## MODEL POLICY FOR THE REPORTING OF CHILD ABUSE AND NEGLECT

This model policy is issued by the Connecticut Department of Children and Families (DCF) in collaboration with the Connecticut State Department of Education (CSDE) pursuant to section 3(e) of Public Act 11-93 for use in public and private schools. This model policy is intended only as a guide. School districts and schools are encouraged to tailor their own policy to meet their particular needs and goals.

DCF and CSDE are grateful to the Connecticut Association of Boards of Education for the valuable assistance it provided in the development of this model.

# **REPORTING CHILD ABUSE**

Click here to utilize the **Report of Suspected Child Abuse form** (DCF-136).

### Introduction

Connecticut General Statutes §<u>17a-101</u>, as amended by Public Act 02-138 and 11-93, requires certain school employees who have reasonable cause to suspect or believe that a child has been abused, neglected, or placed in imminent risk of serious harm to report these suspicions in compliance with applicable state statutes. These employees are mandated reporters. The following school employees are mandated reporters:

"A teacher, substitute teacher, school administrator, school superintendent, guidance counselor, psychologist, social worker, nurse, physician, school paraprofessional or coach employed by a local or regional board of education or a private elementary, middle or high school or working in a public or private elementary, middle or high school; or (B) any other person who, in the performance of his or her duties, has regular contact with students and who provides services to or on behalf of students enrolled in (i) a public elementary, middle or high school, pursuant to a contract with the local or regional board of education, or (ii) a private elementary, middle or high school, pursuant to a contract with the supervisory agent of such private school."

## For definitions of child abuse and neglect see Appendix A.

## For indicators of child abuse and neglect see Appendix B.

An oral report by telephone or in person shall be made as soon as possible but no later than 12 hours to the Commissioner of Children and Families or an appropriate law enforcement agency, and to the Superintendent of Schools or his/her designee followed within 48 hours by a written report to the Department of Children and Families. The oral report to DCF shall be made on the DCF 24 hour Careline. 1-800-842-2288. The written report shall be submitted on the DCF-136 or any form for that purpose. See Appendix C.

Reporting suspected abuse and/or neglect of children, in addition to the requirements

pertaining to staff training, record keeping and dissemination of this policy, shall be in accordance with the procedures established and set forth below.

### APPLICABLE STATE LAW

C.G.S. §10-220a. In-service training. Professional development committees. Institutes for educators. Cooperating teacher program, regulations (as amended by PA 11-93)

C.G.S. §10-221d. Criminal history records check of school personnel. Fingerprinting. Termination or dismissal (as amended by PA 11-93)

C.G.S. §17a-28. Definitions. Confidentiality of and access to records; exceptions. Procedure for aggrieved persons. Regulations (as amended by PA 11-93 and PA 11-167)

C.G.S. §§<u>17a-101</u> through <u>17a-101k</u>. Protection of children from abuse. Reports required of certain professional persons. When child may be removed from surroundings without court order. (as amended by PA 11-93)

C.G.S. §17a-106. Cooperation in relation to prevention, identification and treatment of child abuse/neglect.

P.A. 11-93. An Act Concerning the Response of School Districts and the Departments of Education and Children and Families to Reports of Child Abuse and Neglect and the Identification of Foster Children in a School District.

PA 11-167. An Act Concerning Access to Records of the Department of Children and Families.

Regulations of Connecticut State Agencies §§17a-101k-1 through 17a-101k-16. Child Abuse and Neglect Registry

### **Reporting of Child Abuse/Neglect**

### What Must be Reported

A report must be made when any mandated reporter employed by the school district, in his/her professional capacity, has reasonable cause to suspect or to believe that a child under the age of eighteen:

- has been abused;
- has had non-accidental physical injuries or physical injuries which are at variance with the history given for them, inflicted by a person responsible for the child's health, welfare or care, or by a person given access to such child by a responsible person;
- has been neglected; or
- has been placed in imminent risk of serious harm.

### **Reporting Procedures for Statutory Mandated Reporters**

The following procedures apply only to statutory mandated reporters, as defined above.

