

CHILD ABUSE

PURPOSE

The purpose of the Washington State law, Revised Code of Washington (RCW) Chapter 26.44, is to protect children who have been non-accidentally injured, sexually exploited, or deprived of the right to minimal nurture, health, and safety by their parents, custodian, or guardian. While the State respects the bond between parent/guardian and child, the State does assert the right to intervene for the general welfare of the child when there is a clear and present danger to the child's health, welfare, or safety. The State does not intend to interfere with reasonable parental discipline and child-raising practices that are not injurious to the child. It is the intent of the law that comprehensive protective services will be provided for abused, neglected, exploited, and abandoned children found in Washington State. Child Protective Services (CPS) aims to assist parents or persons legally responsible for abused children to overcome the problems leading to abuse and neglect, strengthen families, and improve the general welfare of abused and neglected children.

Mason Health does not tolerate child abuse. Any person who uses Mason Health facilities, property, or resources to engage in child abuse, may be subject to arrest and criminal prosecution.

Mason Health employees and volunteers who have a reasonable cause to believe that a child has suffered abuse or neglect must immediately report the suspected abuse, as specified in this policy.

POLICY

I. Background:

Child or children means any person or persons under the age of eighteen.

Who must report?

Employees of Mason General Hospital are considered mandated reporters and are required by law to report suspected child abuse or neglect.

CHILD ABUSE

Anyone who has reasonable cause to believe that a child has suffered abuse or neglect can, in good faith, report. If you are identified as a mandated reporter, you are required by law to report your concerns

II. Definition of Abuse:

Child abuse and neglect includes:

1) Abuse includes physical, sexual, and/or neglect

Sexual abuse, sexual exploitation, or injury of a child by any person under circumstances which cause harm to the child's health, welfare, or safety, or the negligent treatment or maltreatment of a child by a person responsible for or providing care to the child. The physical discipline of a child is not considered to fall within the reporting obligation when it is reasonable and moderate and is inflicted by a parent or guardian for purposes of restraining or correcting the child. Any use of force on a child by any other person is unlawful unless it is reasonable and moderate and is authorized in advance by the child's parent or guardian for purposes of restraining or correcting the child.

2) Negligent Treatment or Maltreatment

An act or a failure to act, or the cumulative effects of a pattern of conduct, behavior, or inaction, that evidences a serious disregard of consequences of such magnitude as to constitute a clear and present danger to a child's health, welfare, or safety.

3) Sexual Exploitation

Allowing, permitting, or encouraging a child to engage in prostitution by any person; or

Allowing, permitting, encouraging, or engaging in the obscene or pornographic photographing, filming, or depicting of a child by any person.

4) Abandonment

A parent or guardian has foregone their responsibility to provide essential care to a child by:

Deserting the child in any manner with the intent to abandon the child;

Leaving a child without the means or ability to obtain one or more basic needs including food, water, shelter, clothing, hygiene, and medically necessary healthcare;

Foregoing for an extended period of time their parental rights, functions, duties, and obligations, despite their ability to fulfill these responsibilities; or

Demonstrating a substantial lack of regard for their parental functions or duties for an extended period of time.

CHILD ABUSE

III. Suspected Abuse or Neglect

An employee or volunteer may become aware of suspected abuse or neglect through a variety of means, including but not limited to witnessing an act of abuse or neglect, observing signs that abuse or neglect has occurred, or receiving oral or written disclosures that abuse or neglect has occurred. Regardless of how an employee or volunteer is made aware of the abuse or neglect, if there is reasonable cause to believe that the child is at risk of imminent physical harm, including that which results from sexual abuse, sexual exploitation, or a pattern of severe neglect, or from a high-potency synthetic opioid a report must be made.

A disclosure by an adult of abuse or neglect that occurred when the person was a child does not constitute a required report to the authorities. However, if there is reasonable cause to believe that other children are or may currently be at risk of abuse or neglect by the same person, the reporting requirement does apply, and a report must be made by the mandated reporter.

IV. Reporting Process

In the case of an emergency situation that requires immediate intervention, call 911.

MH employees and volunteers must report suspected child abuse or neglect orally by telephone at the first opportunity, but no later than 48 hours, after there is reasonable cause to suspect abuse has taken place.

A. Whom to Call

- 1) Call the Police and CPS
- 2) For assistance, contact the House Supervisor on duty at ext. 27000

This step is required in all cases of emergent suspected child abuse or neglect:

Call the police. Also, call CPS at 1-866-ENDHARM (1-866-764-2233 or 1-866-363-4276).

