


City of New York
Administration for Children’s Services

Policy and Procedure
#2017/xx

Reporting Requirements for Mandated Reporters in Child Welfare

<p>Approved By:  David A. Hansell Commissioner</p>	<p>Date Issued: _____</p>	<p>Number of Pages: 13</p>	<p>Number of Attachments: 4</p>
<p>Related Laws: SSL §§ 413; 415; 411-428; 488-497 (VPCR); New York Labor Law § 740(1)(e); Executive Law § 554</p>	<p>ACS Divisions/Provider Agencies: Child Protection; Family Permanency Services; Preventive Services</p>	<p>Contact Office /Unit:</p>	
<p>Supporting Regulations: 18 NYCRR Part 433</p>	<p>Supporting Case Law:</p>	<p>Bulletins & Directives: 08-OCFS-INF-01, 07-OCFS-ADM-15; 13-OCFS-INF-05 Protection of People with Special Needs Act and the Formation of the Justice Center and the Vulnerable Persons Central Register; 16-OCFS-ADM-11 Amended Code of Conduct for Use by Facility and Provider Agencies Under the Jurisdiction of the Justice Center for the Protection of People with Special Needs; Justice Center Guidance, dated June 11, 2013; NYS OCFS Summary Guide for Mandated Reporters in New York State</p>	
<p>Key Words: abuse, neglect, SCR ,state, central, register, suspicion, reporting, incident, mandated, reporter, report, maltreatment, hotline, investigation, VPCR, vulnerable persons, vulnerable, special needs, Justice Center</p>	<p>Related Policies: Vulnerable Persons Central Register (VPCR) Reportable Incidents and Notification; #2016/09, Safe Intervention Policy for the Children’s Center</p>	<p>Supersedes: Guidance #2008/07, Revised State Central Register Reporting Requirements for Mandated Reporters and Expansion of Social Services Workers Classified as Mandated Reporters; Mandated Reporter Policy, dated October 21, 2009.</p>	
<p>Related Forms:</p>			

SUMMARY:

The role of mandated reporters is critical in the work the Administration for Children's Services (ACS) does to make sure that children are safe, and it is important that all child welfare staff understand their responsibilities. This policy provides guidelines for mandated reporters in child welfare programs as to when and under what circumstances to make reports to the State Central Register (SCR) and the Vulnerable Persons Central Register (VPCR).

SCOPE:

This policy applies to all mandated reporters including social workers within ACS and in contracted provider agencies that operate foster care, adoption, and preventive services, as well as to "custodians" or "human services professionals" who work in residential settings such as the Children's Center. These guidelines must be used when there is reasonable cause to suspect abuse and/or maltreatment of a child or children.

I. Purpose

- A. The role of mandated reporters is critical in the work the Administration for Children's Services (ACS) does to make sure that children are safe, and it is important that all staff understand their responsibilities.
- B. This policy provides guidelines for mandated reporters as to when and under what circumstances to make reports to the State Central Register (SCR) and the Vulnerable Persons Central Register (VPCR).

II. State Central Register (SCR)

A. Definitions

1. **Mandated Reporters:**¹ People or officials who are required to report or cause a report to be made when they have reasonable cause to suspect that a child coming before them in their professional or official capacity is an abused or maltreated child, or when they have reasonable cause to suspect that a child is an abused or maltreated child where the parent, guardian, custodian, or other person legally responsible for such child comes before them in their professional or official capacity and states from personal knowledge facts, conditions, or circumstances which, if correct, would render the child an abused or maltreated child.²
2. **Professional:** a mandated reporter
 - a. Staff members with some level of advanced education or training.
 - b. If a position requires a college degree, personnel in that position are mandated reporters.
 - c. Personnel required to hold a teaching license or certification such as school teachers, school guidance counselors, school psychologists, school social workers, school nurses, and school administrators are mandated reporters. Note: Secretaries, clerical staff, janitorial staff, and maintenance staff are not considered mandated reporters.
3. **Paraprofessional:** a mandated reporter

Trained aides who provide support and assistance to professionals in carrying out their professional functions.

¹ Any person, official, or institution; see SSL §§ 419 and 420.

² See SSL § 413.

4. **Social Services Worker:** a mandated reporter

- a. Professional and paraprofessional staff who provide services to children and/or families and work for ACS. This includes child welfare staff and all other professional and paraprofessional local district staff, regardless of their function or area of responsibility, including staff in ACS divisions.
- b. Professional and paraprofessional staff and individuals who provide services to children and/or families, and who work for organizations or entities that have contracts or subcontracts with ACS to provide services related to foster care, adoption, preventive, child care, or Head Start services.

B. Requirements for All Social Service Workers

1. **SCR Reporting**

- a. Mandated reporters have an enhanced mandate to report. In addition to being required to report under the same circumstances as other mandated reporters, social service workers are required to report or cause a report to be made to the SCR when they have reasonable cause to suspect that a child is an abused or maltreated child when any person (not just a parent, guardian, custodian, or person legally responsible) comes before them in their professional or official capacity and states from personal knowledge facts, conditions, or circumstances which, if correct, would render a child an abused or maltreated child.
- b. Once the mandated reporter makes the report to the SCR via phone call at 1-800-635-1522, he or she must notify ACS or the provider agency for which he or she works that a report to the SCR has been made.

2. **Notifications**

- a. Agency provider staff
 - i. Agency provider staff member who makes a report to the SCR must notify the person in charge of their agency that a report has been made.
 - ii. The person in charge of the agency is responsible for all subsequent internal action that must follow such a report. These actions include

making sure that the LDSS 2221A form³ (Attachment A) is completed and submitted to ACS within 48 hours of an oral report to the SCR.⁴

- iii. Other subsequent internal action may include providing follow-up information to a Child Protective Specialist (CPS) in the ACS Division of Child Protection (DCP), e.g., relevant information contained in the child's education record.

b. ACS staff

Within 48 hours of making an oral report to the SCR, ACS staff members must complete and forward LDSS 2221A to the Borough Field Office Application Division (Attachment B) for the borough in which the child resides.⁵ CPS must notify their immediate supervisor for all subsequent internal action that must follow such a report.

C. Failure to Report

1. Any mandated reporter who willfully fails to report a case of suspected child abuse or maltreatment shall be guilty of a class A misdemeanor.
2. Any mandated reporter who knowingly and willfully fails to report a case of suspected child abuse or maltreatment shall be civilly liable for the damages proximately caused by the failure to report.⁶
3. Immunity from liability: Any mandated reporter who makes a report in good faith shall have immunity from civil or criminal liability. The good faith of a mandated reporter shall be presumed provided that the mandated reporter was acting in the course of their duties and within the scope of their employment, and that such liability did not result from the willful misconduct or gross negligence of the mandated reporter.⁷

³ LDSS 2221A, New York State Office of Children and Family Services Report of Suspected Child Abuse or Maltreatment.

⁴ See SSL § 415.

⁵ See SSL § 415.

⁶ See SSL § 420.

⁷ See SSL § 419.

