

PERSONNEL REPORTING CHILD ABUSE AND NEGLECT

The Board of Education recognizes the obligation and importance of reporting suspected child abuse and neglect. Many of the school district's employees are considered mandated reporters and have an independent duty under state law to report suspected abuse and neglect to the Department of Children and Families ("DCF") or other law enforcement agencies. Regardless of an employee's status as a mandated reporter, ALL employees of the school district are required to report suspected child abuse or neglect in accordance with this policy and applicable law.

Definitions

For the purposes of this policy, the following definitions shall apply:

"Abused" refers to a child who (a) has had physical injury or injuries inflicted upon him/her other than by accidental means, or (b) has injuries which are at variance with the history given of them, or (c) is in a condition which is the result of maltreatment such as, but not limited to, malnutrition, sexual molestation or exploitation, deprivation of necessities, emotional maltreatment or cruel punishment;

"Neglected" refers to a child who (a) has been abandoned; (b) is being denied proper care and attention, physically, educationally, emotionally, or morally; or (c) is being permitted to live under conditions, circumstances, or associations injurious to the child's well-being;

"Mandated reporters" are teachers, substitute teachers, administrators, superintendents, guidance counselors, psychologists, social workers, nurses, physicians, paraprofessionals, coaches **-or-** any other person who, in the performance of his or her duties, has regular contact with students and who provides services to or on behalf of students enrolled in the district.

Appendices A and B provide additional guidance regarding the operational definitions of child abuse and neglect, as well as the indicators of same according to DCF.

When to Report Abuse or Neglect

A report must be made whenever an employee, in the ordinary course of his or her employment, has reasonable cause to suspect or believe that a child under the age of 18 has been:

1. Abused or neglected (as defined above);
2. Has had non-accidental physical injury, or injury which is at variance with the history given of such injury, inflicted upon such child; or
3. Has been placed in imminent risk of serious harm.

Reporting Procedure for Mandated Reporters

Oral Report to DCF within 12 hours

Mandated reporters must make an oral report by telephone (24 Hour Careline, 1-800-842-2288) or in person to the Department of Children and Families, or an appropriate law enforcement agency, as soon as practicable but not later than twelve (12) hours after having acquired reasonable cause to suspect or believe that a child has been abused or neglected. The employee shall notify the Building Principal and Superintendent of Schools or designee immediately after the oral report has been made.

Written Report to DCF within 48 hours

Mandated reporters shall submit a written report to DCF within forty-eight (48) hours of making the oral report. The report shall be filed on form DCF-136 or other sufficient form provided by DCF. The reporter shall also provide a copy of the written report to the Building Principal and Superintendent of Schools, except when the Superintendent is the alleged perpetrator of the abuse or neglect. In making all written reports required under this policy, the reporter may use a form provided by DCF. Written reports of abuse or neglect by mandatory reporters shall include the following information, if known:

1. The names and addresses of the child and his or her parents or other person responsible for the child's care;
2. The age of the child;
3. The gender of the child;
4. The nature and extent of the child's injury or injuries, maltreatment or neglect;
5. The approximate date and time the injury or injuries, maltreatment or neglect occurred;
6. Information concerning any previous injuries to, maltreatment of or neglect to the child or his or her siblings;
7. The circumstances in which the injuries, maltreatment or neglect came to be known to the reporter;
8. The name of the person or persons suspected to be responsible for causing such injury or injuries, maltreatment or neglect;
9. The reasons such persons are suspected of causing such injury or injuries, maltreatment or neglect;
10. Any information concerning any prior cases in which such person or persons have been suspected of causing an injury, maltreatment or neglect of a child;
11. Whatever action, if any, was taken to treat, provide shelter or otherwise assist the child.

Cooperation with Investigation

A person reporting child abuse or neglect shall provide any person authorized to conduct an investigation of child abuse or neglect with all information related to the investigation that is in the possession or control of the person reporting the abuse or neglect, except as expressly prohibited by state or federal law.