B. What to Report

The following information may be requested by law enforcement and CPS

- 1) The name, address, and age of the child;
- 2) The name and address of the child's parents, stepparents, guardians, or other persons having custody of the child;
- 3) The name, address and any other identifying information of the suspected perpetrator of abuse (if different from Section B.2 above);
- 4) The description of the injuries, statements from the child, or behaviors that you witnessed that gave you cause to suspect abuse or neglect;

CHILD ABUSE

- 5) The location, if known, where the abuse or neglect occurred;
- 6) Any evidence of previous injuries or related incidents, including their nature and extent; and
- 7) Any other information that may be helpful in establishing the cause of the child's death, injury, or injuries and the identity of the alleged perpetrator or perpetrators.
- 8) Other adults and children at the same home

Employees or volunteers are not required to have all of the above information in order to make a report but are encouraged to provide any information that they possess about the minor or the situation prompting the report.

III. Protections for Reporting in Good Faith

A. Good Faith Reports

Under RCW 26.44.060 any person participating in good faith in the making of a report pursuant to the Abuse of Children Law or testifying as to alleged child abuse or neglect in a judicial proceeding shall in so doing be immune from any liability arising out of such reporting or testifying under any law of this state or its political subdivisions.

B. Cooperating in Good Faith

Under RCW 26.44.060, a person who, in good faith and without gross negligence, cooperates in an investigation arising as a result of a report made pursuant to Chapter 26.44 RCW, shall not be subject to civil liability arising out of his or her cooperation. This provision does not apply to a person who caused or allowed the child abuse or neglect to occur.

C. Legal Defense of Public Employee

Under RCW 26.44.032, when a public employee acts in good faith and without gross negligence in his or her reporting duty under the Abuse of Children Law, and if the employee's judgment as to what constitutes reasonable cause to believe that a child has suffered abuse or neglect is being challenged, the public employer will provide for the legal defense of the employee in accordance with RCW 26.44.032.

D. Retaliation Prohibited

MH policy prohibits retaliation against any individual who makes a report in accordance with this policy and/or Chapter 26.44 RCW or who cooperates with or participates in any investigation of allegations of child abuse. Retaliation means to take adverse action against an individual because he or she has acted in accordance with this policy and/or Chapter 26.44 RCW.

CHILD ABUSE

Additional Information

Chapter 26.44 RCW, Abuse of Children available at:

<http://app.leg.wa.gov/RCW/default.aspx?cite=26.44.030>

RCW 26B.10.846, Report of Child Abuse or Neglect—Reporting Responsibilities

v. Recognizing Child Abuse and Neglect: Signs and Symptoms:

The first step in helping abused or neglected children is learning to recognize the signs of child abuse and neglect. The presence of a single sign does not prove child abuse is occurring in a family; however, when these signs appear repeatedly or in combination, you should take a closer look at the situation and consider the possibility of child abuse. The following signs may signal the presence of child abuse or neglect.

THE CHILD:

1. Shows sudden changes in behavior or school performance.
2. Has not received help for physical or medical problems brought to the parents' attention.
3. Has learning problems (or difficulty concentrating) that cannot be attributed to specific physical or psychological causes.
4. Is always watchful, as though preparing for something bad to happen.
5. Lacks adult supervision.
6. Is overly compliant, passive, or withdrawn.
7. Comes to school or other activities early, stays late, or does not want to go home.

THE PARENT:

1. Shows little concern for the child.
2. Denies the existence of—or blames the child for—the child's problems in school or at home.
3. Asks teachers or other caretakers to use harsh physical discipline if the child misbehaves.
4. Sees the child as entirely bad, worthless, or burdensome.
5. Demands a level of physical or academic performance the child cannot achieve.
6. Looks primarily to the child for care, attention, and satisfaction of emotional needs.

THE PARENT & CHILD:

1. Rarely touch or look at each other.
2. Consider their relationship entirely negative.
3. State that they do not like each other.

Consider the possibility of PHYSICAL ABUSE when:

THE CHILD:

CHILD ABUSE

1. Has unexplained burns, bites, bruises, broken bones, or black eyes.
2. Offers conflicting explanations as to how the injury occurred.
3. Has fading bruises or other marks noticeable after an absence from school.
4. Is frightened of the parents and protests or cries when it is time to go home.
5. Shrinks at the approach of adults.
6. Reports injury by a parent or another adult caregiver.

THE PARENT OR OTHER ADULT CAREGIVER:

1. Offers conflicting, unconvincing, or no explanation for the child's injury.
2. Describes the child as "evil," or in some other very negative way.
3. Uses harsh physical discipline with the child.
4. Has a history of abuse as a child.