III. Vulnerable Persons' Central Register (VPCR)/Justice Center⁸

- A. The Vulnerable Persons' Central Register (VPCR) is a statewide hotline available 24 hours a day, seven (7) days a week that accepts reports of abuse, neglect, and maltreatment of people receiving services in ACS or provider run residential facilities. This includes all children in residential settings (e.g., the Children's Center, diagnostic reception centers (DRCs), residential treatment centers (RTCs), and group homes).
- B. Once reports are accepted by the hotline, either the New York State Justice Center (Justice Center) or another designated New York State agency may investigate the allegations and take steps to ameliorate any risk to the victim. See Section C below for VPCR definitions.

C. Definitions

1. **Mandated Reporters for the VPCR**

Mandated reporters are custodians and human services professionals.

- a. Custodians: Employees, volunteers, directors, operators, consultants, employees, or volunteers of covered facilities and programs;⁹ as well as consultants, employees, or volunteers of a corporation, organization, or governmental entity which provides goods or services to a facility or provider agency pursuant to contract or other arrangement that permits them to have regular and substantial contact with the children being served.

⁸ See ACS Policy and Procedure, *Vulnerable Persons Central Register (VPCR) Reportable Incidents and Notification* for more information.

⁹ Facilities and programs that are operated, certified, or licensed by the Office for People With Developmental Disabilities (OPWDD); facilities and programs that are operated, certified, or licensed by the Office of Mental Health (OMH), except Secure Treatment Facilities and programs located in correctional facilities; facilities and programs that are operated, certified, or licensed by the Office of Alcoholism and Substance Abuse Services (OASAS); facilities and programs operated by the Office of Children and Family Services (OCFS) for youth placed in the custody of the Commissioner of OCFS; OCFS licensed or certified residential facilities that care for abandoned, abused, neglected, and dependent children, Persons In Need of Supervision, or juvenile delinquents; Family Type Homes for Adults; OCFS certified runaway and homeless youth programs; and OCFS certified youth detention facilities; adult homes licensed by the Department of Health (DOH) that have over 80 beds, and where at least 25% of the residents are persons diagnosed with a serious mental illness and have fewer than 55% of beds designated as Assisted Living Program (ALP) beds; overnight summer day and traveling summer day camps for children with developmental disabilities under the jurisdiction of DOH; New York State School for the Blind; New York State School for the Deaf; State-supported (4201) schools that have a residential component; special act school districts; and in-state private residential schools approved by the New York State Education Department (NYSED).

b. Human services professionals:

Child Care or Foster Care Worker; Chiropractor; Christian Science Practitioner; Coroner; Dental Hygienist; Dentist; District Attorney or Assistant District Attorney; Emergency Medical Technician; Hospital Personnel engaged in the admission, examination, care, or treatment of persons; Intern; Investigator employed in the office of the district attorney; any other Law Enforcement Official; Licensed Creative Arts Therapist; Licensed Marriage and Family Therapist; Licensed Mental Health Counselor; Licensed Occupational Therapist; Licensed Physical Therapist; Licensed Practical Nurse; Licensed Psychoanalyst; Licensed Speech/Language Pathologist/Audiologist; Medical Examiner; Mental Health Professional; Nurse Practitioner; NYS Office of Alcoholism and Substance Abuse - all persons credentialed by OASAS; Optometrist; Osteopath; Peace Officer; Physician; Podiatrist; Police Officer; Psychologist; Registered Nurse; Registered Physician's Assistant; Resident (medical); Social Services Worker; Social Worker; Surgeon, and School Official, including but not limited to: School Teacher, School Guidance Counselor; School Psychologist; School Social Worker; School Nurse; School Administrator; or other school personnel required to hold teaching or administrative license or certificate.

2. **Vulnerable Persons:** a person who is receiving residential care and services from a facility run by ACS or by a provider contracted by ACS and overseen by OCFS.
3. **Facilities/Provider Agency:** Any residential programs or facilities licensed or certified by OCFS, excluding foster family homes.¹⁰
4. **Reportable Incident:** A mandated reporter is required to report the following to the VPCR:
 - a. Physical abuse;
 - b. Sexual abuse;
 - c. Psychological abuse;
 - d. Deliberate inappropriate use of restraints;
 - e. Use of aversive conditioning;
 - f. Obstruction of reports of reportable incidents;
 - g. Unlawful use or administration of a controlled substance;
 - h. Neglect; and
 - i. Significant incidents.

¹⁰ See SSL § 488 (4)(b).

5. Abuse

- a. **Physical abuse:** Conduct by a custodian intentionally or recklessly causing, by physical contact, physical injury or serious or protracted impairment of the physical, mental, or emotional condition of a service recipient or causing the likelihood of such injury or impairment.¹¹
 - i. Allegations of physical abuse shall also be reported to the VPCR if a vulnerable person suffers an injury that cannot be explained and is suspicious due to its extent or location.
 - ii. Physical abuse shall not include reasonable emergency interventions necessary to protect the safety of any person.¹²
- b. **Sexual abuse:** Conduct¹³ including, but not limited to, inappropriate touching, indecent exposure, sexual assault, taking or distributing sexually explicit photos, voyeurism and other sexual exploitation.¹⁴ Allowing someone else to commit any of these acts against a vulnerable person shall also constitute sexual abuse. This includes, but is not limited to, inappropriate touching, indecent exposure, sexual assault, taking or distributing sexually explicit photos, voyeurism and other sexual exploitation.¹⁵ Allowing someone else to commit any of these acts against a vulnerable person shall also constitute sexual abuse.
- c. **Psychological or emotional abuse:** Conduct by a custodian that intentionally or recklessly causes, by verbal or non-verbal conduct, a substantial diminution of a service recipient's emotional, social or behavioral development or condition, or causing the likelihood of such diminution.¹⁶

¹¹ SSL 488(1)(a). Such conduct may include but is not limited to: slapping, hitting, kicking, biting, choking, smothering, shoving, dragging, throwing, punching, shaking, burning, cutting, or the use of corporal punishment.

¹² See Policy #2016/09 *Safe Intervention Policy for the Children's Center*.

¹³ Conduct by a custodian that subjects a person receiving services to any offense defined in Penal Law 130 or 255.25, 255.26 or 255.26; or any conduct or communication by the custodian that allows, permits, uses or encourages a service recipient to engage in any act described in Penal Law 130 or 163.

¹⁴ See SSL 488(1)(b), which defines "sexual abuse" as any conduct by a custodian that subjects a person receiving services to any offense defined in Article one hundred thirty or section 255.25, 255.26, or 255.27 of the penal law; or any conduct or communication by such custodian that allows, permits, uses, or encourages a service recipient to engage in any act described in articles 230 or 263 of the penal law.

¹⁵ See SSL 4188(1)(b), which defines "sexual abuse" as any conduct by a custodian that subjects a person receiving services to any offense defined in Article one hundred thirty or section 255.25, 255.26, or 255.27 of the penal law; or any conduct or communication by such custodian that allows, permits, uses, or encourages a service recipient to engage in any act described in articles 230 or 263 of the penal law.

