

# Child Maltreatment for School Health Staff

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# Objectives

1. Identify indicators of physical abuse, sexual abuse , neglect, & emotional abuse
2. Describe legal requirements & mandatory reporting procedures
3. Recognize role of school personnel as mandated reporters
4. Demonstrate supportive & trauma informed communication strategies
5. Identify resources for intervention, counseling, & support services



# Physical abuse

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A young child with blonde hair is sitting in a wooden chair, looking down with a sad expression. The child is wearing a blue long-sleeved shirt. The background is a plain, light-colored wall.

# Potential Behavioral Indicators

Wears inappropriate clothing to hide body

Doesn't look to parents for comfort

Fear of contact

Withdrawn

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Physically or verbally aggressive

Distracted

# What are Common Sites for Non-Inflicted Bruises?



# What makes a bruise more concerning?



# Bruises with clear shape/pattern:





**Pattern**



**Location**

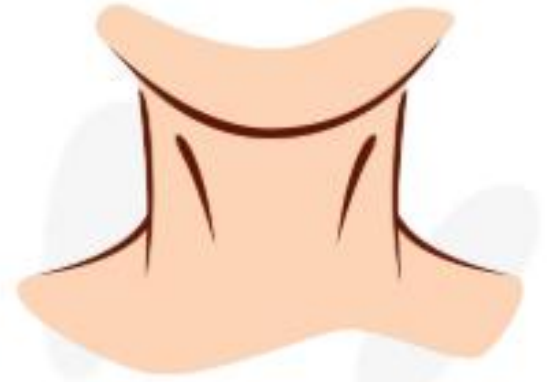
# "TEN-4"

**T:** Torso

**E:** Ear

**N:** Neck

**4:**  $\leq 4$  years of age and  
ANY on infants  $< 4$  months



# Bruising in Infants

“Those who don’t cruise rarely bruise.”





# Sexual Abuse

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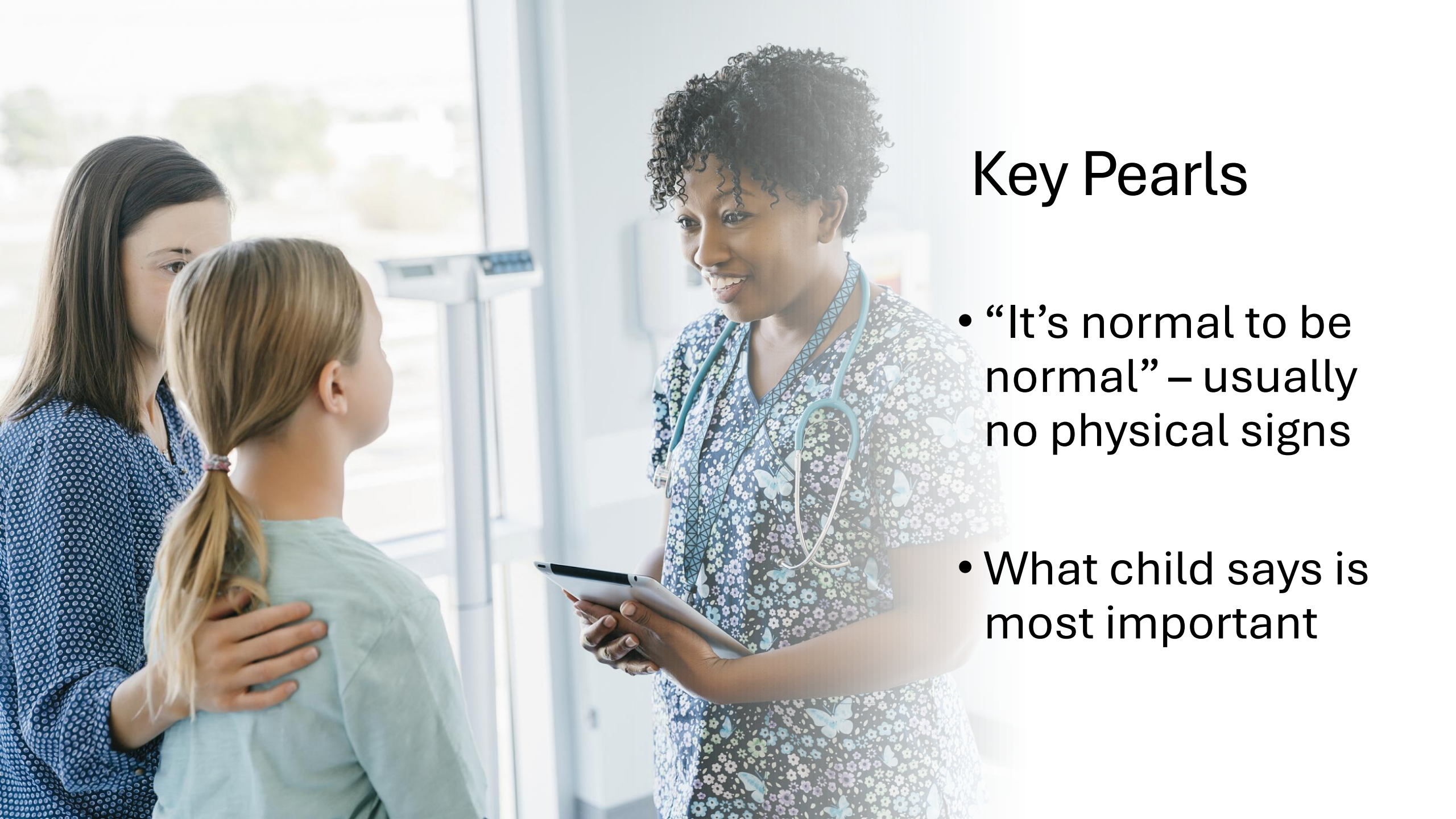
# Sexual Abuse – Behavioral Signs

