DTOM 22/0 Foundation
DTOM Veterans Ranch

13952 387th Ave, Warner SD. 57479

Mandatory Child Abuse Reporting Policy
South Dakota

**Policy: #010700 Mandated Child Abuse Reporting Policy**

**Purpose:** The purpose of this policy is to describe ***The DTOM Veterans Ranch MRMS Equine Therapy Clinic*** process for ensuring compliance with SD state laws (26-8A-2) requiring notification or the reporting of child abuse. The DTOM Veterans Ranch MRMS Equine Therapy Clinic has a mandatory reporting policy of any suspected abuse, neglect, or maltreatment of both children and vulnerable adults. We adhere to the SD reporting policy and procedures and use these procedures as our in-house reporting process.

Reporting child abuse and maltreatment is essential in protecting children in South Dakota. Anyone can make a report based on reasonable suspicion, and everyone shares the responsibility to help keep our children and families safe.

**DTOM Veterans Ranch MRMS Equine Therapy Clinic Staff** will:

* Participate in annual training on state laws requiring notification or the reporting of child abuse. (South Dakota Department of Social Services) (Online certification or in-person).
* Comply with SD state laws (26-8A-2) requiring notification or the reporting of child abuse.
* Report any suspected or reasonable suspicion of child abuse, neglect, or maltreatment, (child or vulnerable adult) to the CEO and Vice President of Operations, and they will help guide you through the reporting process through the state (immediately). Do not delay in reporting any suspicions of abuse, neglect, or maltreatment.

**Definition of a Mandatory Reporter**

In South Dakota, a mandatory reporter is a person or entity legally required to report suspected child abuse if they have **reasonable suspicion** that a minor under the age of 18 is being harmed or neglected. **SDCL § 26-8A-3.** This includes reporting situations in which the reporter has knowledge of, or observes a child being subjected to, conditions that would reasonably result in harm to the child. Mandatory reporters are required to report the facts and circumstances that led them to suspect that a child has been abused or neglected. They do not have the burden of providing proof that abuse or neglect has occurred.

**Anyone employed by the DTOM Veterans Ranch, or who serves as an MRMS Equine Safety, Junior Scouts Volunteer, or other volunteer falls under the list of South Dakota’s definition of “Mandated Reporter.”**

South Dakota law allows for any person who knows or has reason to suspect that a child has been abused or neglected to report the information. This is called permissive reporting. Permissive reporters follow the same standards when electing to make a report. Permissive reporters can make a report at any time they suspect a child is the victim of child abuse. Permissive reporters may report anonymously. See **SDCL §§ 26-8A-3 & 8.**

**\*\* If you suspect or have reasonable suspicion that a child is the victim of abuse, neglect, or maltreatment, Dr. Tracy Diefenbach must be notified immediately, and you will be guided through the mandatory reporting process as follows:**

**Signs of Child Abuse, Neglect, and Maltreatment:**

Child abuse and neglect occurs when a child is mistreated, resulting in injury or risk of harm. Types of child abuse and neglect are identified within four categories. The definitions include a brief summary of indicators to explain the definition. None of the indicators alone are definitive of child abuse. It is necessary to look at the family’s total functioning to determine present and impending danger.

*This information is provided by the* ***SD Department of Social Services****. See also* 26-8A-2. PHYSICAL ABUSE

Physical abuse refers to an action of the parent, guardian or custodian that is non-accidental and results in physical injuries, often occurring in the name of discipline or punishment.

**BRUISES AND WELTS**

* On face, lips, mouth
* On torso, back, buttocks, thighs
* In various stages of healing
* Clustered, forming regular pattern
* Reflecting shape of article used to inflict; electric cord or belt buckle
* On several different surface areas; regularly appear after absence, weekend or vacation
* Subdural hemorrhage or hematomas
* internal injuries
* brain damage

**BURNS**

* Cigar, and cigarette burns, especially on soles, palms, back, or buttocks
* Immersion burns; sock-like, glove-like, doughnut-shaped on buttocks or genitalia, patterned like an electric burner, iron
* Rope burns on arms, legs, neck, or torso

**FRACTURES**

* To skull, nose, and facial structure in various stages of healing
* Multiple or spiral fractures
* Bone fracture-unexplained and in various stages of healing

**LACERATIONS OR ABRASIONS**

* To mouth, lips, gums, eyes
* To external genitalia

**BEHAVIORAL INDICATORS**

* Behavioral extremes; aggressiveness or withdrawal
* Frightened of parents
* Afraid to go home
* Reports injury by parents

**PHYSICAL NEGLECT**

Physical neglect occurs when a parent, guardian, or custodian fails to provide for a child’s basic needs, like food, clothing, shelter, education, medical care, or supervision and abandonment. The failure to meet basic needs must represent a threat to the child’s immediate health and safety or an impending danger if there is a pattern or history of the child’s needs not being met.

