



# Michigan

## Recognizing, Reporting and Preventing Child Abuse and Neglect

(Ethical Reporter Version)

### WHERE TO REPORT SUSPECTED ABUSE

Call the Statewide Hotline for the  
Department of Health Services (DHS) at:  
1-800-942-4357.

**Child in Immediate Risk/Danger:** Call  
your local police or sheriff: **911**

### IF YOU ARE A VICTIM

Get free and anonymous help 365  
days a year, 24 hours a day.



**Childhelp® National Child Abuse**  
Hotline: 800-4-A-Child (800-422-4453)  
[www.childhelp.org/get\\_help](http://www.childhelp.org/get_help)

## Quick Reference Guide



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*A service of LawRoom in support  
of the Safe Environment for  
Children Program*

## HOW CAN I HELP PREVENT ABUSE?

### What To Teach Children

- ▶ how to say "no" to abuse
- ▶ how to run away from abusers
- ▶ how to recognize potential abusers
- ▶ how to report suspicious people
- ▶ how to seek help from safe adults
- ▶ not to accept gifts without their parents' knowledge



### What to Warn Them About Online Usage

- ▶ clarify permitted and forbidden websites
- ▶ be aware of the dangers of online predators
- ▶ do not reveal personal information online
- ▶ do not engage in "private chats" online
- ▶ do not meet online friends in person without parent's permission
- ▶ alert parent if they're contacted online by a stranger
- ▶ people on the Internet can lie about themselves

### What to Watch Out For

- ▶ adults more interested in youth activities than adult activities
- ▶ adults giving gifts to unrelated children
- ▶ changes in the child's behavior

### What You Should Do

- ▶ participate in their lives daily
- ▶ know where they are at all times and with whom
- ▶ enhance their confidence
- ▶ listen to what they say
- ▶ discourage them from being alone with unrelated adults
- ▶ consult the sex offender registry
- ▶ ensure multiple adult supervisors at youth events
- ▶ keep computer in family room



- ▶ monitor the websites they visit
- ▶ join them online
- ▶ learn about or meet their online friends
- ▶ be the "administrator" on the computer
- ▶ insist on having their account passwords
- ▶ install software to limit website access

## WHAT IS CHILD ABUSE

### Physical Abuse

Is an intentional act that causes or threatens to cause physical harm to the child.

It does **not** include:

- Parents disciplining their child using reasonable, age appropriate, physical force that does not expose the child to physical harm.
- A "mutual fight" between minors. If both agree to the battle before they fight, there is no aggressor or victim.
- Accidental injuries.

### Sexual Abuse

- **Sexual Molestation:** sex acts and attempts, incest, touching a child – even over clothing - for purposes of sexual gratification, or having a child sexually touch another person.
- **Sexual Exploitation:** preparing, selling or distributing child pornography, using a child for the sexual gratification of others, or child prostitution.

### Emotional abuse

Occurs when there is a pattern of severe psychological mistreatment. This often happens when children are told that they are worthless, unloved, or unwanted.

### Neglect

Refers to a parent or other person legally responsible person for a child not meeting the child's basic physical or medical needs.

## How Can I Recognize Child Abuse?

**Any** of the following physical, behavioral, parental, or environmental clues, alone or in combination, may give you cause to suspect that a child is being abused or neglected. **Suspicion is enough** to make a report!

### PHYSICAL CLUES

- facial injuries (black eyes or swollen lips)
- multiple injuries in different stages of healing
- unattended medical problems or infections
- bite marks (animal or human)
- bruises or trauma on back, buttocks, or thighs
- repeated series of bruises or broken bones
- burns from objects, rope, or liquid
- pain or injury around genital area
- urinary tract infection
- sexually transmitted disease
- significant increase in physical complaints
- painful urination or defecation
- self-inflicted injuries (cuts or burns)
- signs of malnutrition (thin, fainting, hunger)
- extremely offensive body odor



### BEHAVIORAL CLUES

- extreme anxiety, guilt, or shame
- unexplained crying
- difficulty sleeping or recurrent nightmares
- regressive behavior (acting much younger)
- clinginess or acting excessively responsible
- fear of certain adults
- extreme dependency on other adults
- increasing isolation and withdrawal
- running away from home
- depression or passivity
- increasing aggressiveness
- extreme anger and verbal abuse
- inappropriate sexual behavior
- dramatic change in school performance
- suicidal ideas
- substance abuse
- failure to bathe regularly
- excessive bathing
- inappropriate clothes for the weather
- filthy or unkempt clothes
- bedwetting