- Sexual knowledge or behavior beyond age
- Promiscuous or hypersexual behavior
- Changes in sleeping, eating
- Acting out or withdrawn
- Falling grades

A close-up photograph of a person's open hand, palm facing forward. A faint, reddish mark is visible on the palm, near the base of the fingers. The background is blurred, showing other people in a crowd.

# Sexual Abuse – Physical Signs

- Difficulty walking or sitting
- Pain in genital area
- Genital/anal bleeding
- Sexually transmitted infections
- Pregnancy



## Key Pearls

- “It’s normal to be normal” – usually no physical signs
- What child says is most important

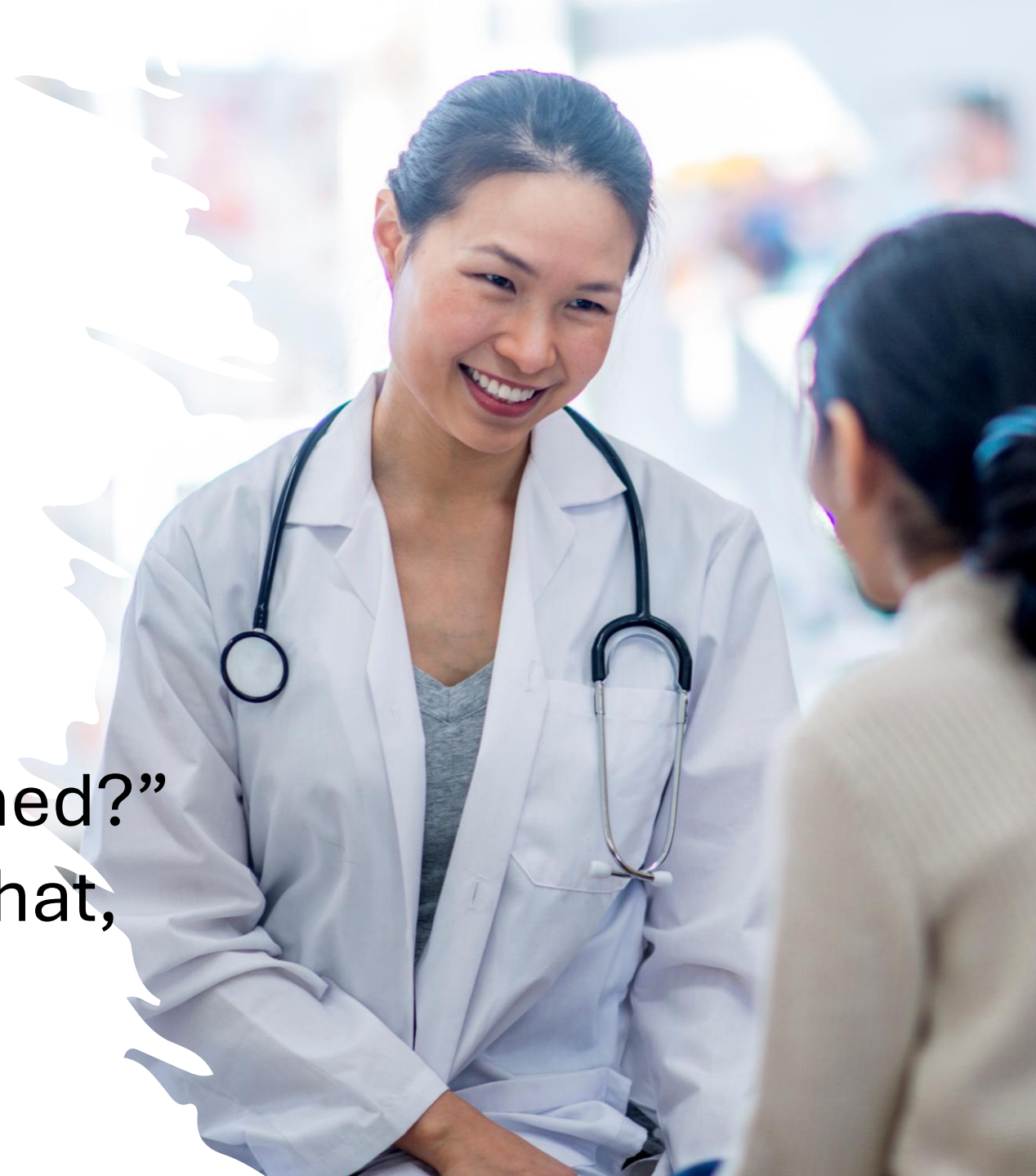
# Key Pearls

- Medical management depends on when most recent abuse occurred
- Emergency Department **ONLY** if recent abuse!! (past 3-5 days)
- Report → Child Advocacy Center



# History Taking


- Develop rapport
- Explain purpose
- Minimal facts
- Non-leading questions
  - “And then what happened?”
  - Wh- questions (who, what, when, where)



**Neglect**



# Neglect - Definition



Lack of Appropriate:

- Supervision
- Nutrition
- Clothing
- Housing
- Nurturance
- Health care

# Neglect – Behavioral Indicators



- Stealing food
- Begging
- Assuming adult responsibility
- Constant fatigue
- Limited social skills

# What is Medical Neglect?

Inadequate health care → actual or potential harm  
Lack of health care that offers significant net benefit