¹⁶ SSL 488(1)(c).

- i. Such actions shall be supported by a clinical assessment performed by a physician, psychologist, psychiatric nurse practitioner, licensed clinical or master social worker or licensed mental health counselor.¹⁷
 - ii. Includes, but is not limited to, intimidation, threats, the display of a weapon or other object that could reasonably be perceived by a service recipient as a means for infliction of pain or injury, in a manner that constitutes a threat of physical pain or injury, taunts, derogatory comments or ridicule.¹⁸
- d. Deliberate inappropriate use of restraints: Includes the use of a restraint when the technique that is used, the amount of force that is used or the situation in which the restraint is used is deliberately inconsistent with a service recipient's individual treatment plan or behavioral support plan, generally accepted treatment practices and/or applicable federal or state laws, regulations or policies.
 - i. Exception: when the restraint is used as a reasonable emergency intervention to prevent imminent risk of harm to a person receiving services or to any other person.
 - ii. For purposes of this subdivision, a "restraint" shall include the use of any manual, pharmacological or mechanical measure or device to immobilize or limit the ability of a person receiving services to freely move his or her arms, legs or body.¹⁹
- e. Aversive conditioning: The application of a physical stimulus that is intended to induce pain or discomfort in order to modify or change the behavior of a person receiving services in the absence of a person-specific authorization by the operating, licensing, or certifying state agency pursuant to governing state agency regulations.²⁰ This may include, but is not limited to, the use of physical stimuli such as noxious odors, noxious tastes, blindfolds, the withholding of meals and the provision of substitute foods in an unpalatable form and movement limitations used as punishment including, but not limited to, helmets and mechanical restraint devices.
- f. Obstruction of reports of reportable incidents: Impeding the discovery, reporting or investigation of the treatment of a service recipient by:

¹⁷ SSL 488(1)(c).

¹⁸ SSL 488(1)(c).

¹⁹ See ACS Policy and Procedure #2016/09, *Safe Intervention Policy for the Children's Center*; see also SSL 488(1)(d).

²⁰ SSL 488(1)(e).

- i. Falsifying records related to the safety, treatment, or supervision of a service recipient;
 - ii. Intentionally making false statements or intentionally withholding material information during an investigation into such a report;
 - iii. Intentionally withholding material information during an investigation;
 - iv. Actively persuading a mandated reporter from making a report of a reportable incident to the VPCR with the intent to suppress the reporting of the investigation of such incident;
 - v. The intentional failure of a supervisor or manager to act upon a report of abuse or neglect in accordance with governing state agency regulations, policies, or procedures; or
 - vi. A mandated reporter's failure to report a reportable incident upon discovery.²¹
- g. Unlawful use or administration of a controlled substance: The administration of a controlled substance by a custodian to a service recipient without a prescription or of a medication that is not approved by the United States Food and Drug Administration. This shall also include a custodian's unlawful use or distribution of a controlled substance at the workplace or while on duty.²²
6. **Neglect**: Any action, inaction or lack of attention that breaches a custodian's duty and that results in, or is likely to result in, physical injury or serious or protracted impairment of the physical, mental or emotional condition of a service recipient. Neglect shall include, but is not limited to:
- a. Failure to provide proper supervision, including a lack of proper supervision that results in conduct between persons receiving services that would constitute "abuse" if committed by a custodian;
 - b. Failure to provide adequate food, clothing, shelter, medical, dental, optometric or surgical care, consistent with the rules or regulations promulgated by the state agency operating, certifying or supervising the facility or provider agency, provided that the facility or provider agency has reasonable access to the provision of such services and that necessary consents to any such medical, dental, optometric or surgical treatment have been sought and obtained from the appropriate individuals; or

²¹ SSL 488(1)(f).

²² SSL 488(1)(g).

- c. Failure to provide access to educational instruction, by a custodian with a duty to ensure that an individual receives access to such instruction in accordance with the provisions of part one of article sixty-five of the education law and/or the individual's individualized education program (IEP).²³
7. **Significant Incident:** An incident, other than an incident of abuse or neglect, that because of its severity or the sensitivity of the situation may result in or has the reasonably foreseeable potential to result in harm to the health, safety, or welfare of a person receiving services and includes but is not limited to:
- a. Conduct between persons receiving services that would constitute abuse if committed by a custodian; or
 - b. Conduct on the part of a custodian, which is inconsistent with a service recipient's individual treatment plan or individualized educational program, generally accepted treatment practices, and/or applicable federal or state laws, regulations, or policies and which impairs or creates a reasonably foreseeable potential to impair the health, safety, or welfare of a person receiving services, including but not limited to:
 - i. Unauthorized seclusion, which shall mean the placement of a person receiving services in a room or area from which he or she cannot, or perceives that he or she cannot, leave at will;
 - ii. Unauthorized use of time-out, which shall mean the use of a procedure in which a person receiving services is removed from regular programming and isolated in a room or area for the convenience of a custodian, or as a substitute for programming but shall not include the use of a time-out as an emergency intervention to protect the health or safety of the individual or other persons;
 - iii. The administration of a prescribed or over-the-counter medication, which is inconsistent with a prescription or order issued for a service recipient by a licensed, qualified health care practitioner, and which has an adverse effect on a service recipient. For purposes of this paragraph, "adverse effect" shall mean the unanticipated and undesirable side effect from the administration of a particular medication which unfavorably affects the well-being of a service recipient;

²³ SSL 488(1)(h).

- iv. Inappropriate use of restraints, which shall mean the use of a restraint when the technique that is used, the amount of force that is used or the situation in which the restraint is used is inconsistent with a service recipient's individual plan, generally accepted treatment practices and/or applicable federal or state laws, regulations or policies. A "restraint" shall include the use of any manual, pharmacological, or mechanical measure or device to immobilize or limit the ability of a person receiving services to freely move his or her arms, legs or body; or
 - c. Any other conduct identified in OCFS regulations, pursuant to guidelines or standards established by the executive director.
8. **Reasonable Cause:** based on observations, training, and experience, the mandated reporter has a suspicion that a vulnerable person has been subject to abuse, neglect, or a significant incident.

D. Required Reporting

1. Mandated reporters must immediately report to the Justice Center if they have reasonable cause to suspect abuse, neglect, or significant incidents of a child receiving residential services in either an ACS or provider run residential facility. Certain mandated reporters may submit reports via an online form on the Justice Center website.
2. All reportable incidents must be reported to the Justice Center at 1-855-373-2122, 1-855-373-2121 for hearing impaired individuals making reports, or by completing the form on the Justice Center website.
3. If a mandated reporter has doubts about whether the available information indicates reasonable cause, he or she should call the VPCR.
4. If a service recipient dies while in residential care, the director of the residential facility must immediately report the death to the following hotline number: 1-855-373-2124.
5. Reporting to the VPCR does not relieve the mandated reporter of any other reporting requirements or duties that may be required by law, regulation, or policy, including contacting law enforcement as necessary. Staff must consult with their supervisors to determine whether law enforcement should be contacted.