### PARENTAL CLUES

- unwilling to provide for child's needs
- indifferent to child's condition or safety
- unable to explain child's injury
- gives improbable explanation for child's injury
- cannot describe anything positive about child
- constantly and angrily criticizes child
- states destructive thoughts about hurting child
- uses belt, or other object to discipline child
- discipline of child is impulsive or out-of-control
- expects child to serve or fulfill adult's needs
- describes child as "evil"
- has unrealistic expectations about child's development

### ENVIRONMENTAL CLUES

- broken windows
- lack of utilities (heat, water, electricity)
- faulty electrical fixtures
- insects, mice, or rats
- spoiled food
- unsanitary kitchen
- garbage or hazards in the yard
- yelling or crying heard from outside





## Why Make a Report?

In 2005, an estimated 899,000 children in the United States were found to be victims of child abuse or neglect. And by most estimates, this is a small percentage of the actual child abuse/neglect cases.

As a society, we're all responsible for protecting children.

Although you are not required by law to report suspected child abuse/neglect, you should report because everyone has an ethical duty to report child maltreatment.

## Who are Permissive (Ethical) Reporters?

Permissive reporters are concerned citizens who encounter suspected child abuse or neglect and want to stop the maltreatment.

They are not persons who work in an occupation that requires them to report child abuse or neglect.

They may, but are not required to, file a report when they have a "reasonable suspicion" that a child has been abused or neglected.



## YOUR PROTECTIONS

### Permissive Reporters:

#### Immunity:

A permissive reporter **cannot be held liable** for failing to make a report of suspected abuse/neglect or making a mistaken report.

However, a permissive reporter may be liable for **intentionally** making a false report.

#### Confidentiality:

Your name will **not** be released to anyone (other than governmental officials).

## HOW DO I MAKE A REPORT?

- ▶ Do **not** "investigate" suspected child abuse/neglect in an attempt to prove it. Leave the investigation to the experts. All you need is **reasonable suspicion** to make a report, which can be based on a single incident or multiple factors.
- ▶ Once you suspect abuse, you should **immediately** call DHS or your local police or sheriff for abuse.
  - \*\***Don't worry** about calling the wrong agency. Each agency is required to transfer the report to the correct agency if you got it wrong. So, **make the call**. For the child's sake, it's always better to err on the side of reporting than not reporting.
- ▶ You may be asked to provide the following information when reporting: your name, address, and telephone number; the name, address, and location of the child; and information about the abuse or neglect, the child's parents, and the suspected abuser (if known). Your name will not be released to anyone, except government officials.
- ▶ After receiving your initial report, DHS may ask you to submit a written report (Form DHS-3200) and any other evidence you may have.

## WHAT WILL DHS DO?

After receiving a report of suspected abuse or neglect, DHS typically **initiates an investigation within 24 hours**.

DHS's response time will depend on its assessment of the danger to the child. Its goal is to **ensure the safety of the child** and to begin providing services and resources to the family.

However, if a child is in danger at home, the child will be removed to safety.

# REPORT OF ACTUAL OR SUSPECTED CHILD ABUSE OR NEGLECT

## Michigan Department of Human Services

Was complaint phoned to DHS?		If yes, Log # _____		If no, contact the local DHS Office immediately	
<input type="checkbox"/> Yes	<input type="checkbox"/> No				

**INSTRUCTIONS: REPORTING PERSON:** Complete items 1-21 (22-30 should be completed by medical personnel, if applicable). Send PART 1 to local County DHS where the child is found. Retain PART 2 for your records. See additional instructions on back.

2. List of child(ren) suspected of being abused or neglected (list additional children on back of Part 1)

NAME	BIRTH DATE	SOCIAL SECURITY #	SEX	RACE

3. Mother's name				
4. Father's name				
5. Child(ren)'s address (No. & Street)	6. City	7. County	8. Phone No.	

9. Name of alleged perpetrator of abuse or neglect	10. Relationship to child(ren)				
11. Person(s) the child(ren) living with when abuse/neglect occurred	12. Address, City & Zip Code where abuse/neglect occurred				