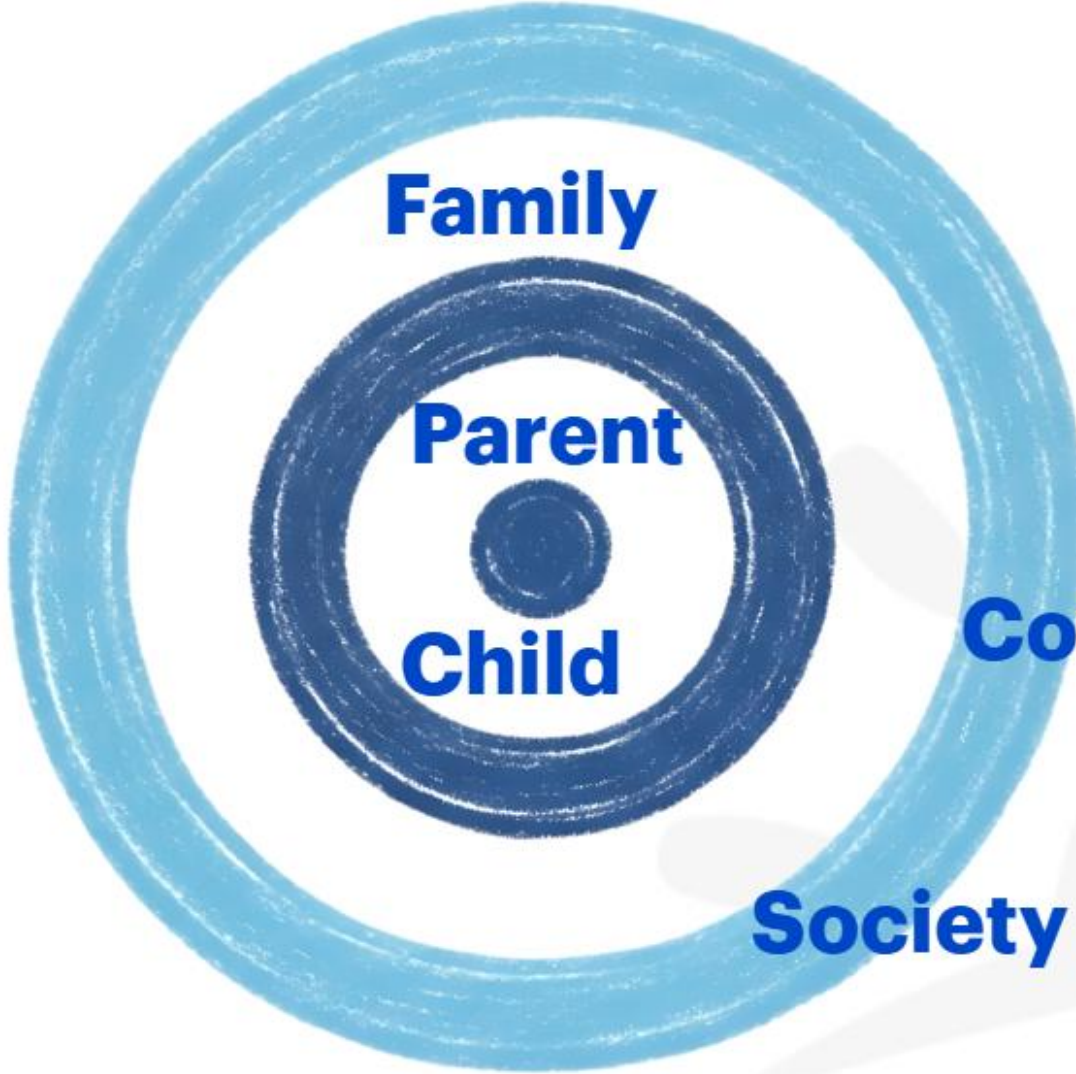
**Medical care**

**Dental care**

**Mental health care**

# What Harm Resulted?

<b>Actual Harm</b>	<b>Potential Harm</b>
<b>Hospitalization</b> <b>Disability</b> <b>Death</b>	<b>Severity?</b> <b>Likelihood?</b>



# **Contributing Factors**

## **Ecological Model**

**Community**

**Society**

# Is there a pattern of neglect?

- Chronicity/duration
- # of incidents/frequency
- Recurrence despite interventions
- Other forms of abuse/neglect