When an employee of the Board of Education suspects or believes that a child has

been abused, neglected, or has been placed in imminent risk of serious harm, the following steps shall be taken:

- (a) The employee shall immediately, upon having reasonable cause to suspect or believe that a child has been abused, neglected, or placed in imminent risk of serious harm, or has had non-accidental physical injuries or injuries which are at variance with the history of such injuries, and in no case later than twelve (12) hours after having such a suspicion or belief, make an oral report by telephone or in person to the Commissioner of Children and Families or the local law enforcement agency.
- (b) The employee shall also immediately make an oral report to the Building Principal or his/her designee. If the Building Principal or his/her designee is the alleged perpetrator of abuse/neglect then the employee shall instead notify the Superintendent.
- (c) If a report prepared in accordance with Section (a) above concerns suspected abuse or neglect by a school employee, the Superintendent or his/her designee, shall immediately notify the child's parent or guardian that such a report has been made.
- (d) Within 48 hours of making an oral report, the employee shall submit a written report to the Commissioner of Children and Families, or his/her representative, containing all of the required information.
- (e) The employee shall immediately, submit a copy of the written report to the Principal and/or Superintendent or the Superintendent's designee.
- (f) If a report prepared in accordance with Section (c) above, concerns suspected abuse or neglect by a school employee who possesses a certificate, permit or authorization issued by the State Board of Education, the Superintendent shall submit a copy of the written report to the Commissioner of Education, or his/her representative.

## **Contents of Reports**

Any report made pursuant to this policy shall contain the following information, if known:

- the names and addresses of the child and his/her parents or other persons responsible for his/her care;
- the age of the child;
- the gender of the child;
- the nature and the extent of the child's injury or injuries, maltreatment or neglect;
- the approximate date and time the injury or injuries, maltreatment or neglect occurred;
- information concerning any previous injury or injuries to, or maltreatment or neglect of, the child or his/her siblings;
- the circumstances in which the injury or injuries, maltreatment or neglect came to be known to the reporter;
- the name of the person or persons suspected to be responsible for causing such injury or injuries, maltreatment or neglect;

- the reasons such person or persons are suspected of causing such injury or injuries, maltreatment or neglect;
- any information concerning any prior cases in which such person or persons have been suspected of causing an injury, maltreatment or neglect of a child; and
- whatever action, if any, was taken to treat, provide shelter or otherwise assist, the child.

### Investigation of the Report

The Board of Education shall permit and give priority to any investigation conducted by the Department of Children and Families or the appropriate local law enforcement agency of a report that a child has been abused or neglected. If the suspected perpetrator of abuse or neglect is a school employee, the Board may conduct its own investigation and take any disciplinary action, in accordance with the provisions of section 17a-101i of the general statutes, as amended, upon notice from the DCF or the appropriate local law enforcement agency that the Board's investigation will not interfere with the investigation of DCF or such local law enforcement agency.

To the extent feasible, this investigation shall be coordinated with the Department of Children and Families or the police in order to minimize the number of interviews of any child and to share information with other persons authorized to conduct an investigation of child abuse and neglect. When investigating a report, the Superintendent or his/her designee shall endeavor to obtain, when possible, the consent of parents or guardians or other persons responsible for the care of the child, to interview the child, except in those cases in which there is reason to believe that the parents or guardians or other persons responsible for the care of such child are the perpetrators of the alleged abuse.

The investigation shall include an opportunity for the suspected perpetrator to be heard with respect to the allegations contained within the report. During the course of an investigation of suspected abuse by a school employee, the Superintendent may suspend the employee with pay or may place the employee on administrative leave with pay pending the outcome of the investigation.

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

The Superintendent shall disclose records received from the Department of Children and Families to the Commissioner of Education and the Board of Education, or its attorney, for the purposes of review of employment status, certification, permit or authorization. Any decision of the Superintendent concerning such suspension shall remain in effect until the Board of Education Acts, pursuant to the provisions of Connecticut General Statutes. The Commissioner of Education shall also be notified if such certified person resigns from his/her employment in the District.

Regardless of the outcome of any investigation by DCF and/or the police, the Superintendent and/or the Board, as appropriate, may take disciplinary action up to and

including termination of employment in accordance with the provisions of any applicable statute, if the Superintendent's investigation produces evidence that a child has been abused by a certified, permit or authorized school staff member.

If the contract of employment of a certified school employee holding a certificate, permit or authorization issued by the State Board of Education is terminated as a result of an investigation into reports of child abuse and neglect, the Superintendent shall notify the Commissioner of Education, or his/her representative, within 72 hours of such termination.

