure. Your identity may be disclosed to a child protective agency, a law enforcement agency that is investigating the alleged abuse or neglect, or the Children’s Ombudsman. Any concern that a parent may discover or learn your identity **DOES NOT** discharge your obligation to file a report.



What constitutes child abuse or neglect?

The definitions of child abuse and neglect below may be a challenge to apply to a particular circumstance. Most importantly, keep in mind that you are not required to determine whether these legal standards are met. If you suspect that circumstances in your situation may constitute abuse or neglect, then you **MUST** file a report with DHS.

The following list of common indicators of abuse and neglect **IS NOT** exhaustive. Use common sense, and always err on the side of caution by filing a report when in doubt.

Physical abuse. Harm or threatened harm to a child through non-accidental injury by a person responsible for the child's health or welfare. Examples of physical abuse include beating, kicking, punching, and burning.

Common indicators of physical abuse

- Pattern bruises or scars
- Symmetric immersion burns
- Pattern contact burns
- Bruises or burns on a non-ambulating infant
- Multiple injuries in different stage of healing
- Bruises on earlobes
- Subdural hemorrhage
- Liver or kidney laceration
- Pancreatic injury
- Scapular fractures
- Posterior rib fractures
- Fractures of different ages
- Bite marks

Neglect. Harm or threatened harm to a child's health or welfare that occurs through either failure to provide adequate food, clothing, shelter, or medical care or placing a child at unreasonable risk to the child's health or welfare by failure to intervene to eliminate that risk when the person is able to do so and has or should have knowledge of the risk.

Common indicators of neglect

- Persistent hunger
- Stealing or hoarding food
- Abrupt, dramatic weight change
- Persistent poor hygiene
- Recurring untreated medical issues
- Ongoing lack of supervision
- Consistently inappropriate dress
- Excessive school absences

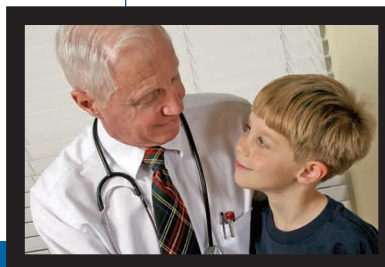
Sexual abuse and sexual exploitation.

Engaging in sexual contact or sexual penetration with a child (as defined in the criminal code) constitutes sexual abuse. Sexual exploitation is defined as allowing, permitting, or encouraging a child to engage in prostitution or to be depicted in a sexual act (as defined in the penal code).

Common indicators of sexual abuse and sexual exploitation

- Age-inappropriate knowledge of sexual behavior
- Sexually explicit drawings and behavior
- Unexplained fear of a person or place
- Unexplained itching, pain, bruising or bleeding in the genital area
- Age-inappropriate seductive behavior
- Pregnancy
- Venereal disease, frequent urinary or yeast infections
- Laceration of the hymen, missing segment of hymenal tissue
- Perianal lacerations extending deep to the external sphincter
- Laceration or bruising of labia, penis, scrotum, perianal tissues or perineum

Maltreatment. Treatment of a child that involves cruelty or suffering that a reasonable person would recognize as excessive. Examples include forcing a child to eat dog food as punishment, locking a child in a closet, or teaching a child to assist in criminal activities.





How to make a report

Upon suspecting child abuse/neglect, you must **both** report to DHS and to the person in charge of the facility in which you work. DHS may be prohibited from discussing the details of any investigation stemming from your report. You should receive a very general letter, stating whether or not the case was assigned for investigation or the results of an investigation. You should have at least one contact with the assigned Children's Protective Services worker. Do not assume a lack of "follow-up" with you indicates nothing was accomplished. Although DHS may be unable to share with you details about an ongoing investigation, you should continue to report any new concerns that might arise after your initial report.

Step 1: Oral report

You must **immediately** make, by telephone or face-to-face, an oral report of the suspected child abuse and neglect to DHS, followed by a written report. (DHS contact information and written requirements are provided in this pamphlet). You should be prepared to provide, if known, the following information when making a verbal Children's Protective Services report:

- Child's current address as well as past addresses if known and the address where the alleged incident happened if different.
- If the alleged perpetrator lives with the child.
- Alleged victim's full name, birth date, and race.
- Alleged perpetrator's full name. If known, provide the relationship of the perpetrator to the child.
- Statements of the child's disclosure and context of the disclosure. For example, was the child asked about the injury, or did they volunteer the information?
- History of the child's behavior and patterns of attendance may be helpful to the investigation.
- Why you think the child is being abused, neglected, and/or maltreated.

Be sure to document the log number for your records (provided by the Protective Services intake worker).

You SHOULD NOT attempt to investigate the matter yourself. Investigation and appropriate action are the responsibility of Children's Protective Services, a division of the Michigan Department of Human Services, the state agency responsible for child welfare.

Step 2: Follow-up written report

Within 72 hours after making the oral report, the reporting person shall file a written report with the DHS office in the county where the child is found or resides. The report must be mailed or otherwise transmitted to this DHS office. The local county DHS office can be found through the statewide DHS hotline or DHS Web site, both listed in this pamphlet. The 72-hour period includes weekends and holidays.

For the written report, DHS encourages reporters to use its Form DHS-3200, which includes all the information required under the law. You should complete form items 1-21. One report from an agency will be considered adequate to meet the law's reporting requirement. Keep a copy for your own records. Do not place a copy in the patient's record.

Step 3: Reporting obligations to person in charge of facility

You must notify the person in charge of your facility of the suspected abuse/neglect that the report has been made with DHS. You must provide the person in charge with a copy of the written report.

Note: Reporting the suspected allegations of child abuse/neglect to the person in charge of your agency does not fulfill your mandated requirement to report directly to DHS.

Reference and contact numbers

The Department of Human Services (DHS) statewide number is **1-800-942-4357**. Personnel staffing the statewide DHS number will connect the mandated reporter to the local DHS office for purposes of reporting the suspected or actual child abuse/neglect directly to the local DHS office for investigation.

DHS-3200 Form can be requested from the local DHS office and can be accessed at: www.michigan.gov/dhs or www.michigan.gov/documents/FIA3200_11924_7.pdf

Local county DHS offices can be accessed through the DHS Web site at: www.michigan.gov/dhs

If a mandated reporter is dissatisfied with the response of the county DHS, he or she may call the **Mandated Reporter Hotline at 1-877-277-2585**.

Childhelp USA, National Child Abuse Hotline 1-800-4-A-Child (1-800-412-4453)

Childhelp hotline is staffed 24 hours a day, seven days a week, by professional crisis counselors who have access to a database of emergency, social service, and support resources.

Michigan Office of Children's Ombudsman is charged with the oversight of Children's Protective Services, adoption and foster care services.
1-800-642-4326

Child Pornography Tipline
1-800-843-5678

Common Ground Crisis Line
1-800-231-1127
248-456-0909

Listening Ear Crisis Hotline
517-337-1717

Michigan Assault Hotline
1-800-NO-MEANS-NO

Michigan Parent Help Line
1-800-942-4357

National hotlines and helplines

National Domestic Violence/Abuse Hotline
1-800-799-SAFE
1-800-787-3224 TDD

National Runaway Switchboard
1-800-RUNAWAY
1-800-786-2929

National Suicide Hotline
1-800-SUICIDE
1-800-784-2433

No Abuse Helpline
1-800-996-6228

Rape, Abuse, and Incest National Network (RAINN)
1-800-656-HOPE

RAPLine (Michigan Runaway Assistance Program)
1-800-292-4517

School Violence Hotline
1-800-815-TIPS





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