# Does the Parental and/or Professional Behavior Meet Reasonable Expectations?



# What Efforts Have Been Attempted?



# Are these medical neglect?

- Dental decay and not going to dentist
- Suicidal teen who refuses to attend therapy
- Chronic illness not adequately treated

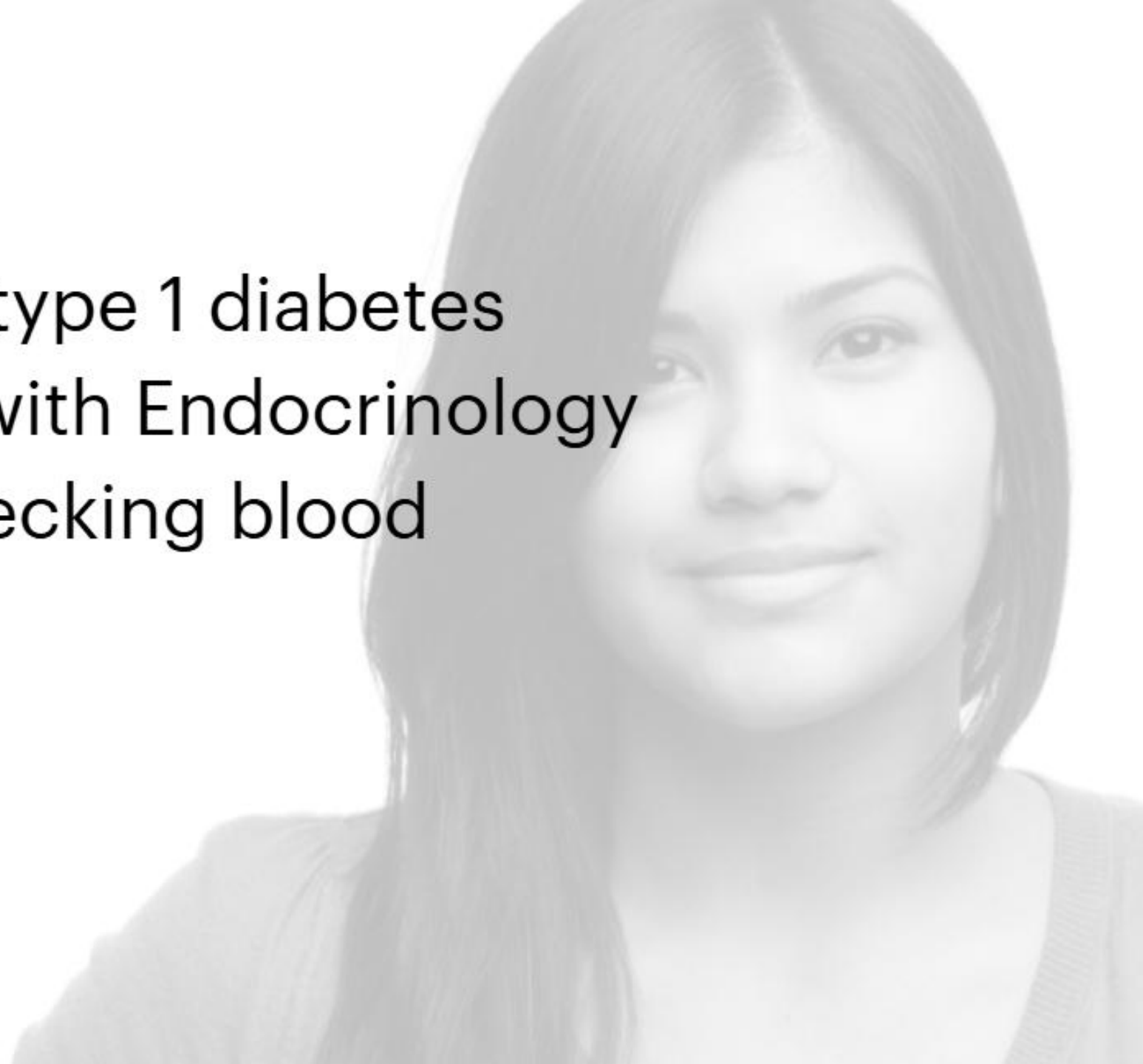
# Maya

- 14 year-old with type 1 diabetes
- 3 missed appts with Endocrinology
- Not regularly checking blood sugars
- Losing weight