Notwithstanding the provisions of Connecticut General Statutes §10-151c, upon request and for the

purposes of an investigation of suspected child abuse or neglect by a teacher employed by the board, the board shall provide the Commissioner of DCF any records maintained or kept on file about said teacher. Such records shall include, but not be limited to, supervisory records, reports of competence, personal character and efficiency maintained in such teacher's personnel file with reference to evaluation of performance as a professional employee of the board and records of personal misconduct. For the purpose of this requirement, "teacher" is defined as each certified professional employee below the rank of superintendent in a position requiring a certificate issued by the State Board of Education.

Reporting Procedure for Employees who are NOT Mandated Reporters

Employees of the school district who are not mandated reporters are required to report suspected abuse or neglect as soon as possible but not later than twelve (12) hours after the employee has reasonable cause to suspect that a child has been abused or neglected. Such reports shall be made in writing to the Superintendent of Schools and the building administrator who shall act in accordance with his or her obligations as a mandated reporter.

Nothing in the reporting procedure outlined by this policy prevents employees who are not mandated reporters from also reporting suspected abuse or neglect directly to DCF or a law enforcement agency.

Procedures When a School Employee is the Alleged Abuser

Notification of Parent or Guardian

Whenever there is a report that a student has been abused or neglected by a school employee, the Superintendent shall immediately notify the child's parent or other person responsible for the child's care that a report has been made.

Investigation by the Board of Education

The board of education shall permit and give priority to any investigation conducted by DCF or the appropriate law enforcement agency. The board may conduct its own investigation of the alleged abuse or neglect by a school employee provided that such investigation does not impede an investigation by DCF. The Superintendent of Schools shall conduct its investigation upon receipt of notice from the Commissioner of DCF or the appropriate law enforcement agency that the board's investigation will not interfere with the investigation of DCF or law enforcement.

When investigating an allegation of abuse or neglect by a school employee, the Superintendent or designee shall endeavor to obtain, when possible, the consent of parents or guardians or other persons responsible for the care of the child, to interview the child. The investigation shall include an opportunity for the suspected perpetrator to be heard with regard to the alleged abuse or neglect. During the course of the investigation, the Superintendent of Schools may suspend the employee with pay or may place the employee on administrative leave with pay pending the outcome of the investigation.

Regardless of the outcome of any investigation by DCF or a law enforcement agency, the Superintendent of Schools may take disciplinary action against any school employee up to and including termination of employment if the school district's investigation concludes that an employee engaged in abuse or neglect or otherwise violated the terms and conditions of employment.

Impact of DCF Finding of Abuse or Neglect by Certified Personnel

If DCF determines that there is reasonable cause to believe that a child has been abused or neglected by a school employee who holds a certificate, permit or authorization issued by the State Board of Education, or if DCF has recommended that such employee be placed on the DCF child abuse and neglect registry, the Superintendent shall suspend such employee with pay and without termination of benefits, and, within seventy-two (72) hours after issuance of the suspension, shall notify the board of education and the Commissioner of Education or his representative of the reasons for and conditions of the suspension. The suspension shall remain in effect until the board of education acts pursuant to §10-151 of the Connecticut General Statutes. The Superintendent shall also disclose those records provided by DCF concerning its investigation to the Commissioner of Education and the board of education or its attorney. If the contract of employment of such a certified school employee is terminated as the result of an investigation of abuse or neglect or the employee resigns, the Superintendent shall notify the Commissioner of Education or his representative within seventy-two (72) hours after such termination or resignation.

Impact of DCF Finding of Abuse or Neglect by Non-Certified Personnel

If DCF determines that there is reasonable cause to believe that a child has been abused or neglected by a non-certified school employee, the Superintendent of Schools or designee may take disciplinary action up to and including termination.

Training

School employees who are mandated reporters and were hired on or after July 1, 2011 shall be required to complete a training program for the accurate and prompt identification and reporting of child abuse and neglect. School employees who are mandated reporters and were hired before July 1, 2011 are required to complete a refresher training program. All mandated reporters shall be required to complete the refresher training program at least once every three years.