The District shall maintain records of allegations, investigations and reports that a child has been abused or neglected by a school employee. Such records will be maintained in the District's Central Office. The records shall include any reports made to the Department of Children and Families. Such Department is to have access to all such records.

The Board shall provide to the DCF commissioner or designee, upon request for the purposes of an investigation by DCF of suspected child abuse or neglect by a teacher employed by the Board, any records maintained or kept in District files. Such records shall include, but not be limited to, supervisory records, reports of competence, personal character and efficiency maintained in such teacher's personnel file with reference to evaluation of performance as a professional employee of such board of education, and records of the personal misconduct of such teacher. (*"Teacher" includes each certified professional employee below the rank of Superintendent employed by a Board of Education in a position requiring a certificate issued by the State Board of Education.*)

### Actions following the investigation of the report

### **Evidence of Abuse by Certain School Employees**

After an investigation has been completed, if DCF, based upon the results of such investigation, has reasonable cause to believe that a child has been abused or neglected by an employee who has been entrusted with the care of a child ("Person entrusted with the care of a child or youth" means a person given access to a child or youth by a person responsible for the health, welfare or care of a child or youth for the purpose of providing education, child care, counseling, spiritual guidance, coaching, training, instruction, tutoring or mentoring of such child or youth.) and who is in a position requiring a certificate, permit or authorization issued by the State Board of Education, DCF shall notify the Superintendent and the Commissioner of Education of such findings and shall provide them with records concerning the investigation, whether or not created by DCF.

If DCF, after the completion of an investigation, has reason to believe that a child has been abused or neglected by an employee who has not been entrusted with the care of a child, who is in a position requiring a certificate, permit or authorization issued by the State Board of Education, and DCF recommends that the employee be placed on the Department of Children and Families abuse and neglect registry because the employee poses a risk to the health, safety or welfare of children, DCF shall notify the Superintendent and the Commissioner of Education of such findings and shall provide

them records concerning such investigation whether or not created by DCF.

DCF shall provide this notice whether or not the child was a student in the employing school or school district.

The Superintendent shall suspend the employee, if not previously suspended, with pay and without diminution or termination of benefits. Not later than 72 hours after such suspension, the Superintendent shall notify the Board of Education and the Commissioner of Education, or his/her representative, of the reasons for the conditions of suspension.

### **Evidence of Abuse by Other School Staff**

If the investigation by the Superintendent produces evidence that a child has been abused by a non-certified school staff member the Superintendent and/or the Board, as appropriate, may take disciplinary action up to and including termination of employment.

### **Delegation of Authority by Superintendent**

The Superintendent may appoint a designee for the purposes of receiving and making reports, notifying and receiving notification, or investigating reports pursuant to this policy.

### Disciplinary Action for Failure to Follow Policy

Any employee who fails to comply with the requirements of this policy shall be subject to discipline, up to and including termination of employment.

### **Non-Retaliation**

The Board of Education shall not discharge or in any manner discriminate or retaliate against any employee who, in good faith, makes a report pursuant to this policy or testifies or is about to testify in any proceeding involving abuse or neglect.

### Training

All District employees who are mandated reporters are required to complete a training program pertaining to the accurate and prompt reporting of abuse and neglect, made available by the Commissioner of Children and Families. In addition, all such employees must complete a refresher program at least once every three years. Employees hired before July 1, 2011 must complete the refresher training program by July 1, 2012 and must retake it once every three years thereafter.

## Effective Date February 29, 2012 (New)

## APPENDIX A

### **Operational Definitions of Child Abuse and Neglect**

The purpose of this policy is to provide consistency for staff in defining and identifying operational definitions, evidence of abuse and/or neglect and examples of adverse impact indicators.

The following operational definitions are working definitions and examples of child abuse and neglect as used by the Connecticut Department of Children and Families.

For the purposes of these operational definitions,

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

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

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

### **Physical Abuse**

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

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

### **Evidence of physical abuse includes:**

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

# Sexual Abuse/Exploitation Sexual Abuse/Exploitation

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

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

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

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

### **Emotional Maltreatment-Abuse**

### **Emotional Maltreatment-Abuse is:**

- act(s), statement(s), or threat(s), which
- has had, or is likely to have an adverse impact on the child;and/or

• interferes with a child's positive emotional development.