A LIFEBRIDGE HEALTH GROUP

**CENTER FOR HOPE**

Advancing hope, healing and resilience



# Questions to Consider

- Is there actual or potential harm?
- What are the possible contributors?
- Is there a pattern of neglect?
- Does parental or professional behavior meet expectations?
- What has already been attempted?

# Resources – <https://marylandefc.org>



## Connecting Science, Policy, and People so Children Thrive.

Maryland Essentials for Childhood is a statewide initiative for collective impact.

**Every child is filled with tremendous promise,** and we have a shared obligation to foster their potential.

### Our Backbone Organizations:



English ▾ [Search Services](#)  [Contact Us](#)

About ▾ Policy Makers & Advocates ▾ Partners ▾ Grown Ups ▾ Take Action ▾

## How can we help?

Food, clothing, shelter, etc...

Add my location

First time here? Take a tour!

Need help?

Dial 211

## Topics



### Pregnancy / Postpartum

Family Planning & Pregnancy Counseling

Childbirth Education & Prenatal Care

Postpartum Care/Mental Health



### Parent & Caregiver Supports

Home Visiting for New Parents

Parenting Education

Parent & Caregiver Support Groups /  
Play Groups / Peer Support / Mentoring



### Child Care

Child Care Expense Assistance

Child Care Referrals

Child Care / Early Education Providers



### Basic Needs

Housing / Shelter

Home Furnishings, Services, & Supplies

Personal Grooming / Public Showers /  
Baths

# QUESTIONS??

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# Objectives

- ▶ To share requirements about the reporting of child abuse and neglect in Maryland
- ▶ To provide information about the programs within Baltimore City Department of Social Services
- ▶ To provide information about Child Protective Services' response to child maltreatment allegations

# DSS

## Child Welfare Umbrella

- ▶ Screening
- ▶ Child Protective Services
- ▶ Family Preservation
- ▶ Extended Hours
- ▶ Out of Home
- ▶ Adoption and Guardianship
- ▶ Resource Homes
- ▶ ...and more!

WHO IS RESPONSIBLE FOR  
REPORTING CHILD  
MALTREATMENT?

***EVERYONE!***

# What to do if child abuse or neglect is disclosed to you?

- ▶ Support child's decision to disclose
- ▶ Make it clear the child did the right thing by disclosing
- ▶ Make no promises to the child about keeping disclosure private
- ▶ Report abuse or neglect to the local department of social services or law enforcement

## Talking with parents, caregivers or other alleged maltreators

- ▶ Be supportive whenever possible
- ▶ Do not try to prove abuse or neglect
- ▶ Keep the focus on the welfare of the child
- ▶ Take a non-judgmental stance
- ▶ Explain your legal responsibility to make a report to the appropriate agency

# Referral Process

- ▶ Contact the 24 hour state-wide hotline at **1800-91-PREVENT**
- ▶ Provide oral report to intake worker at the Local Department of Social Services
- ▶ **Complete written report (Form 180)**
- ▶ E-mail the written report within 48 hours to DSS
- ▶ Request acknowledgement form

# Content of Oral & Written Report

- ▶ Child's identifying information
- ▶ Current location of the child
- ▶ Information about other children in the home or care of the alleged maltreater
- ▶ Parent/caregiver identifying information
- ▶ Alleged maltreater information
- ▶ Nature and extent of alleged abuse or neglect
- ▶ Any other information that will assist in determining the cause of maltreatment, person(s) responsible & safety of the alleged victim & risk of future maltreatment.