E. Information to Report²⁴

1. Details regarding the victim, suspect, and witnesses;
2. Details of the incident, including the date and time, location, description of incident, and the injury/impact to the victim;
3. The state agency responsible for oversight of the agency, facility, and/or program;
4. The name and address of the agency, facility, and/or program;
5. Confirmation that immediate protections are in place for the victims, if applicable; and
6. Any other information that may assist with the investigation or review of the incident.

F. VPCR Mandated Reporters Protections

1. Immunity from liability when the mandated reporter provides information to the VPCR in good faith
2. Protection from retaliatory personnel action when the mandated reported provides information to the VPCR in good faith
3. Confidentiality in terms of protections against disclosure of the reporter's identity, subject to limited exceptions such as the reporter's consent or a court order

G. Failure to Report

Failure by a mandated reporter to report a reportable incident to the VPCR is a serious matter and possible consequences include administrative discipline, termination, civil liability, and criminal prosecution.

²⁴ Note: Mandated are required to report to the VPCR even if they may not have all of the information in VIII. C.

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
**REPORT OF SUSPECTED
CHILD ABUSE OR MALTREATMENT**

Report Date	Case ID	Call ID
Time : <input type="checkbox"/> AM <input type="checkbox"/> PM	Local Case #	Local Dist/Agency

SUBJECTS OF REPORT

List all children in household, adults responsible and alleged subjects.										
Line #	Last Name	First Name	Aliases	Sex (M, F, Unk)	Birthday or Age Mo/Day/ Yr	Race Code	Ethnicity (Ck Only If Hispanic/Latino)	Relation Code	Role Code	Lang. Code
1.							<input type="checkbox"/>			
2.							<input type="checkbox"/>			
3.							<input type="checkbox"/>			
4.							<input type="checkbox"/>			
5.							<input type="checkbox"/>			
6.							<input type="checkbox"/>			
7.							<input type="checkbox"/>			

MORE

List Addresses and Telephone Numbers (Using Line Numbers From Above)	(Area Code) Telephone No.

BASIS OF SUSPICIONS

Alleged suspicions of abuse or maltreatment. Give child(ren)'s line number(s). If all children, write "ALL".

- | | | |
|---|---|---|
| <input type="checkbox"/> DOA/Fatality | <input type="checkbox"/> Child's Drug/Alcohol Use | <input type="checkbox"/> Swelling/Dislocation/Sprains |
| <input type="checkbox"/> Fractures | <input type="checkbox"/> Poisoning/Noxious Substances | <input type="checkbox"/> Educational Neglect |
| <input type="checkbox"/> Internal Injuries (e.g., Subdural Hematoma) | <input type="checkbox"/> Choking/Twisting/Shaking | <input type="checkbox"/> Emotional Neglect |
| <input type="checkbox"/> Lacerations/Bruises/Welts | <input type="checkbox"/> Lack of Medical Care | <input type="checkbox"/> Inadequate Food/Clothing/Shelter |
| <input type="checkbox"/> Burns/Scalding | <input type="checkbox"/> Malnutrition/Failure to Thrive | <input type="checkbox"/> Lack of Supervision |
| <input type="checkbox"/> Excessive Corporal Punishment | <input type="checkbox"/> Sexual Abuse | <input type="checkbox"/> Abandonment |
| <input type="checkbox"/> Inappropriate Isolation/Restraint (Institutional Abuse Only) | <input type="checkbox"/> Inadequate Guardianship | <input type="checkbox"/> Parent's Drug/Alcohol Misuse |
| <input type="checkbox"/> Inappropriate Custodial Conduct (Institutional Abuse Only) | <input type="checkbox"/> Other (specify) _____ | |

State reasons for suspicion, including the nature and extent of each child's injuries, abuse or maltreatment, past and present, and any evidence or suspicions of "Parental" behavior contributing to the problem. (If known, give time/date of alleged incident)

MO
DAY
YR

Time : AM PM

Additional sheet attached with more explanation. The Mandated Reporter Requests Finding of Investigation YES NO

CONFIDENTIAL

SOURCE(S) OF REPORT

CONFIDENTIAL

NAME	(Area Code) TELEPHONE	NAME	(Area Code) TELEPHONE
ADDRESS		ADDRESS	
AGENCY/INSTITUTION		AGENCY/INSTITUTION	

RELATIONSHIP

- Med. Exam/Coroner Physician Hosp. Staff Law Enforcement Neighbor Relative Instit. Staff
 Social Services Public Health Mental Health School Staff Other (Specify) _____

For Use By Physicians Only	Medical Diagnosis on Child	Signature of Physician who examined/treated child	(Area Code) Telephone No.
	Hospitalization Required: <input type="checkbox"/> None <input type="checkbox"/> Under 1 week <input type="checkbox"/> 1-2 weeks <input type="checkbox"/> Over 2 weeks		
Actions Taken Or <input type="checkbox"/> Medical Exam <input type="checkbox"/> X-Ray <input type="checkbox"/> Removal/Keeping <input type="checkbox"/> Not. Med Exam/Coroner About To Be Taken <input type="checkbox"/> Photographs <input type="checkbox"/> Hospitalization <input type="checkbox"/> Returning Home <input type="checkbox"/> Notified DA			
Signature of Person Making This Report:		Title	Date Submitted Mo. Day Yr.
X			

TO ACCESS A COPY OF THE LDSS-2221A FORM: Via Internet: <http://www.ocfs.state.ny.us/main/forms/cps/>
Via Intranet: <http://ocfs.state.nyenet/admin/forms/SCR/> OR

TO ORDER A SUPPLY OF FORMS ACCESS FORM (OCFS-4627) Request for Forms and Publications, from either site above, fill it out and send to: **Office of Children and Family Services, Resource Distribution Center, 11 Fourth Ave, Rensselaer, NY 12144.**

If you have difficulty accessing this form from either site, you can call **The Forms Hot Line at 518-473-0971**. Leave a detailed message including your name, address, city, state, the form number you need, the quantity and a phone number in case we need to contact you.

