



HEALTH AND HUMAN SERVICES POLICY

Department: Quality and Compliance

Policy Number: 3261

Policy Title: Mandated Reporting of Minors

Attachment: Suspected Child Abuse or Neglect Report

Revision History: New policy

Revised by/Date: Holly Hunter 4/2022

Commissioner Initials: *HH* **Director Initials:** *HH*

Approved by:

Jan Manary, Executive Director of Health Services

Date:

4/25/2022

POLICY: All employees of Mille Lacs Band Health and Human Services (HHS) who are mandated reporters are required to report any knowledge of abuse or neglect of a minor child. This includes any reasonable cause to believe that abuse or neglect has taken place.

AUTHORITY: MLBO Statute 3103, MLBO Statute 3143, and MN Statute 626.556

DEFINITIONS:

Person Specifically Required to Report (per MLB Statute 3243 Duty to Report Child Abuse and Neglect): physician, nurse, dentist, optometrist, or any other medical or mental health professional; school principal, school teacher, or other school official; social worker; child day care center worker or other child care staff, including foster parents, residential care or institutional personnel, counselor; peace officer or other law enforcement official; judge, juvenile counselor(s), clerk of court, Solicitor General or other judicial system official(s).

Minor Child (per MLB Statute 3103): person under the age of 18 years and has not be emancipated by order of a court competent jurisdiction.

POLICY DETAILS:

Who Should Report Child Abuse and Neglect

- Any person may voluntarily report abuse or neglect to the local welfare agency or agency responsible for assessing or investigating the report.
- Any mandated reporter who knows or has reason to believe a child is being or has been neglected or physically or sexually abused within the preceding three years must immediately (within 24 hours) make a report to the local welfare agency or agency responsible for assessing or investigating the report.

Where to Report

- If you know or suspect that a child is in immediate danger, call 911.
- Reports regarding incidents of suspected abuse or neglect of children occurring within a family, including a licensed foster care; within a family child care facility; or in the community should be made to the Mille Lacs Band Family Services department. In some situations, it may be appropriate to contact another local county social services agency, or local law enforcement.
 - Report to Family Services by emailing a completed *Suspected Child Abuse or Neglect Report* to mlbo.fsintake@hhs.millelacsband-nsn.gov or by calling the department.



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What to Report

- A report to any of the above agencies should contain enough information to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment and/or possible licensing violations. For reports concerning suspected abuse or neglect occurring within a licensed facility, the report should include any actions taken by the facility in response to the incident.
- An oral report of suspected abuse or neglect made to one of the above agencies by a mandated reporter must be followed by a written report to the same agency within 72 hours, exclusive of weekends and holidays.

Failure to Report

Those persons mandated to report a case of known or suspected abuse or neglect who knowingly fail to do so or willfully prevent someone else from doing so shall be subject to a civil cause of action pursuant to Mille Lacs Band Statutes.

Failure to Notify

If Mille Lacs Band Family Services (a local welfare agency) receives a report and fails to notify local police or the county sheriff as required, the person within the agency who is responsible for ensuring that notification is made shall be subject to disciplinary action.

Retaliation Prohibited

Mille Lacs Band Health and Human Services shall not retaliate against a mandated reporter for reports made in good faith or against a child with respect to whom the report is made. The Reporting of Maltreatment of Minors Act of Minnesota contains specific provisions regarding civil actions that can be initiated by mandated reporters who believe that retaliation has occurred.

Staff Training

Mille Lacs Band Health and Human Services will provide training to all mandated reporters upon hire and annually thereafter.

Replaces Policy #	HHS-ADM-HRM 3109 Mandated Reporting
Compliance - Posting Date	4/25/2023 (M)
Next Review - Due Date	

Suspected Child Abuse or Neglect Report

Mille Lacs Band of Ojibwe Family Services Department

18562 Minobimaadizi Loop Onamia, MN 56359

Phone: (320) 532- 1725 Fax: (320) 532-4569 Email: mlbo.fsintake@hhs.millelacsband-nsn.gov

After Hours Emergency On Call 320.630.2444

Important instructions: Please fill out the form completely with as much information as possible about the incident and send to Mille Lacs Band Family Services. If a phone report is made a written report **must** follow within 72 hours. Please retain a copy for your files.