Although only mandated reporters are legally required to complete abuse and neglect training and refresher training programs, the Superintendent of Schools, at his or her discretion, may require other school employees to complete such training.

The training and refresher training programs shall be developed and made available by the Commissioner of DCF in accordance with applicable law.

Records and Documentation

All records pertaining to allegations, investigations or reports of child abuse or neglect by a school employee shall be maintained in a central location. Such records shall include any reports made to DCF. The Department of Education shall have access to such records.

The board shall keep records establishing that school employees have completed training and refresher training programs as required by law.

The board shall document the annual notification of this policy to school employees.

Retaliation Prohibited

Retaliation against a mandated reporter is prohibited. The Board will not discriminate, discharge or otherwise retaliate against an employee who acts in good faith to comply with this policy and the individual obligations of applicable state law.

Violation of this Policy

Employees who fail to report child abuse or neglect in a timely manner or otherwise violate the requirements of this policy and/or applicable law may face disciplinary action up to and including termination of employment.

Delegation of Authority

The Superintendent is authorized to delegate his or her responsibilities for receiving and making reports, notifying and receiving notification, and conducting investigations to a designee acting on his or her behalf.

Notification of Policy

This policy shall be distributed annually to all school employees.

Legal References:

Connecticut General Statutes

- 10-151e Disclosure of teacher records for purposes of an investigation of child abuse and neglect.
- 10-220 Duties of boards of education
- 10-220a In-service training.
- 10-221s Investigations of child abuse and neglect. Disciplinary action.
- 17a-101 *et seq.* Protection of children from abuse. Mandated reporters.
- 53a-65 Definitions

“Model Policy for the Reporting of Child Abuse and Neglect,” Connecticut Department of Children and Families.

APPENDIX A

Operational Definitions of Child Abuse and Neglect

The purpose of this policy is to provide consistency for staff in defining and identifying operational definitions, evidence of abuse and/or neglect and examples of adverse impact indicators. The following operational definitions are working definitions and examples of child abuse and neglect as used by the Connecticut Department of Children and Families.

For the purposes of these operational definitions,

- child refers to any person under eighteen (18) years of age, or under twenty-one (21) years of age and in DCF care
- a person responsible for a child's health, welfare or care means:
 - the child's parent, guardian, foster parent, an employee of a public or private residential home, agency or institution or other person legally responsible under State law for the child's welfare in a residential setting; or any staff person providing out-of-home care, including center-based child day care, family day care, or group day care
- a person given access to a child is a person who is permitted to have personal interaction with a child by the person responsible for the child's health, welfare or care or by a person entrusted with the care of a child for the purpose of education, child care, counseling, spiritual guidance, coaching, training, instruction, tutoring or mentoring.

Note: Only a "child" as defined above may be classified as a victim of child abuse and/or neglect; only a "person responsible", "person given access", or "person entrusted" as defined above may be classified as a perpetrator of child abuse and/or neglect.

Legal References: Connecticut General Statutes §17a-93; §17a-103a; §17a-101, et. seq., as amended by P.A. 11-93; §46b-120.

Physical Abuse

A child may be found to have been physically abused who:

- has been inflicted with physical injury or injuries other than by accidental means,
- is in a condition which is the result of maltreatment such as, but not limited to, malnutrition, sexual molestation, deprivation of necessities, emotional maltreatment or cruel punishment, and/or
- has injuries at variance with the history given of them.

Evidence of physical abuse includes:

- bruises, scratches, lacerations
- burns, and/or scalds
- reddening or blistering of the tissue through application of heat by fire, chemical substances, cigarettes, matches, electricity, scalding water, friction, etc.
- injuries to bone, muscle, cartilage, ligaments: fractures, dislocations, sprains, strains, displacements, hematomas, etc.
- head injuries
- internal injuries
- death
- misuse of medical treatments or therapies
- malnutrition related to acts of commission or omission by an established caregiver resulting in a child's malnourished state that can be supported by professional medical opinion

- deprivation of necessities acts of commission or omission by an established caregiver resulting in physical harm to child
- cruel punishment.