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

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

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

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

## **Physical Neglect**

### A child may be found neglected who:

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

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

- inadequate food;
- malnutrition;
- inadequate clothing;
- inadequate housing or shelter;
- erratic, deviant, or impaired behavior by the person responsible for the child's health, welfare or care; by a person given access to the child; or by a person entrusted with the child's care which adversely impacts the child;
- permitting the child to live under conditions, circumstances or associations injurious to his well-being including, but not limited to, the following:

- o substance abuse by caregiver, which adversely impacts the child physically
- substance abuse by the mother of a newborn child and the newborn has a positive urine or meconium toxicology for drugs
- psychiatric problem of the caregiver which adversely impacts the child physically
- exposure to family violence which adversely impacts the child physically
  - exposure to violent events, situations, or persons that would be reasonably judged to compromise a child's physical safety
  - non-accidental, negligent exposure to drug trafficking and/or individuals engaged in the active abuse of illegal substances
  - voluntarily and knowingly entrusting the care of a child to individuals who may be disqualified to provide safe care, e.g. persons who are subject to active protective or restraining orders; persons with past history of violent/drug/sex crimes; persons appearing on the Central Registry
  - non-accidental or negligent exposure to pornography or sexual acts
  - inability to consistently provide the minimum of child-caring tasks
  - inability to provide or maintain a safe living environment
  - action/inaction resulting in death
- o abandonment
- o action/inaction resulting in the child's failure to thrive
- o transience

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- inadequate supervision: creating or allowing a circumstance in which a child is alone for an excessive period of time given the child's age and cognitive abilities
- holding the child responsible for the care of siblings or others beyond the child's ability
- failure to provide reasonable and proper supervision of a child given the child's age and cognitive abilities.

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

### Medical Neglect

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

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

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

Note: Failure to provide the child with immunizations or routine well child care in and of

itself does not constitute medical neglect.

### **Educational Neglect**

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

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

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

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

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

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

### **Emotional Neglect**

**Emotional Neglect** is the denial of proper care and attention, or failure to respond, to a child's affective needs by the person responsible for the child's health, welfare or care; by the person given access to the child; or by the person entrusted with the child's care which has an adverse impact on the child or seriously interferes with a child's positive emotional development.

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

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

• exposure to family violence which adversely impacts the child emotionally.

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

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

### **Moral Neglect**

**Moral Neglect:** Exposing, allowing, or encouraging the child to engage in illegal or reprehensible activities by the person responsible for the child's health, welfare or care or person given access or person entrusted with the child's care. **Evidence of Moral Neglect includes but is not limited to:** 

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

## Appendix B INDICATORS OF CHILD ABUSE AND NEGLECT

# Indicators of Physical Abuse HISTORICAL

- Delay in seeking appropriate care after injury.
- No witnesses.
- Inconsistent or changing descriptions of accident by child and/or parent.
- Child's developmental level inconsistent with history.
- History of prior "accidents".]
- Absence of parental concern.
- Child is handicapped (physically, mentally, developmentally) or otherwise perceived as "different" by parent.
- Unexplained school absenteeism.
- History of precipitating crisis

## PHYSICAL

- Soft tissue injuries on face, lips, mouth, back, buttocks, thighs or large areas of the torso;
- Clusters of skin lesions; regular patterns consistent with an implement;

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

### BEHAVIORAL

- Wary of physical contact with adults;
- Affection inappropriate for age Extremes in behavior, aggressiveness/withdrawal;
- Expresses fear of parents;
- Reports injury by parent;
- Reluctance to go home;
- Feels responsible (punishment "deserved");
- Poor self-esteem;
- Clothing covers arms and legs even in hot weather.

# Indicators of Sexual Abuse HISTORICAL

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

### PHYSICAL

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

• Pregnancy.

## BEHAVIORAL

- Low self-esteem;
- Change in eating pattern;
- Unusual new fears;
- Regressive behaviors;
- Personality changes (hostile/aggressive or extreme compliance);
- Depression;
- Decline in school achievement;
- Social withdrawal; poor peer relationship;
- Indicates sophisticated or unusual sexual knowledge for age;
- Seductive behavior, promiscuity or prostitution;
- Substance abuse;
- Suicide ideation or attempt;
- Runaway.

# Indicators of Emotional Abuse HISTORICAL

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

## PHYSICAL

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

## BEHAVIORAL

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

# Indicators of Physical Neglect HISTORICAL

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

### PHYSICAL

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

### BEHAVIORAL

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

Click here to utilize the **Report of Suspected Child Abuse form** (DCF-136).

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