CHILD ABUSE & NEGLECT RECOGNITION & REPORTING PROCEDURES *Must be reviewed annually

- All suspected child abuse & neglect of any child must be reported to the 24 Hour Division of Family Services Child Abuse & Neglect Report Line at 1-800-292-9582.
- All professionals who work with children, including child care providers, are mandatory reporters of suspected abuse & neglect.
- You do not need anyone's permission to call the hotline.
- As defined in 10 Del.C. §901(1), "Abuse" or "abused child" means that the person:
 - -Causes or inflicts sexual abuse on a child; or
 - -Has care, custody, or control of a child, and causes or inflicts:
 - Physical injury through unjustified force as defined in §468 of Title 11;
 - > Emotional abuse;
 - > Torture;
 - > Exploitation; or
 - > Maltreatment or mistreatment
- Abuse (non-accidental injury): A non-accidental injury *has* an assignable cause. The injury could have been intentional or unintentional. The injury is a result of force or was inflicted.
- Physical discipline & physical punishment become physical abuse when the force is unjustified. The use of
 force is unjustified if it includes: Throwing the child, kicking, burning, cutting, striking with a closed fist,
 interfering with breathing, use of or threatened use of a deadly weapon, prolonged deprivation of sustenance
 or medication, or doing any other act that is likely to cause or does cause physical injury, disfigurement,
 mental distress, unnecessary degradation or substantial risk of serious physical injury or death.
- Child Disclosure of Abuse by Parent/Caretaker:
 - 1) DO NOT interview the child multiple times
 - 2) DO NOT take pictures of the injuries or ask the child to undress
 - 3) DO NOT notify the parent/caretaker you are making a report
 - 4) DO ask minimal fact questions, such as:
 - ➤ What happened?
 - ➤ When did that happen?
 - Where did that happen?
 - > Did you tell anyone what happened?
 - 5) Write down the child's exact words if you must speak to the child
 - 6) Avoid expressing disbelief, shock or anger, etc.
 - 7) Avoid value judgments & accusatory statements
 - 8) Thank the child for telling & tell the child it is not his/her fault
 - 9) Tell the child you have to report the abuse to a professional
 - 10) Make a report to the Child Abuse & Neglect Report Line
- The person who spoke to the child or observed the child should make the report because it is required by statute and the Report Line worker may have questions about the child's disclosure or condition.
- You are not an investigator. You are not trained to identify subtle clues, gather statements, or investigate
 how an injury occurred. However, you should collect as much information as possible if you suspect child
 abuse. Your information needs to be reliable, consistent, and specific.
- Document your concerns. Document the behavior. Note any bruises or marks and the explanations given to you by the child or adult.

Staff Signature	Date

Physical Abuse	<u>Neglect</u>	<u>Sexual Abuse</u>	Emotional Maltreatment
Physical Indicators:	Physical Indicators:	Physical Indicators:	Physical Indicators:
 Human bite marks Bald spots Unexplained burns on arms, legs, neck, or torso Unexplained fractures Unexplained bruising, lacerations, or abrasions Behavioral Indicators: Reports injury by caregiver Shrinks at approach of adults 	 Consistent hunger, poor hygiene, inappropriate dress Consistent lack of supervision, especially in dangerous activities or long periods Unattended physical problems or medical needs Distended stomach, emaciated Behavioral Indicators: Is begging or stealing food 	 Difficulty in walking or sitting Torn, stained, or bloody clothing Pain or itching in the genital area Bruises or bleeding in external genitals, vaginal, or anal areas Frequent urinary or yeast infections Frequent unexplained sore throat Pregnancies Sexually transmitted infections Behavioral Indicators:	 Lags in physical or emotional development (e.g., walking, talking, non-organic failure to thrive) Behavioral Indicators: Ongoing sleep/appetite disturbance Persistent bedwetting/soiling Frequent disruptive or aggressive behaviors Reports lack of attachment to parent Severe withdrawal (e.g., never
 Complains of soreness and moves awkwardly 	Has consistent fatigue, listlessness or falling asleep	(Younger) Exhibits extremely sexualized behavior/language that is	responding to cuddling, never smiling, or making sounds)
 Inability to use an arm, inability to bear weight Cannot tolerate physical contact or touch 	 States there is no caretaker at home Has frequent school absences or tardiness Lacks needed medical or dental care 	significantly different from same- aged peers (Older) Exhibits sexual behavior involving coercion/manipulation of	 Social isolation Starting fires or cruelty to animals Fearfulness and clinginess Chronic head banging
 Wears clothing that covers body when not appropriate Seems frightened of the caregiver 	 Abuses alcohol or drugs Early emancipation from family 	 another child Bedwetting/soiling Runs away, attempts suicide 	Inappropriately adult Parent/Caretaker Indicators:
and protests or cries when it is time to go home Parent/Caretaker Indicators:	 Parent/Caretaker Indicators: Appears to be indifferent to the child Seems apathetic or depressed Behaves irrationally or in a bizarre 	 Runs away, attempts suicide Fear of a specific individual Refusal to be left alone Significant change in behavior/ mood/appetite Drop in school performance/ 	 Constantly blames, belittles, or berates the child Is unconcerned about the child and refuses to consider offers for help
 Offers conflicting, unconvincing, or no explanation for the child's injury Describes the child as "evil," or in some other very negative way 	manner Is abusing alcohol or other drugs	attendance Parent/Caretaker Indicators:	for the child's problems Overtly rejects the child
 Uses harsh physical discipline with the child Has a history of abuse as a child 		 Is unduly protective of the child or severely limits the child's contact with other children, especially of the opposite sex Is secretive and isolated Is jealous or controlling with family members 	