Sexual Abuse/Exploitation Sexual Abuse/Exploitation

Sexual Abuse/Exploitation is any incident involving a child's non-accidental exposure to sexual behavior.

Evidence of sexual abuse includes, but is not limited to the following:

- rape
- penetration: digital, penile, or foreign objects
- oral / genital contact
- indecent exposure for the purpose of sexual gratification of the offender, or for purposes of shaming, humiliating, shocking or exerting control over the victim
- incest
- fondling, including kissing, for the purpose of sexual gratification of the offender, or for purposes of shaming, humiliating, shocking or exerting control over the victim
- sexual exploitation, including possession, manufacture, or distribution of child pornography. online enticement of a child for sexual acts, child prostitution, child-sex tourism, unsolicited obscene material sent to a child, or misleading domain name likely to attract a child to an inappropriate website
- coercing or forcing a child to participate in, or be negligently exposed to, pornography and/or sexual behavior
- disease or condition that arises from sexual transmission
- other verbal, written or physical behavior not overtly sexual but likely designed to "groom" a child for future sexual abuse.

Legal References: Federal Law 18 U.S.C. 2215 Sexual Exploitation of Children.

Emotional Maltreatment-Abuse

Emotional Maltreatment-Abuse is:

- act(s), statement(s), or threat(s), which
- has had, or is likely to have an adverse impact on the child; and/or
- interferes with a child's positive emotional development.

Evidence of emotional maltreatment-abuse includes, but is not limited to, the following:

- rejecting;
- degrading;
- isolating and/or victimizing a child by means of cruel, unusual, or excessive methods of discipline; and/or
- exposing the child to brutal or intimidating acts or statements.

Indicators of Adverse Impact of emotional maltreatment-abuse may include, but are not limited to, the following:

- depression;
- withdrawal;
- low self-esteem;
- anxiety;
- fear;
- aggression/ passivity;

- emotional instability;
- sleep disturbances;
- somatic complaints with no medical basis;
- inappropriate behavior for age or development;
- suicidal ideations or attempts;
- extreme dependence;
- academic regression;
- and/or trust issues.

Physical Neglect

A child may be found neglected who:

- has been abandoned;
- is being denied proper care and attention physically, educationally, emotionally, or morally;
- is being permitted to live under conditions, circumstances or associations injurious to his well-being; and/or
- has been abused.

Evidence of physical neglect includes, but is not limited to:

- inadequate food;
- malnutrition;
- inadequate clothing;
- inadequate housing or shelter;
- erratic, deviant, or impaired behavior by the person responsible for the child's health, welfare or care; by a person given access to the child; or by a person entrusted with the child's care which adversely impacts the child;
- permitting the child to live under conditions, circumstances or associations injurious to his well-being including, but not limited to, the following:
 - substance abuse by caregiver, which adversely impacts the child physically
 - substance abuse by the mother of a newborn child and the newborn has a positive urine or meconium toxicology for drugs
 - psychiatric problem of the caregiver which adversely impacts the child physically
 - exposure to family violence which adversely impacts the child physically
 - exposure to violent events, situations, or persons that would be reasonably judged to compromise a child's physical safety
 - non-accidental, negligent exposure to drug trafficking and/or individuals engaged in the active abuse of illegal substances
 - voluntarily and knowingly entrusting the care of a child to individuals who may be disqualified to provide safe care, e.g. persons who are subject to active protective or restraining orders; persons with past history of violent/drug/sex crimes; persons appearing on the Central Registry
 - non-accidental or negligent exposure to pornography or sexual acts
 - inability to consistently provide the minimum of child-caring tasks
 - inability to provide or maintain a safe living environment
 - action/inaction resulting in death
 - abandonment
 - action/inaction resulting in the child's failure to thrive
 - transience
 - inadequate supervision: creating or allowing a circumstance in which a child is alone for an excessive period of time given the child's age and cognitive abilities
 - holding the child responsible for the care of siblings or others beyond the child's ability
 - failure to provide reasonable and proper supervision of a child given the child's age and cognitive abilities.