NEW YORK STATE OFFICE OF CHILDREN AND FAMILY SERVICES

RACE CODE	ETHNICITY CODE	RELATION CODES FAMILIAL REPORTS (Choose One)		ROLE CODE (Choose One)	LANGUAGE CODE (Choose One)	
AA: Black or African-American	<i>(Check Only If Hispanic/ Latino)</i>	AU: Aunt/Uncle	XX: Other	AB: Abused Child	CH: Chinese	KR: Korean
AL: Alaskan Native		CH: Child	PA: Parent	MA: Maltreated Child	CR: Creole	MU: Multiple
AS: Asian		GP: Grandparent	PS: Parent Substitute	AS: Alleged Subject (Perpetrator)	EN: English	PL: Polish
NA: Native American		FM: Other Family Member	UH: Unrelated Home Member	NO: No Role	FR: French	RS: Russian
PI: Native Hawaiian/Pacific Islander		FP: Foster Parent	UK: Unknown	UK: Unknown	GR: German	SI: Sign
WH: White		DC: Daycare Provider	IAB REPORTS ONLY		HI: Hindi	SP: Spanish
XX: Other		AR: Administrator	IN: Instit. Non-Prof		HW: Hebrew	VT: Vietnamese
UNK: Unknown		CW: Child Care Worker	IP: Instit. Pers/Vol.		IT: Italian	XX: Other
		DO: Director/Operator	PI: Psychiatric Staff		JP: Japanese	

Abstract of Sections from Article 6, Title 6, Social Services Law

Section 412. Definitions

1. **Definition of Child Abuse**, (see also N.Y.S. Family Court Act Section 1012(e))

An "abused child" is a child less than eighteen years of age whose parent or other person legally responsible for his care:

- 1) Inflicts or allows to be inflicted upon the child serious physical injury, or
- 2) Creates or allows to be created a substantial risk of physical injury, or
- 3) Commits sexual abuse against the child or allows sexual abuse to be committed.

2. **Definition of Child Maltreatment**, (see also N.Y.S. Family Court Act, Section 1012(f))

A "maltreated child" is a child under eighteen years of age whose physical, mental or emotional condition has been impaired or is in imminent danger of becoming impaired as a result of the failure of his parent or other person legally responsible for his care to exercise a minimum degree of care:

- 1) in supplying the child with adequate food, clothing, shelter, education, medical or surgical care, though financially able to do so or offered financial or other reasonable means to do so; or
- 2) in providing the child with proper supervision or guardianship; or
- 3) by unreasonably inflicting, or allowing to be inflicted, harm or a substantial risk thereof, including the infliction of excessive corporal punishment; or
- 4) by misusing a drug or drugs; or
- 5) by misusing alcoholic beverages to the extent that he loses self-control of his actions; or
- 6) by any other acts of a similarly serious nature requiring the aid of the Family Court; or
- 7) By abandoning the child.

Section 415. Reporting Procedure. Reports of suspected child abuse or maltreatment shall be made immediately by telephone and in writing within 48 hours after such oral report.

Submit the written paper copy of the LDSS-2221A form originally signed to: the County Department of Social Services (DSS) where the abused/maltreated child resides. To locate your local DSS, visit this site <http://www.ocfs.state.ny.us/main/localdss.asp>.

Residential Institutional Abuse Reports: Submit a paper copy of form, LDSS 2221A, **originally signed**. It must be submitted **directly** to the Office of Children and Family Services (OCFS) Regional Office, associated with the county in which the abused/maltreated child is in care.

**NYS CHILD ABUSE AND MALTREATMENT REGISTER: 1-800-635-1522 (FOR MANDATED REPORTERS ONLY)
1-800-342-3720 (FOR PUBLIC CALLERS)**

Section 419. Immunity from Liability. Pursuant to Section 419 of the Social Services Law, any person, official, or institution participating in good faith in the making of a report of suspected child abuse or maltreatment, the taking of photographs, or the removal or keeping of a child pursuant to the relevant provisions of the Social Services Law shall have immunity from any liability, civil or criminal, that might otherwise result by reason of such actions. For the purpose of any proceeding, civil or criminal, the good faith of any such person, official, or institution required to report cases of child abuse or maltreatment shall be presumed, provided such person, official or institution was acting in discharge of their duties and within the scope of their employment, and that such liability did not result from the willful misconduct or gross negligence of such person, official or institution.

Section 420. Penalties for Failure to Report.

1. Any person, official, or institution required by this title to report a case of suspected child abuse or maltreatment who willfully fails to do so shall be guilty of a class A misdemeanor.
2. Any person, official, or institution required by this title to report a case of suspected child abuse or maltreatment who knowingly and willfully fails to do so shall be civilly liable for the damages proximately caused by such failure.

STAPLE TO LDSS-2221A (IF NEEDED)

**REPORT OF SUSPECTED
CHILD ABUSE OR MALTREATMENT**

(Use only if the space on the LDSS-2221A under "Reasons for Suspicion" is not enough to accommodate your information)

Report Date	Case ID	Call ID
Time <input type="checkbox"/> AM : <input type="checkbox"/> PM	Local Case #	Local Dist/Agency

**PERSON MAKING
THIS REPORT:** _____

Print clearly if filling out hard copy.

<p>Continued: State reasons for suspicion, including the nature and extent of each child's injuries, abuse or maltreatment, past and present, and any evidence or suspicions of "Parental" behavior contributing to the problem.</p>	<p>(If known, give time/date of alleged incident)</p> <p>MO DAY YR</p> <p>Time : <input type="checkbox"/> AM <input type="checkbox"/> PM</p>
---	--

Attachment B

Contact the borough office where the abused or maltreated child lives to send the LDSS 2221A form

Borough or Division	Address	Phone Number
Bronx	2501 Grand Concourse	718-933-1731
Brooklyn	1274 Bedford Avenue	718-623-4595/4531
Manhattan	55 West 125 th Street	212-534-6975/7027
Queens	165-15 Archer Avenue	718-557-8939
Staten Island	350 St. Mark's Place	718-720-2817
Office of Special Investigations	127 West 127 th Street	212-280-9776/9537/9549



Summary Guide for Mandated Reporters in New York State



This material provides mandated reporters with an overview of their obligations and some basic information about the New York State Child Protective Services (CPS) system.

Who Are Mandated Reporters?

New York State recognizes that certain professionals are specially equipped to perform the important role of mandated reporter of child abuse or maltreatment. Those professionals include:

- * Physician
- * Registered physician's assistant
- * Surgeon
- * Medical examiner
- * Coroner
- * Dentist
- * Dental hygienist
- * Osteopath
- * Optometrist
- * Chiropractor
- * Podiatrist
- * Resident
- * Intern
- * Psychologist
- * Registered nurse
- * Social worker
- * Emergency medical technician
- * Licensed creative arts therapist
- * Licensed marriage and family therapist
- * Licensed mental health counselor
- * Licensed psychoanalyst
- * Hospital personnel engaged in the admission, examination, care, or treatment of persons
- * Christian Science practitioner
- * School official, including (but not limited to):
 - school teacher
 - school guidance counselor
 - school psychologist
 - school social worker
- school nurse
- school administrator or other school personnel required to hold a teaching or administrative license or certificate
- * Social services worker
- * Director of a children's overnight camp, summer day camp or traveling summer day camp
- * Day care center worker
- * School-age child care worker
- * Provider of family or group family day care
- * Employee or volunteer in a residential care facility for children
- * Any other child care or foster care worker
- * Mental health professional
- * Substance abuse counselor
- * Alcoholism counselor
- * All persons credentialed by the NYS Office of Alcoholism and Substance Abuse Services
- * Peace officer
- * Police officer
- * District attorney or assistant district attorney
- * Investigator employed in the office of the district attorney
- * Any other law enforcement official

The entire current list can be found in Article 6, Title 6, Section 413 of the New York Social Services Law, which can be accessed online through the New York State Legislature's Website (<http://public.leginfo.state.ny.us/menuf.cgi>). Click on Laws of New York to access Social Services Law.