Consider the possibility of **NEGLECT** when:

THE CHILD:

1. Is frequently absent from school.
2. Begs or steals food or money.
3. Lacks needed medical or dental care, or glasses.
4. Is consistently dirty and has severe body odor.
5. Lacks sufficient clothing for the weather.
6. Abuses alcohol or other drugs.
7. States that there is no one at home to provide care.

THE PARENT OR OTHER ADULT CAREGIVER:

1. Appears to be indifferent to the child.
2. Seems apathetic or depressed.
3. Behaves irrationally or in a bizarre manner.
4. Appears to be under the influence of alcohol or illicit substances

Consider the possibility of **SEXUAL ABUSE** when:

THE CHILD:

1. Has difficulty walking or sitting.
2. Suddenly refuses to change for gym or to participate in physical activities.
3. Reports nightmares or bedwetting.
4. Experiences a sudden change in appetite.

CHILD ABUSE

5. Demonstrates bizarre, sophisticated, or unusual sexual knowledge or behavior.
6. Becomes pregnant or contracts a venereal disease, particularly if under age 14.
7. Runs away.
8. Reports sexual abuse by a parent or another adult caregiver.

THE PARENT OR OTHER ADULT CAREGIVER:

1. Is unduly protective of the child or severely limits the child's contact with other children, especially of the opposite sex.
2. Is secretive and isolated.
3. Is jealous or controlling with family members.

Consider the possibility of EMOTIONAL MALTREATMENT when:

Emotional Maltreatment is not specifically defined in Washington State law. However, emotional maltreatment may occur at the same time with other forms of maltreatment.

THE CHILD:

1. Shows extremes in behavior, such as overly compliant or demanding behavior, extreme passivity, or aggression.
2. Is inappropriately acting like an adult (parenting other children, for example) or inappropriately infantile (frequently rocking or head-banging, for example).
3. Is delayed in physical or emotional development.
4. Has attempted suicide.
5. Reports a lack of attachment to the parent.

THE PARENT OR OTHER ADULT CAREGIVER:

1. Constantly blames, belittles, or berates the child.
2. Is unconcerned about the child and refuses to consider offers of help for the child's problems.
3. Overtly rejects the child.

How to Respond to a Child's Disclosure of Abuse or Neglect:

- A child may tell you what is going on. It is important to reassure the child that it is okay to tell what happened.
- Project a calm, understanding and supportive attitude to the child.
- Explain all procedures to establish trust.
- Treat the parents of child with kindness and respect, children may be fearful of the parent, but this parent may be all they know.
- Reassure the child that it is not his/her fault.

CHILD ABUSE

- Trust your gut feelings.
- Respect the parents and child's privacy by not discussing in hallways, nursing station, or anywhere that may be heard by the Public.
- Be a good listener - who, how, when and where. Do not ask leading questions
- Remember reporting is a request for an investigation into a suspected case of abuse.

Contacts:

CPS: 866-764-2233 Shelton local number 360-432-2166

Police: 360-426-4441

Indian Child Welfare (ICW): If the child is Native American, you must contact ICW

Skokomish Tribe: 360-426-7788

Squaxin Tribe: 360-426-9781

Case Management Department at Mason General Hospital: ext. 28450 or 360-427-9544.

Security at Mason Health: ext. 8047

Protective detention or custody in the hospital or clinic:

An administrator of a hospital or any physician may detain a child without the consent of a person legally responsible for the child whether or not medical treatment is required if the detaining individual has reasonable cause to believe that permitting the child to continue in his/her place of residence or in the care and custody of the parent, guardian, custodian or other person legally responsible for the child's care would present an imminent danger to the child. In the clinic call the Shelton Police Department for an immediate response.

When a child is admitted to Mason General Hospital, CPS is to be called and may place the child on an involuntary hold. CPS will give guidelines concerning visitation, specific restrictions of visitors including family members. Each case is evaluated on an individual basis by Child Protective Services.

CPS has 72 hours to make a final evaluation on the child remaining in protective custody or not, these hours do not include weekends or holidays.

When Child Protective Services is unavailable, the administrator, physician, or hospital employee shall notify Shelton Police Department at 360-426-4441 and the Shelton Police Department shall evaluate the situation and remove the child from harm.

CHILD ABUSE

Communication with the family:

Child Protective Services will speak with the family at the hospital and inform the family of procedures, appointments, etc. The family will be given information on how to contact Child Protective Services as well.

DOCUMENTATION IN PATIENT'S PERMANENT MEDICAL RECORD:

Mason Health employees need to be sure and document the information about the possible abuse or neglect of the patient, to whom they reported the abuse / neglect and the final disposition of the patient in the patients Permanent Medical Record.