

PACHC Memo 14-01

Please share with: Executive Management Human Resources

May 21, 2014

TO:	Chief Executive Officers of Pennsylvania Community Health Centers FOFC and Rural
	Health Clinics

FROM: Cheri Rinehart, President & CEO

SUBJECT: Pennsylvania Child Protective Services Law

SUMMARY: Several changes to Pennsylvania's Child Protective Services Law (CPSL) require health center employees to comply with procedures for background checks as well as follow protocols for notifying authorities if there is any suspected child abuse. PACHC wants to ensure that all health centers are aware of these changes and are in compliance with the new requirements.

BACKGROUND: The General Assembly created the Task Force on Child Protection which submitted a report in 2012 outlining several recommendations for best practices and changes to existing law to better ensure the safety of the Commonwealth's children. Subsequent to this report, the legislature adopted several bills which establish various requirements on individuals who have direct contact with children (age 18 and below) in the form of care, guidance, supervision or training. In addition to these laws, recent changes made to CPSL in 2006 and 2007 are still in effect regarding background checks (*please refer to PACHC Memo 09-02*).

We will provide a brief description of the newly adopted laws below as they affect "mandated reporters." For your reference, a mandated reporter specifically includes health care professionals (physicians, medical examiners, dentists, optometrists, chiropractors, podiatrists, psychiatrists, psychologists, interns, nurses, public health personnel, funeral directors and hospital personnel); social service professionals (social service workers, child care workers and clergy); and anyone who as a part of their job has contact with children.

This obviously includes health center staff as mandated reporters and by law, these employees are required to report suspected child abuse or neglect immediately to Pennsylvania's Child Line (1-800-932-0313), which will notify the appropriate local authorities so they can initiate an investigation. The reporter will then be asked to submit a brief written report within 48 hours to aid authorities in making an assessment of the situation and pursue any necessary action on the child/children's behalf.

Here is a summary of changes enacted to the CPSL:

Legislation	Description	Effective Date
Act 108 of 2013	Expands the definition of child abuse in the Child Protective	December
(House Bill 726)	Services Law (CPSL) in specific categories with the overarching	31, 2014
	principal of "intentionally, knowingly, or recklessly" harming a	
	child and further provides for exclusions	
Act 117 of 2013	Expands the definitions of "perpetrator" and provides for the	December
(Senate Bill 23)	removal of juvenile perpetrators from the child abuse registry	31, 2014
Act 119 of 2013	Strengthens the immunity provisions for reporters from liability,	July 1, 2014
(Senate Bill 30	penalties for false reporting and improves the appeals process	
Act 4 of 2014	Clarifies the requirements for both health care providers and county	April 22,
(Senate Bill 29)	Children and Youth agencies with regard to the mandatory reporting	2014
	and investigation of infants (under age 1) identified as being	
	affected by the mother's illegal substance abuse/alcohol abuse	
Act 31 of 2014	Requires that mandated reporters complete at least 3 hours of	December
(House Bill 431)	approved child abuse recognition and reporting training before	31, 2014
	obtaining or renewing a current professional license every 5 years	
Act 32 of 2014	Clarifies and expands the list of mandated reporters of suspected	June 14,
(House Bill 436)	child abuse and increases the penalties for failing to report abuse	2014
Act 33 of 2014	Expands the list of mandated reports and requires they immediately	December
(Senate Bill 21)	report suspected child abuse when they have reasonable cause to	31, 2014
	suspect child abuse	
Act 34 of 2014	Provides for protection from employment discrimination when a	December
(Senate Bill 33)	mandatory reporter makes a report in good faith	31, 2014
Act 44 of 2014	Eliminates separate standards that currently exist for school	December
(Senate Bill 31)	employees and staff in institutions with regards to reporting	31, 2014
	suspected child abuse	
Act 45 of 2014	Eliminates separate reporting requirements of suspect child abuse by	December
(House Bill 434)	school employees	31, 2014

To clarify what this means to health centers, a mandated reporter is any individual who in the practice of their employment, occupation or practice of profession comes into contact with children and have reasonable cause to suspect that a child under their care, supervision, guidance or training is a recent victim of abuse. The mandated reporter may be an employee or volunteer of an organization providing services to the child.

The child does **NOT** need to come to the mandated reporter directly. A mandated reporter is required to contact Child Line (800-932-0313) to report suspected abuse if the child is seeking services at the reporter's affiliated organization. If a mandated reporter suspects abuse *outside* of their official capacity, they may still contact Child Line to submit a report as a non-mandated reporter.

Should a mandated reporter fail in their duties, they will be subject to monetary penalties of up to \$5,000 and/or two years of incarceration in addition to civil action.

Mandated reporters will have access to state-approved training opportunities to comply with the amended CPSL and in the process of renewing relevant certifications or licenses. Training will include identifying potential signs of abuse, reporting it and the procedures involved with a subsequent investigation.

MEMBER ACTION: There are several steps that you can take to ensure that your organization is in compliance with training and background check requirements.

- 1- Verify that all health center affiliated physicians, dentists, psychiatrists and other medical personnel; social workers, counselors and therapists; and volunteers who have regular contact with children have completed appropriate background checks per existing law (see PACHC Memo 09-02);
- 2- Educate health center staff on recent changes in the Children Protective Services Law. Training resources are available at the following:
 - For medical professionals, through the Pennsylvania Chapter of the American Academy of Pediatrics at (866) 823-7226 or <u>www.pascan.org</u>
 - For broad staff training, through the Pennsylvania Family Support Alliance at (800) 448-4906 or <u>www.pa-fsa.org</u>
- 3- Review the Department of Public Welfare's mandated reporter <u>brochure</u> and Guide for Mandated Reporters. Both are available with this memo on the <u>PACHC website</u>
- 4- Review and update health center policies and procedures to be compliant with all of the above

PACHC ACTION: PACHC will continue to monitor additional amendments to the Children Protective Services Law and related regulations that may impact Community Health Centers. In addition, training through the Pennsylvania Family Support Alliance will be provided during the PACHC Annual Conference & Clinical Summit, October 7-9 in Lancaster.

FOR MORE INFORMATION: Please continue to follow PACHC's *News You Can Use* newsletter for updates on this issue. Please contact our Director of Policy and Partnership, Jim Willshier, at <u>jim@pachc.org</u> or (717) 761-6443, ext. 206 for more information or questions.