

Guidelines for Mandated Reporters of Suspected Child Maltreatment

See Wisconsin Statutes 48.981(2) for more information.



Who is a mandated reporter?

- Physicians
- Coroners
- Medical examiners
- Nurses
- Dentists
- Chiropractors
- Optometrists
- Acupuncturists
- A medical or mental health professional
- Social workers
- Marriage & family therapists
- Professional counselors
- Public assistance workers, including a financial & employment planner, as defined in s.49.141(1) (d), Stats.
- School teachers
- School administrators
- School counselors
- Mediators under s.767.11, Stats.
- Child-care workers in a day care center, group home, as described in s.48.625(1m), Stats. (a "second chance home"), or residential care center for children and youth
- Day care providers
- Alcohol or other drug abuse counselors
- Member of the treatment staff employed by or working under contract with a county department under s. 46.23, 51.42, or 51.437, Stats., or a residential care center for children and youth
- Physical therapists
- Physical therapist assistants
- Occupational therapists
- Dieticians
- Speech-language pathologists
- Audiologists
- Emergency medical technicians
- First responders
- Police and law enforcement officers
- Court-appointed special advocates (CASA)

When to report?

- Reasonable suspicion of maltreatment arises during course of professional duties. Reasonable suspicion is more than a "hunch" but proof or certainty of maltreatment is not necessary
- If you are going to worry about the child's safety or well-being, you probably have reasonable suspicion
- Child (<18 y/o) has been or will be maltreated

Where to report?

- To the county human services (child protective services) in the county in which the child resides. If you are not sure who to call: <http://dcf.wisconsin.gov/children/CPS/cpswimap.HTM>
- Law enforcement in the jurisdiction of where the child was maltreated
- Wisconsin law permits reporting to both which is the recommended practice

How do I report?

- Person with the most information and best understanding of why the report is being made should make the report. Usually this is the medical provider but not always.
- Gather your information including demographics about the child and family. Include parents' names, dates of birth, address(es), and phone numbers, if available. Also include names of siblings and schools.
- Be ready to state why the report is being made (concern for sexual abuse, physical abuse, medical noncompliance, neglect) using language that would be easily understood by most people.
 - What made you concerned
 - What the injury or behavior or disclosure means to you. Why are you worried?
 - You do not need to know who has hurt or neglected the child, but if you do, give that information
 - Risk to the child if maltreatment is occurring – include short-term and long-term risks. Remember to include some discussion about long-term harm to physical health if the child is not protected (adverse childhood experiences or toxic stress disrupt healthy child development)
 - If there is imminent risk of harm, make sure you state that
 - Clearly indicate what referrals and diagnostic tests need to occur or are pending
 - Record the name of the person to whom you provide the report
 - Be patient! The person receiving the report may not have a good understanding of medical terms and is required to try to complete their intake form
 - If the report is regarding medical noncompliance, send a follow-up letter delineating the reason for your concerns (see letter template).
- If you are unhappy with how you are treated in making the report, ask to speak with their supervisor

What happens next?

- Your report will either be screened in for investigation or screened out. If screened out, a record of the report will be maintained but nothing further will happen at that point.
- If the report is screened in, an assessment of the child's safety and family will occur on a timeline that is determined by how high the risk is and how vulnerable the child is.
- If you reported to police, an investigation will usually ensue.
- You likely will not hear back about your report other than receiving a form letter about the county's ultimate determination
- If you continue to have concerns about the child, re-report! Do not assume that nothing has happened. Sometimes multiple reports are necessary to "build a case" and there may be many factors that affect the ultimate disposition of a case.

What if I am not sure if a report should be made?

- Consult with a child abuse pediatrician in your area or a social worker who is educated about child maltreatment.
- If you are not sure who to call, consider calling the nearest Child Advocacy Center to seek advice
- If you fail to make a report when you had reasonable suspicion, you are at risk of civil and criminal penalties and the child may suffer irreparable harm as a result