When Am I Mandated to Report?


Mandated reporters are required to report suspected child abuse or maltreatment when they are presented with a **reasonable cause** to suspect child abuse or maltreatment in a situation where a child, parent, or other person legally responsible for the child is before the mandated reporter when the mandated reporter is acting in his or her official or professional capacity. "Other person legally responsible" refers to a guardian, caretaker, or other person 18 years of age or older who is responsible for the care of the child.

Mandated reporters who are social services workers have expanded reporting requirements. Social services workers are

required to report when, in their official or professional role, they are presented with a reasonable cause to suspect child abuse or maltreatment where **any person** is before the mandated reporter and the mandated reporter is acting in his or her official or professional capacity.

What is a Professional Role?

For example, a doctor examining a child in her practice who has a reasonable suspicion of abuse must report her concern. In contrast, the doctor who witnesses child abuse when riding her bike while off-duty is not mandated to report that abuse. The mandated reporter's legal responsibility to report suspected child abuse or maltreatment ceases when the mandated



reporter stops practicing his/her profession. **Of course, anyone may report any suspected abuse or maltreatment at any time and is encouraged to do so.**

Reasonable Cause to Suspect

Reasonable cause to suspect child abuse or maltreatment means that, based on your rational observations, professional training and experience, you have a suspicion that the parent or other person legally responsible for a child is responsible for harming that child or placing that child in imminent danger of harm. Your suspicion can be as simple as distrusting an explanation for an injury.

What Is Abuse and Maltreatment?

Abuse

Abuse encompasses the most serious injuries and/or risk of serious injuries to children by their caregivers. An abused child is one whose parent or other person legally responsible for his or her care inflicts serious physical injury upon the child, creates a substantial risk of serious physical injury, or commits a sex offense against the child. Abuse also includes situations where a parent or other person legally responsible knowingly allows someone else to inflict such harm on a child.

Maltreatment (includes Neglect)

Maltreatment means that a child's physical, mental or emotional condition has been impaired, or placed in imminent danger of impairment, by the failure of the child's parent or other person legally responsible to exercise a minimum degree of care by:

- * failing to provide sufficient food, clothing, shelter, education; or
- * failing to provide proper supervision, guardianship, or medical care (refers to all medical issues, including dental, optometric, or surgical care); or
- * inflicting excessive corporal punishment, abandoning the child, or misusing alcohol or other drugs to the extent that the child was placed in imminent danger.

Poverty or other financial inability to provide the above is not maltreatment.

Note: The definitions of abuse and maltreatment are different for children in residential facilities operated or licensed by the state.

How Do I Recognize Child Abuse and Maltreatment?

The list that follows contains some common indicators of abuse or maltreatment. This list is not all-inclusive, and some abused or maltreated children may not show any of these symptoms.

Indicators of Physical Abuse Can Include:

- * Injuries to the eyes or both sides of the head or body (accidental injuries typically only affect one side of the body);
- * Frequent injuries of any kind (bruises, cuts, and/or burns), especially if the child is unable to provide an adequate explanation of the cause. These may appear in distinctive patterns such as grab marks, human bite marks, cigarette burns, or impressions of other instruments;
- * Destructive, aggressive, or disruptive behavior;
- * Passive, withdrawn, or emotionless behavior;
- * Fear of going home or fear of parent(s).

Indicators of Sexual Abuse Can Include:

- * Symptoms of sexually transmitted diseases;
- * Injury to genital area;
- * Difficulty and/or pain when sitting or walking;
- * Sexually suggestive, inappropriate, or promiscuous behavior or verbalization;
- * Expressing age-inappropriate knowledge of sexual relations;
- * Sexual victimization of other children.

Indicators of Maltreatment Can Include:

- * Obvious malnourishment, listlessness, or fatigue;
- * Stealing or begging for food;
- * Lack of personal care—poor personal hygiene, torn and/or dirty clothes;
- * Untreated need for glasses, dental care, or other medical attention;
- * Frequent absence from or tardiness to school;
- * Child inappropriately left unattended or without supervision.



Where Do I Call to Make a Report?

As soon as you suspect abuse or maltreatment, you must report your concerns by telephone to the New York Statewide Central Register of Child Abuse and Maltreatment (SCR). The SCR is open 24 hours a day, seven days a week, to receive your call. The timeliness of your call is vital to the timeliness of intervention by the local department of social services' Child Protective Services (CPS) unit. You are not required to notify the parents or other persons legally responsible either before or after your call to the SCR. In fact, in some cases, alerting the parent may hinder the local CPS investigation and adversely affect its ability to assess the safety of the children.

The telephone numbers to report abuse or maltreatment are:

Mandated Reporter (800) 635-1522
Public Hotline (800) 342-3720

Two counties run child abuse hotlines that may be used instead of the SCR:

Onondaga County (315) 422-9701
Monroe County (585) 461-5690

Oral reports to the SCR from a mandated reporter must be followed within 48 hours by a written report to the local department of social services' CPS unit on form LDSS-2221A. A copy of this form and the local mailing address can be obtained by contacting your local department of social services, or by visiting the New York State Office of Children and Family Services (OCFS) website at www.ocfs.state.ny.us. Click on "Forms" and then "Child Protective Services" to access LDSS-2221A. Click on "contact us" and scroll down to "Contacting Your Local Department of Social Services" for addresses.

What Happens When I Call the SCR?

There may be times when you have very little information on which to base your suspicion of abuse or maltreatment, but this should not prevent you from calling the SCR. A trained specialist at the SCR will help to determine if the information you are providing can be registered as a report. The LDSS-2221A mandated reporter form can be used to help you organize the identifying or demographic information you have at your disposal.

Be sure to ask the SCR specialist for the "Call I.D." assigned to the report you have made.

If the SCR staff does not register the child abuse or maltreatment report, the reason for the decision should be clearly explained to you. You may also request to speak to a supervisor, who can help make determinations in difficult or unusual cases.

Local CPS Role and Responsibilities

When a report is registered at the SCR, the local department of social services is immediately notified for investigation and follow-up. A local CPS caseworker will initiate an investigation within 24 hours.

CPS intervention consists of an evaluation of the child and other children in the home and the development of a plan to meet the needs of the child and family. If there is an immediate threat to the child's life or health, CPS may remove the child from the home.

Upon request, CPS may obtain from the mandated reporter those records that are essential to a full investigation of alleged child abuse and maltreatment for any report made by the mandated reporter. The mandated reporter must determine which records are essential to the full investigation and provide those records to CPS when requested to do so.

Within 60 days of initiating the investigation, CPS will determine whether the report is indicated or unfounded. Mandated reporters may ask to be informed of the outcome of the report.