Note: Inadequate food, clothing, or shelter or transience finding must be related to caregiver acts of omission or commission and not simply a function of poverty alone.

Medical Neglect

Medical Neglect is the unreasonable delay, refusal or failure on the part of the person responsible for the child's health, welfare or care or the person entrusted with the child's care to seek, obtain, and/or maintain those services for necessary medical, dental or mental health care when such person knows, or should reasonably be expected to know, that such actions may have an adverse impact on the child.

Evidence of medical neglect includes, but is not limited to:

- frequently missed appointments, therapies or other necessary medical and/or mental health treatments;
- withholding or failing to obtain or maintain medically necessary treatment from a child with life-threatening, acute or chronic medical or mental health conditions; and/or
- withholding medically indicated treatment from disabled infants with life threatening conditions.

Note: Failure to provide the child with immunizations or routine well child care in and of itself does not constitute medical neglect.

Educational Neglect

Except as noted below, **Educational Neglect** occurs when, by action or inaction, the parent or person having control of a child five (5) years of age and older and under eighteen (18) years of age who is not a high school graduate

- fails to register the child in school
- fails to allow the child to attend school or receive home instruction in accordance with CONN. GEN. STAT. §10-184
- failure to take appropriate steps to ensure regular attendance at school if the child is registered.

Exceptions (in accordance with CONN. GEN. STAT. §10-184):

- A parent or person having control of a child may exercise the option of not sending the child to school at age five (5) or age six (6) years by personally appearing at the school district office and signing an option form. In these cases, educational neglect occurs if the parent or person having control of the child has registered the child at age five (5) or age (6) years and then does not allow the child to attend school or receive home instruction.

Note: Failure to sign a registration option form for such a child is not in and of itself educational neglect.

- A parent or person having control of a child sixteen (16) or seventeen (17) years of age may consent to such child's withdrawal from school. Such parent or person shall personally appear at the school district office and sign a withdrawal form.
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Emotional Neglect

Emotional Neglect is the denial of proper care and attention, or failure to respond, to a child's affective needs by the person responsible for the child's health, welfare or care; by the person

given access to the child; or by the person entrusted with the child's care which has an adverse impact on the child or seriously interferes with a child's positive emotional development.

Evidence of emotional neglect includes, but is not limited to, the following:

- inappropriate expectations of the child given the child's developmental level;
- failure to provide the child with appropriate support, attention and affection;
- permitting the child to live under conditions, circumstances or associations; injurious to his well-being including, but not limited to, the following:
 - substance abuse by caregiver, which adversely impacts the child emotionally;
 - psychiatric problem of the caregiver, which adversely impacts the child emotionally; and
 - exposure to family violence which adversely impacts the child emotionally.

Indicators may include, but are not limited to, the following:

- depression;
- withdrawal;
- low self-esteem;
- anxiety;
- fear;
- aggression/ passivity;
- emotional instability;
- sleep disturbances;
- somatic complaints with no medical basis;
- inappropriate behavior for age or development;
- suicidal ideations or attempts;
- extreme dependence;
- academic regression;
- trust issues.

Moral Neglect

Moral Neglect: Exposing, allowing, or encouraging the child to engage in illegal or reprehensible activities by the person responsible for the child's health, welfare or care or person given access or person entrusted with the child's care.

Evidence of Moral Neglect includes but is not limited to:

- stealing;
- using drugs and/or alcohol;
- and involving a child in the commission of a crime, directly or by caregiver indifference.

Appendix B

INDICATORS OF CHILD ABUSE AND NEGLECT

Indicators of Physical Abuse

HISTORICAL

- Delay in seeking appropriate care after injury.
- No witnesses.
- Inconsistent or changing descriptions of accident by child and/or parent.