**PHYSICAL INDICATORS**

* The child is malnourished, emaciated, always hungry or begging for food, or seldom fed nutritious food. A medical diagnosis is usually necessary to determine malnutrition.
* The child’s clothing is inappropriate or insufficient to protect the child from the weather or the clothing is so dirty or smelly that it constitutes a health hazard.
* The caretakers fail to provide a home or the home is in a condition that presents a health hazard or danger such as fire.
* The caretakers refuse to permit a child to attend school. Truancy alone does not constitute child abuse or neglect but may be an indication when considered with other family factors.
* The caretakers fail to seek medical or dental treatment for a health problem or condition that, if untreated, could represent a danger to the child.
* The caretakers fail to provide supervision of a child. The child’s age and competence, amount of time left unsupervised, time of day the child is unsupervised, and degree of parental planning for the unsupervised period must be considered. Community standards need to be considered.
* The child is abandoned. Abandonment is a legal term meaning contact with the child has not been attempted by the caretaker for an extended period of time.

**BEHAVIORAL INDICATORS**

* Begging, stealing food
* Extended stays at school; early arrival and late departure
* Constant fatigue, listlessness, or falling asleep in class
* States there is no caretaker

**SEXUAL ABUSE**

Sexual abuse and exploitation occur when a parent, guardian, or custodian commits or allows contact or interactions between a child and an adult, where the child is used for the sexual stimulation of the parent, guardian, caretaker, or another responsible person. Sexual abuse may also be committed by a person under the age of 18, when that person is significantly older than the victim, or in a position of power and control over the child.

**PHYSICAL INDICATORS**

* Difficulty walking or sitting
* Pain or itching in the genital area
* Bruises or bleeding in external genitalia, vaginal or anal areas
* Venereal disease, especially in pre-teens
* Pregnancy

**BEHAVIORAL INDICATORS**

* Unwilling to change for gym or participate in a physical education class
* Withdrawal, fantasy, or bizarre, sophisticated, or unusual sexual behavior or knowledge
* Poor peer relationships
* Delinquent or runaway behavior
* Reports of sexual assault by the caretaker

**EMOTIONAL ABUSE**

Emotional maltreatment occurs when a parent, guardian or custodian fails to provide the emotional nurturing needed for a child’s psychological growth and development, or willfully denies the child the emotional stability necessary for proper psychological growth and development. Emotional maltreatment results in an observable or measurable impairment of the child.

**PHYSICAL INDICATORS**

* Failure to thrive is diagnosed. The child does not gain weight or meet developmental norms, despite adequate feedings and the absence of physiological causes. Failure to thrive is caused by failure to emotionally nurture, cuddle and hold the child, such as leaving the child in a crib all day. The clearest indicator of failure to thrive is the placement of a child in another environment, where the child dramatically gains weight and thrives.
* The caretaker verbally abuses the child, such as through constant harassment, belittling, humiliation, repeated threats, or constant criticism.
* The caretaker condones, suggests, or encourages the child to commit theft or prostitution.
* The child is ignored or isolated by parents physically and emotionally for long periods of time. An example includes a child who is sent to an empty room for hours or days to be isolated from the rest of the family.
* The child is placed in a position of acting as a parent to an extremely needy or inadequate parent.

**INFORMATION FOR EXAMPLE REPORTING FORM**

When preparing an internal reporting form to track reports, the following information should be included:

* 1. Date of Incident
	2. Suspected Maltreatment
	3. Contact Information for Reporter
	4. Nature of Problem
	5. Date Suspected Maltreatment was Reported to the Person in Charge
	6. Date Suspected Maltreatment was Reported to CPS or Local Law Enforcement

▪ Request written acknowledgment of report to authorities
▪ Include a written response from authorities with this reporting form once the
 response is returned

**Procedure: HOW TO MAKE A REPORT**

Reports to CPS, Law Enforcement, or State’s Attorney

1. If the child is in immediate danger, call 911or your local law enforcement
2. The Department of Social Services (DSS), and Child Protective Services (CPS), manage a centralized Child Abuse Reporting Hotline for South Dakota. Trained specialists are available from 8 a.m. to 5 p.m., Monday through Friday, to receive referrals of suspected child abuse. The best practice is to call the Child Abuse Reporting Hotline.
3. **Report Child Abuse or Neglect 1.877.244.0864**.
4. You can also make reports to law enforcement and local state’s attorneys. If you are calling after business hours or if the child is in immediate danger, call law enforcement. Law enforcement, state’s attorneys, and CPS are instructed to “cross-report” or to notify each other of the report.
5. The timeliness of your call is vital to the timeliness of intervention by the local CPS unit or law enforcement. You are not required to notify the parents or other persons legally responsible before or after your call.

**Content of your report:**

When making a report of suspected child abuse or general child well-being concerns, it is important to provide as much information as possible. The below list will give you a general idea of what information a trained specialist will ask you for:

1. Name and physical description of the child, including age/age range of the child.
2. Name, home address, and telephone number of a legal guardian or parent of the child.
3. Name or physical description of suspected child abuse perpetrator.
4. Home address and telephone number of suspected child abuse perpetrator.
5. Suspected perpetrator’s relationship to the child.
6. Description of the suspected injury and any concern for the child’s immediate safety.
7. Where the incident took place.
8. Your relationship with the child.
9. Your contact information, although you may report anonymously if you are a permissive reporter.