Law Enforcement Referrals

If a call to the SCR provides information about an immediate threat to a child or a crime committed against a child, but the perpetrator is not a parent or other person legally responsible for the child, the SCR staff will make a Law Enforcement Referral (LER). The relevant information will be recorded and transmitted to the New York State Police Information Network or to the New York City Special Victims Liaison Unit. This is not a CPS report, and local CPS will not be involved.



What Protection or Liability Do I Have?

Source Confidentiality

The Social Services Law provides confidentiality for mandated reporters and all sources of child abuse and maltreatment reports. OCFS and local CPS are not permitted to release to the subject of the report any data that would identify the source of a report unless the source has given written permission for them to do so. Information regarding the source of the report may be shared with court officials, police, and district attorneys, but only in certain circumstances.

Immunity from Liability

If a mandated reporter makes a report with earnest concern for the welfare of a child, he or she is immune from any criminal or civil liability that might result. This is referred to as making a report in “good faith.”

Protection from Retaliatory Personnel Action

Section 413 of the Social Services Law specifies that no medical or other public or private institution, school, facility or agency shall take any retaliatory personnel action against an employee who made a report to the SCR. Furthermore, no school, school official, child care provider, foster care provider, or mental health facility provider shall impose any conditions, including prior approval or prior notification, upon a member of their staff mandated to report suspected child abuse or maltreatment.

Penalties for Failure to Report

Anyone who is mandated to report suspected child abuse or maltreatment—and fails to do so—could be charged with a Class A misdemeanor and subject to criminal penalties. Further, mandated reporters can be sued in a civil court for monetary damages for any harm caused by the mandated reporter's failure to make a report to the SCR.

Who Provides Training for Mandated Reporters?

The New York State Education Department (SED) Office of the Professions oversees the training requirements for mandated reporters. Some categories—including teachers, many medical professionals, and social workers—need this training as part of their licensing requirement. The training may be included in their formal education program.

The New York State Office of Children and Family Services (OCFS) is proud to be a certified provider authorized by SED to offer mandated reporter training, and has developed a comprehensive curriculum with content customized to medical professionals, educators, law enforcement personnel, day care providers, and human services staff. OCFS has shared this well-

received curriculum with other certified providers of mandated reporter training, as well as with colleges and universities across the state that provide educational programming in the fields covered by the mandated reporter statute.

OCFS provides mandated reporter training through a contractual agreement with the Center for Development of Human Services (CDHS), part of the Research Foundation of SUNY, Buffalo State College.

All training offered through OCFS, including the *new two-hour self-directed online training course*, the two-day Training for Trainers, and satellite video conferences, are accessible at no cost to the participant at www.nysmandatedreporter.org.

Special Note: *Mandated Reporters who require licensure or certification through the New York State Department of Education (NYSED) are required to take mandated reporter training from a trainer who has been approved by the New York State Education Department. For more information, please go to www.op.nysed.gov or contact the New York State Education Department at OPPLEUCA@mail.NYSED.gov.*

Conclusion

Protecting children and preventing child abuse and maltreatment does not begin or end with reporting. Efforts to prevent child abuse and maltreatment can only be effective when mandated reporters and other concerned citizens work together to improve the safety net in their communities.

To be most effective, your local CPS needs strong partnerships within your community. By getting to know the staff in your local CPS unit, you will gain a better understanding of how your local program is structured, and CPS will better understand how to work more effectively with you.

By working together, we can better protect our vulnerable children.

New York State Office of Children & Family Services

Capital View Office Park, 52 Washington Street
Rensselaer, New York 12144

Visit our website at:
www.ocfs.state.ny.us

To report child abuse
and neglect, call:

1-800-342-3720

For information on the Abandoned
Infant Protection Act, call:
1-866-505-SAFE (7233)

Mandated Reporters Hotline for
making child abuse and
maltreatment reports:
1-800-635-1522

For additional copies of this
pamphlet visit our website at:
www.ocfs.state.ny.us and click on
“Publications.”



www.youtube.com/ocfsnews
Pub. 1159 (Rev. 9/2012)



N.Y.S. PROTECTION OF PEOPLE WITH SPECIAL NEEDS ACT

NOTICE TO MANDATED REPORTERS

Justice Center Guidance – June 11, 2013

This Notice provides Mandated Reporters with an overview of their legal duties under the New York State Protection of People with Special Needs Act (the Act) to report Abuse, Neglect and Significant Incidents involving vulnerable persons to the Vulnerable Persons' Central Register (VPCR), a 24/7 hotline operated by the Justice Center for the Protection of People with Special Needs (Justice Center). The effective date of this new reporting requirement is June 30, 2013.

WHAT ARE MANDATED REPORTERS REQUIRED TO REPORT?

Effective June 30, 2013, Mandated Reporters have a legal duty to:

- Report to the Justice Center, by calling the VPCR at 1-855-373-2122, if they have reasonable cause to suspect abuse or neglect of a Vulnerable Person, including a child receiving residential services in a facility or provider listed below. Certain Mandated Reporters may also submit reports by completing a form available on the Justice Center website.
- Report all Significant Incidents to the Justice Center by calling the VPCR at 1-855-373-2122 or by completing the form on the Justice Center website.
- Call the Statewide Central Register of Child Abuse and Maltreatment if they have reasonable cause to suspect abuse or maltreatment of children in family and foster homes, and day care settings. Suspicion of child abuse or neglect in a day care setting, foster family boarding homes, or within a family home must continue to be reported to the Statewide Central Register of Child Abuse and Maltreatment at 1-800-635-1522.

WHO ARE MANDATED REPORTERS?

Mandated Reporters are (1) Custodians and (2) Human Service Professionals.

1. Custodians:

- Employees, volunteers, directors and operators of covered facilities and programs (please see list on Page 3), and
- External staff who have regular and substantial contact with the people being served.

2. Human Service Professionals:

Child Care or Foster Care Worker; Chiropractor; Christian Science Practitioner; Coroner; Dental Hygienist; Dentist; District Attorney or Assistant District Attorney; Emergency Medical Technician; Hospital Personnel engaged in the admission, examination, care, or treatment of persons; Intern; Investigator employed in the office of the district attorney; any other Law Enforcement Official; Licensed Creative Arts Therapist; Licensed Marriage and Family Therapist; Licensed Mental Health Counselor; Licensed Occupational Therapist; Licensed Physical Therapist; Licensed Practical Nurse; Licensed Psychoanalyst; Licensed Speech/Language Pathologist/Audiologist; Medical Examiner; Mental Health Professional; Nurse Practitioner; NYS Office of Alcoholism and Substance Abuse - all persons credentialed by OASAS; Optometrist; Osteopath; Peace Officer; Physician; Podiatrist; Police Officer; Psychologist; Registered Nurse; Registered Physician's Assistant; Resident (medical); Social Services Worker; Social Worker; Surgeon, and School Official, including but not limited to: School Teacher, School Guidance Counselor; School Psychologist; School Social Worker; School Nurse; School Administrator; or other school personnel required to hold teaching or administrative license or certificate.

WHAT TYPE OF INFORMATION SHOULD A MANDATED REPORTER BE PREPARED TO PROVIDE TO THE JUSTICE CENTER?