**What happens next?**

The background features abstract, overlapping geometric shapes in various shades of blue, ranging from light sky blue to deep navy blue. The shapes are primarily triangles and polygons, creating a dynamic, layered effect. The text 'What happens next?' is centered in a bold, sans-serif font.

# Screening Determination

Screener and Screening Supervisor review information provided and determine the outcome.

- ▶ Report can be:
  - ▶ Screened out
  - ▶ Referred for Family Preservation
  - ▶ Screened in for CPS response

# CPS Responses

- ▶ Traditional Investigation (IR)
  - ▶ Abuse (Physical or Sexual), Neglect, Mental Injury
- ▶ Alternative Response Assessment (AR)
  - ▶ Low risk allegations of Abuse or Neglect
- ▶ Request of Another Agency
  - ▶ Requests from other States or the Court

## Other Responses-Family Preservation

- ▶ Risk of Harm
  - ▶ Risk factors that if left unassessed may lead to child maltreatment

# Goals of Child Protective Services

- ▶ Promptly respond to reports of child abuse and neglect
- ▶ Assess safety of children where maltreatment has been alleged; plan with family if child is determined unsafe
- ▶ Assess needs and strengths of the family & child
- ▶ Recommend services to:
  - ▶ Promote safety
  - ▶ Reduce risk of future maltreatment
  - ▶ Enhance well-being of the child & family

# Three Dispositions in a CPS Investigation

## ▶ **Indicated**

- ▶ Sufficient evidence exists to determine abuse or neglect occurred

## ▶ **Unsubstantiated**

- ▶ Insufficient evidence to support a finding of indicated or ruled out

## ▶ **Ruled Out**

- ▶ No evidence that alleged abuse or neglect happened

# What happens when the CPS Response ends?

- ▶ Family's case closed with no follow up
- ▶ Family referred to community resources
- ▶ Family referred for on-going services.

# Goals of In Home-Services Program (Family Preservation)

- ▶ Promote safety & well-being of children & families
- ▶ Engage family to understand & identify the needs & strengths of each individual in family
- ▶ Assist families by improving parenting & family functioning
- ▶ Provide, refer, and coordinate services needed to improve/maintain child safety; family stability & independence

# Working Together

- ▶ Be available for follow up questions from assigned worker or supervisor
- ▶ Provide documentation that will help our understanding of situation
- ▶ Explain concerns in clear terms – DSS staff are not medically trained
- ▶ You may be contacted as collateral contact in an investigation

# Communicating with DSS Staff

Call hotline with new concerns or new information. Hotline staff will review the information and route it appropriately.

Calling workers directly is ok, but NOT a substitute for calling hotline.

# Additional Information

# Confidentiality

- ▶ The name of an individual making a CPS report can only be revealed with their written permission or by court order

# REPORTER RIGHTS

Family Law § 5-708 provides immunity from civil liability or criminal penalty to anyone who in good faith makes a report of suspected child abuse and/or neglect or participates in a CPS Response, or in any judicial proceeding resulting from the report.

# Consequences for Failure to Report

If the LDSS has substantial grounds to believe that a mandated reporter knowingly failed to report suspected child abuse or neglect as required by Family Law Article, §5-704, the LDSS shall notify, as appropriate, the board of education, institution, or licensed facility; the law enforcement agency; or the appropriate licensing board with which the person is employed/affiliated.

# Resources & Links

- ▶ Mandated Reporting - [DHS Website](#)
- ▶ Maryland Dept of Human Services [Mandated Reporter Training slides](#)
- ▶ Contact Information for [screening in all Maryland counties](#)
- ▶ [Center for Hope Mandated Reporter Training](#)
- ▶ [State of Maryland Screening Policy](#)



# Thank you!

**Contact Information:**

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443-423-7010

**1800-91-PREVENT**