**Confidentiality of the report:**

The reports are confidential. If you are a mandatory reporter, the person reporting must be available to answer questions when the initial report is made. This means the person who witnesses the abuse or with the reasonable suspicion of child abuse or neglect must be able to answer questions to the investigator; an agency or supervisor cannot shield the mandatory reporter from talking to the investigator. **SDCL § 26-8A-8.**

**Good Faith Reporting:**

Any person or party participating in good faith in the making of a report of child abuse is immune from any civil or criminal liability for the report and has the same immunity for participation in any judicial proceeding resulting from the report. **SDCL § 26-8A-14.**

Medical professionals or other professionals who in good faith are involved with the submitting of copies of medical examination, treatment or hospitalization records pursuant to **SDCL §§ 26- 8A-3 to 26-8A-8** for reporting purposes have immunity. Immunity also extends in the same manner to persons requesting the taking of photographs and X-rays pursuant to **SDCL § 26-8A- 16,** persons taking the photographs and X-rays, child protection teams established by the secretary of social services, public officials or employees involved in the investigation and treatment of child abuse or neglect or making a temporary placement of the child pursuant to this chapter, or any person who in good faith cooperates with a child protection team or DSS in the investigation, placement, or a treatment plan. **SDCL § 26-8A-14.**

The provisions granting or allowing the grant of immunity do not extend to any person alleged to have committed an act or acts of child abuse or neglect. **SDCL § 26-8A-14.**

**Penalties for not reporting:**

Any Mandatory Reporter who intentionally fails to make the required report is guilty of a Class 1 misdemeanor. **SDCL § 26-8A-3**.

**What happens after the report is made:**

SD law requires that once a report is made, DSS or law enforcement officers shall investigate. **SDCL § 26-8A-8**. Which agency investigates depends on the nature of the allegation as well as the alleged perpetrator. Usually, DSS investigates allegations of abuse, maltreatment, and neglect if the perpetrator is a parent, guardian, or caretaker. If the allegation rises to the level of a crime or if the perpetrator is someone other than a parent, guardian, or caretaker, law enforcement investigates. Both the law and best practices encourage law enforcement and DSS to work together through the investigation.

**Notification of the investigation for the reporting party:**

The person receiving a report alleging child abuse or neglect shall ask whether or not the reporting party desires a response report. If requested by the reporting person, DSS or the concerned law enforcement officer shall issue within thirty days, a written acknowledgment of receipt of the report and a response stating whether or not the report will be investigated. **SDCL § 26-8A-8.**

The reporting party often will not receive information on the results of the investigation. This is to protect the privacy of the victim and the family. Normally, a child would not be removed from the home. Treatment services are provided to strengthen and preserve families and protect children. Services are available to families in which children are determined to be unsafe because of abuse or neglect. Support services include training for families in parenting skills and home management and referrals for counseling and other assistance.

**Additional South Dakota State Resources Available to DTOM Veterans Ranch and DTOM 22/0 Foundation Employees, Volunteers, MRMS Equine Safety Clinicians:**

[**www.dss.sd.gov**](http://www.dss.sd.gov)

**DSS Protective Services Information
Mandatory Reporting Informational Pamphlet
DSS Frequently Asked Questions
DSS Video Training for Mandatory Reporters**

**For additional education on the reporting of child abuse, neglect, and maltreatment, DTOM Veterans Ranch and DTOM 22/0 Foundation Employees, Volunteers, and MRMS Equine Safety Clinicians can visit:**

[**www.sdcpcm.com**](http://www.sdcpcm.com)

**National Resources:**

Child Welfare League of America: Mandatory Reporters of Child Abuse and Neglect

State Training Resources for Mandatory Reporters of Child Abuse and Neglect

Prevent Child Abuse America

Zero Abuse Project

**Reporter Education Opportunities:**

The SD DSS oversees training for mandated reporters. DSS offers a one-hour, online training course, which is available 24/7 and is accessible on the DSS website. There is no cost to the participant. A certificate is available to print after the course is completed.

Other agencies, including the Center for the Prevention of Child Maltreatment, provide additional training on techniques to know about, respond to, and prevent child maltreatment. Visit www.SDCPCM.com to learn more. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**I, the undersigned, do hereby certify that I have received, read, understood, and agree to abide by this Mandatory Reporting of Child Abuse Policy and Procedure provided by the DTOM 22/0 Foundation and Veterans Ranch.**

**Employee’s Signature** [**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**](https://esign.com/) **Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**This review and signing of this form must be conducted in person with the DTOM Veterans Ranch Vice President of Operations, Dr. Tracy Diefenbach**

**Compliance Officer Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date: \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_
 MM. DD YR**

**Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\*\* The information used for this policy was taken directly from CPCM: Center for the Prevention of Child Maltreatment in South Dakota. This ensures we strictly adhere to the laws, policies, and procedures of reporting child abuse, neglect, or maltreatment.**