- Details regarding the victim(s), suspect(s) and witnesses(s).
- Details of the incident, including the date and time, location, description of incident and injury/impact to the victim.
- State agency responsible for oversight of the agency, facility and/or program.
- Name and address of the agency, facility and/or program.
- Confirmation that immediate protections are in place for the victim(s), if applicable.
- Any other information that may assist with the investigation or review of the incident.

Note: Mandated Reporters are required to report to the VPCR even if they may not have all the information outlined above.

WHEN IS REPORTING REQUIRED?

Whenever a Mandated Reporter has reasonable cause to suspect a Reportable Incident involving a vulnerable person, he or she is required to make a report to the VPCR immediately upon discovery.

- Reasonable Cause means that, based on your observations, training and experience, you have a suspicion that a vulnerable person has been subject to abuse or neglect as described below. Significant incidents that may place a vulnerable person at risk of harm must also be reported. Reasonable cause can be as simple as doubting the explanation given for an injury.
- Immediately means “*right-away*;” however reporting may be delayed to prevent harm (e.g., for as long as it takes to call emergency responders and/or address the need to maintain supervision.) Staff “going off-duty” does not justify a reporting delay. In any event, reports must be made to the VPCR within 24 hours.
- Discovery comes from witnessing the situation or when the vulnerable person or another individual comes to you and the available information indicates reasonable cause.

In addition to Mandated Reporters, anyone who has reasonable cause to suspect a Reportable Incident involving a Vulnerable Person should immediately call the VPCR.

If a Mandated Reporter or any other person has doubts about whether the available information indicates such reasonable cause, he or she should call the VPCR.

Reporting to the VPCR is an additional reporting requirement and does not relieve the Mandated Reporter of any other reporting requirements or duties that may be required by law, regulation or policy.

WHO ARE VULNERABLE PERSONS?

The Act defines a Vulnerable Person as a person who due to physical or cognitive disabilities or the need for services or placement is receiving care from a facility or provider within the systems of the State Oversight Agencies (SOA).

WHAT FACILITIES & PROGRAMS ARE COVERED BY THE ACT?

- Facilities and programs that are operated, certified, or licensed by the Office for People With Developmental Disabilities (OPWDD);
- Facilities and programs that are operated, certified, or licensed by the Office of Mental Health (OMH), except Secure Treatment Facilities and programs located in correctional facilities;
- Facilities and programs that are operated, certified, or licensed by the Office of Alcoholism and Substance Abuse Services (OASAS);
- Facilities and programs operated by the Office of Children and Family Services (OCFS) for youth placed in the custody of the Commissioner of OCFS; OCFS licensed or certified residential facilities that care for abandoned, abused, neglected, and dependent children, Persons In Need of

Supervision, or juvenile delinquents; Family Type Homes for Adults; OCFS certified runaway and homeless youth programs; and OCFS certified youth detention facilities.

- Adult homes licensed by the Department of Health (DOH) that have over 80 beds, and where at least 25% of the residents are persons diagnosed with a serious mental illness and have fewer than 55% of beds designated as Assisted Living Program (ALP) beds.
- Overnight summer day and traveling summer day camps for children with developmental disabilities under the jurisdiction of DOH;
- New York State School for the Blind; New York State School for the Deaf; State-supported (4201) schools that have a residential component; special act school districts; and in-state private residential schools approved by the New York State Education Department (NYSED)

AS A MANDATED REPORTER, WHAT ARE MY OBLIGATIONS RELATED TO NOTIFYING LAW ENFORCEMENT?

Possible crimes should be immediately reported to law enforcement. When a report is received by the VPCR, staff can consult with supervisors to decide if local police should be contacted, if such a call has not already been made.

WHAT CONSTITUTES ABUSE OR NEGLECT?

The Act defines Abuse and Neglect of Vulnerable Persons in broad terms, including both actual harm and the risk of harm:

Terms	Examples of Custodian Behaviors
Physical Abuse	Intentional contact (hitting, kicking, shoving, etc.) corporal punishment, injury which cannot be explained and is suspicious due to extent or location, the number of injuries at one time, or the frequency over time
Psychological Abuse	Taunting, name calling, using threatening words or gestures
Sexual Abuse	Inappropriate touching, indecent exposure, sexual assault, taking or distributing sexually explicit pictures, voyeurism or other sexual exploitation. All sexual contact between a Custodian and a service recipient is sexual abuse, unless the Custodian is also a person receiving services
Neglect	Failure to provide supervision, or adequate food, clothing, shelter, health care; or access to an educational entitlement
Deliberate misuse of restraint or seclusion	Use of these interventions with excessive force, as a punishment or for the convenience of staff
Controlled Substances	Using, administering or providing any controlled substance contrary to law
Aversive conditioning	Unpleasant physical stimulus used to modify behavior without person-

	specific legal authorization
Obstruction	Interfering with the discovery, reporting or investigation of abuse / neglect, falsifying records or intentionally making false statements

WHAT CONSTITUTES A SIGNIFICANT INCIDENT?

New York State law also recognizes that Vulnerable Persons can be harmed or put at risk in many types of circumstances. The Act defines a Significant Incident as an incident that is not abuse or neglect, but has the potential to result in harm to the health, safety or welfare of a person receiving services. Examples may include, but are not limited to the following:

- The use of restraint when it is avoidable, involves a banned technique, or is used by inadequately trained staff;
- Unauthorized seclusion or time-out;
- Harmful interactions between Vulnerable Persons that could reasonably have been prevented; and
- Administration of a medication contrary to a medical order resulting in an adverse impact.
- Any other conduct identified in regulations of the State Oversight Agency, according to guidelines or standards established by the Justice Center.

WHAT HAPPENS WHEN A REPORT IS MADE TO THE VPCR?

Trained VPCR staff will take a full report over the phone or via a web form and, based upon the information provided, categorize the reportable incident (abuse, neglect, significant incident) and notify the appropriate SOA. In addition, the Justice Center will be responsible for ensuring that the reportable incident is investigated or reviewed by the appropriate entity.

WHAT PROTECTIONS AND LIABILITIES DO MANDATED REPORTERS HAVE?

- **Immunity from Liability** - The law grants immunity to Mandated Reporters and other reporters from any legal claims which may arise from a good faith act of providing information to the VPCR.
- **Protection from Retaliatory Personnel Action** - The law prohibits an employer or agency from taking any retaliatory personnel action against a person as a result of a good faith act of providing information to the VPCR.
- **Confidentiality** - The law provides protections against the disclosure of the reporter’s identity, subject to limited exceptions (e.g., the reporter’s consent, a court order).

- **Failure to Report** - Failure by a Mandated Reporter to report suspected Abuse or Neglect to the VPCR is a serious matter and possible consequences include administrative discipline, termination, civil liability and criminal prosecution.

WHERE CAN I GET MORE INFORMATION?

Please contact the Justice Center at: 1-518-549-0200. We will be pleased to answer any questions you may have.