- Child's developmental level inconsistent with history.
- History of prior "accidents".]
- Absence of parental concern.
- Child is handicapped (physically, mentally, developmentally) or otherwise perceived as "different" by parent.
- Unexplained school absenteeism.
- History of precipitating crisis

PHYSICAL

- Soft tissue injuries on face, lips, mouth, back, buttocks, thighs or large areas of the torso;
- Clusters of skin lesions; regular patterns consistent with an implement;
- Shape of lesions inconsistent with accidental bruise;
- Bruises/welts in various stages of healing;
- Burn pattern consistent with an implement on soles, palms, back, buttocks and genitalia; symmetrical and/or sharply demarcated edges;
- Fractures/dislocations inconsistent with history;
- Laceration of mouth, lips, gums or eyes;
- Bald patches on scalp;
- Abdominal swelling or vomiting;
- Adult-size human bite mark(s);
- Fading cutaneous lesions noted after weekends or absences;
- Rope marks.

BEHAVIORAL

- Wary of physical contact with adults;
- Affection inappropriate for age
- Extremes in behavior, aggressiveness / withdrawal;
- Expresses fear of parents;
- Reports injury by parent;
- Reluctance to go home;
- Feels responsible (punishment "deserved");

- Poor self-esteem;
- Clothing covers arms and legs even in hot weather.

Indicators of Sexual Abuse

HISTORICAL

- Vague somatic complaint;
- Excessive school absences;
- Inadequate supervision at home;
- History of urinary tract infection or vaginitis;
- Complaint of pain; genital, anal or lower back/abdominal;
- Complaint of genital itching;
- Any disclosure of sexual activity, even if contradictory.

PHYSICAL

- Discomfort in walking, sitting;
- Evidence of trauma or lesions in and around mouth;
- Vaginal discharge/vaginitis;
- Vaginal or rectal bleeding;
- Bruises, swelling or lacerations around genitalia, inner thighs;
- Dysuria;
- Vulvitis;
- Any other signs or symptoms of sexually transmitted disease;
- Pregnancy.

BEHAVIORAL

- Low self-esteem;
- Change in eating pattern;
- Unusual new fears;
- Regressive behaviors;
- Personality changes (hostile/aggressive or extreme compliance);
- Depression;

- Decline in school achievement;
- Social withdrawal; poor peer relationship;
- Indicates sophisticated or unusual sexual knowledge for age;
- Seductive behavior, promiscuity or prostitution;
- Substance abuse;
- Suicide ideation or attempt;
- Runaway.

Indicators of Emotional Abuse

HISTORICAL

- Parent ignores/isolates/belittles/rejects/scapegoats child
- Parent's expectations inappropriate to child's development
- Prior episode(s) of physical abuse
- Parent perceives child as "different"

PHYSICAL

- (Frequently none);
- Failure to thrive;
- Speech disorder;
- Lag in physical development;
- Signs/symptoms of physical abuse.

BEHAVIORAL

- Poor self-esteem
- Regressive behavior (sucking, rocking, enuresis)
- Sleep disorders
- Adult behaviors (parenting sibling)
- Antisocial behavior;
- Emotional or cognitive developmental delay;
- Extremes in behavior - overly aggressive/compliant;
- Depression;
- Suicide ideation/attempt.

Indicators of Physical Neglect

HISTORICAL

- High rate of school absenteeism;
- Frequent visits to school nurse with nonspecific complaints;
- Inadequate supervision, especially for long periods and for dangerous activities;
- Child frequently unattended; locked out of house;
- Parental inattention to recommended medical care
- No food intake for 24 hours;
- Home substandard (no windows, doors, heat), dirty, infested, obvious hazards;
- Family member addicted to drugs/alcohol.

PHYSICAL

- Hunger, dehydration;
- Poor personal hygiene, unkempt, dirty;
- Dental cavities/poor oral hygiene;
- Inappropriate clothing for weather/size of child, clothing dirty; wears same clothes day after day;
- Constant fatigue or listlessness;
- Unattended physical or health care needs;
- Infestations;
- Multiple skin lesions/sores from infection.

BEHAVIORAL

- Comes to school early, leaves late;
- Frequent sleeping in class;
- Begging for/stealing food;
- Adult behavior/maturity (parenting siblings);
- Delinquent behaviors;
- Drug/alcohol use/abuse.