13. Describe injury or conditions and reason for suspicion of abuse or neglect (Attach additional sheets if necessary)

\_\_\_\_\_

\_\_\_\_\_

14. Source of Complaint (Check appropriate box)			<input type="checkbox"/> PSYCHOLOGIST	<input type="checkbox"/> CLERGY
<input type="checkbox"/> PHYSICIAN/PHYSICIAN'S ASSISTANT	<input type="checkbox"/> AUDIOLOGIST	<input type="checkbox"/> PROFESSIONAL COUNSELOR	<input type="checkbox"/> MARRIAGE/FAMILY THERAPIST	
<input type="checkbox"/> MEDICAL EXAMINER (Coroner)	<input type="checkbox"/> *SOCIAL WORKER	<input type="checkbox"/> TEACHER	<input type="checkbox"/> DHS FACILITY	
<input type="checkbox"/> DENTIST/DENTAL HYGIENIST	<input type="checkbox"/> SCHOOL ADMINISTRATOR	<input type="checkbox"/> LAW ENFORCEMENT OFFICER	<input type="checkbox"/> DCH FACILITY	
<input type="checkbox"/> NURSE	<input type="checkbox"/> SCHOOL COUNSELOR	<input type="checkbox"/> CHILD CARE PROVIDER	<input type="checkbox"/> ELIGIBILITY SPECIALIST	
<input type="checkbox"/> EMERGENCY MEDICAL SERVICES PERSONNEL	<input type="checkbox"/> HOSPITAL		<input type="checkbox"/> SOCIAL WORK SPECIALIST	
<input type="checkbox"/> FAMILY INDEPENDENCE MANAGER	<input type="checkbox"/> FAMILY INDEPENDENCE SPECIALIST		<input type="checkbox"/> SOCIAL SERVICES SPECIALIST	
<input type="checkbox"/> SOCIAL WORK SPECIALIST MANAGER	<input type="checkbox"/> WELFARE SERVICES SPECIALIST		<input type="checkbox"/> Other (Specify below)	

15. Reporting person's name	16. Name of reporting organization (school, hospital, etc.)				
17. Address (No. & Street)	18. City	19. State	20. Zip Code	21. Phone No.	

**TO BE COMPLETED BY MEDICAL PERSONNEL WHEN PHYSICAL EXAMINATION HAS BEEN DONE**

22. Summary report and conclusions of physical examination (Attach Medical Documentation)

\_\_\_\_\_

\_\_\_\_\_

23. Laboratory report	24. X-Ray				
25. Other (specify)	26. History or physical signs of previous abuse/neglect				
	<input type="checkbox"/> YES		<input type="checkbox"/> NO		

27. Prior hospitalization or medical examination for this child	
DATES	PLACES

28. Physician's Signature	29. Date	30. Hospital (if applicable)
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Department of Human Services (DHS) will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, height, weight, marital status, sexual orientation, political beliefs or disability. If you need help with reading, writing, hearing, etc., under the Americans with Disabilities Act, you are invited to make your needs known to a DHS office in your area.	AUTHORITY: P.A. 238 of 1975. COMPLETION: Mandatory. PENALTY: None.
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# INSTRUCTIONS

## GENERAL INFORMATION:

This form is to be completed as the written follow-up to the oral report (as required in Sec. 3 (1) of 1975 PA 238, as amended) and mailed to the local county Department of Human Services. Indicate if this report was phoned into DHS as a report of suspected CA/N. If so, indicate the Log # (if known). The reporting person is to fill out as completely as possible items 1-21. Only medical personnel should complete items 22-30.

1. Date - Enter the date the form is being completed.
2. List child(ren) suspected of being abused or neglected - Enter available information for the child(ren) believed to be abused or neglected. Indicate if child has a disability that may need accommodation.
3. Mother's name - Enter mother's name (or mother substitute) and other available information. Indicate if mother has a disability that may need accommodation.
4. Father's name - Enter father's name (or father substitute) and other available information. Indicate if father has a disability that may need accommodation.
5. Child(ren)'s address - Enter the address of the child(ren).
6. City
7. County
8. Phone - Enter phone number of the household where child(ren) resides.
9. Name of alleged perpetrator of abuse or neglect – Indicate person(s) suspected or presumed to be responsible for the alleged abuse or neglect.
10. Relationship to child(ren) - Indicate the relationship to the child(ren) of the alleged perpetrator of neglect or abuse, e.g., parent, grandparent, babysitter.
11. Person(s) child(ren) living with when abuse/neglect occurred - Enter name(s). Indicate if individuals have a disability that may need accommodation.
12. Address where abuse / neglect occurred.
13. Describe injury or conditions and reason of suspicion of abuse or neglect - Indicate the basis for making a report and the information available about the abuse or neglect.
14. Source of complaint - Check appropriate box noting professional group or appropriate category.  
**Note:** If abuse or neglect is suspected in a hospital, also check hospital.

**DHS Facility** - Refers to any group home, shelter home, halfway house or institution operated by the Department of Human Services.

**DCH Facility** - Refers to any institution or facility operated by the Department of Community Health.

15. Reporting person's name - Enter your name if you are reporting this matter.
16. Name of reporting organization - Enter the name of the agency or organization, if appropriate.
17. Address
18. City
19. State
20. Zip Code
21. Phone Number