Date of Report _____

Time of Report: _____

Type of Complaint: _____ Physical Abuse _____ Sexual Abuse

_____ Emotional Abuse _____ Neglect

Reporters Name: _____ Phone Number _____

Agency of Employment _____

Address: _____

Parent/Guardian Information:

Mothers Name: _____ Phone: _____

Address: _____

Fathers Name: _____ Phone: _____

Address: _____

Guardian (If Different than the parents) _____

Address: _____ Phone: _____

Alleged Victim's Name: _____

Date of Birth: _____ Gender: _____ Race: _____

Address: _____

Alleged Victim's Name: _____

Date of Birth: _____ Gender: _____ Race: _____

Address _____

Alleged Victim's Name: _____

Date of Birth: _____ Gender: _____ Race: _____

Address _____

Alleged Victim's Name: _____

Date of Birth: _____ Gender: _____ Race: _____

Address _____

Alleged Victim's Name: _____

Date of Birth: _____ Gender: _____ Race: _____

Address _____

Alleged Victim's Name: _____

Date of Birth: _____ Gender: _____ Race: _____

Address _____

Alleged Victim's Name: _____

Date of Birth: _____ Gender: _____ Race: _____

Address_____

Alleged Offender(s) Information:

Name:_____ **Relationship to Victim**_____

Address:_____ **Phone:**_____

Name:_____ **Relationship to Victim**_____

Address:_____ **Phone:**_____

Others aware of the suspected maltreatment:

Name:_____ **Relationship to Victim**_____

Address:_____ **Phone:**_____

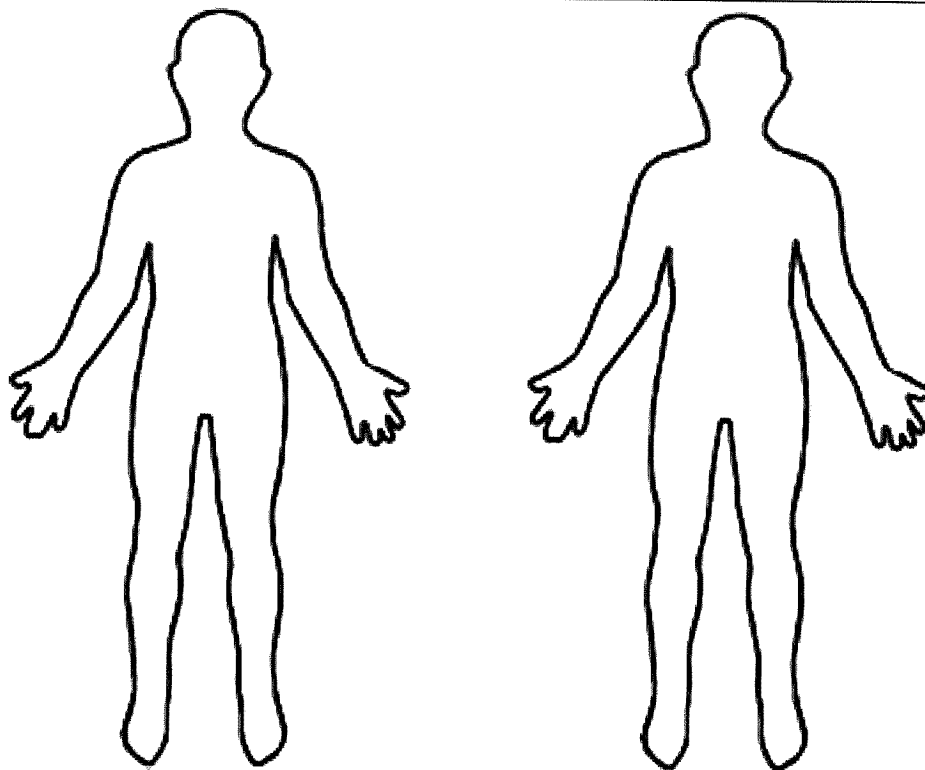
Name:_____ **Relationship to Victim**_____

Address:_____ **Phone:**_____

Nature of Complaint: Please describe the suspected maltreatment with as much detail as possible. Please include any background information that you think would be beneficial. Please print clearly and dark enough that the report can be faxed or copied. Please attach a separate piece of paper if needed.

Other Comments:

Please diagram any areas of suspected maltreatment if applicable:



A Professional or delegate who is engaged in the practice of healing arts, social services, hospital administration, psychological or psychiatric treatment, child care, education or law enforcement who has knowledge or reasonable cause to believe a child is being physically abused, sexually abused, or neglected shall immediately report the information to the appropriate welfare agency or police department.

Subd 4. Immunity from liability

Any person participating in good fail and exercising due care in the making of a report pursuant to this section shall have immunity from any liability, civil or criminal, that otherwise might result by reason of his action.

Reporter

Date

