

(AL0600) - (Duty to Report Suspected Child Abuse and Neglect)

1.0 PURPOSE

This policy informs all Interior Health (IH) Personnel of their responsibilities where there are concerns for the safety and well-being of a Child and/or where a Child has been or is likely to be physically, sexually or emotionally harmed.

2.0 **DEFINITIONS**

TERM	DEFINITION
Abuse	There are five categories of child maltreatment; physical abuse, emotional harm, sexual abuse, sexual exploitation, and neglect. Refer to B.C. Handbook for Action on Child Abuse and Neglect for more information.
CFCSA:	Child, Family and Community Service Act BC -provincial legislation that defines the mandate for child protection services in the province of BC.
Child:	A person under 19 years of age (up to and including 18 years and 364 days), including youth (a person who is 16 years of age or over but is under 19 years of age), but does not include a Fetus.
ICFSA (also known as DAA)	Through delegation agreements, the Provincial MCFD Director of Child Welfare gives authority to Indigenous Child and Family Service Agencies, also known as Delegated Aboriginal Agencies, and their employees, to undertake administration of all or parts of the Child, Family and Community Service Act. The amount of responsibility undertaken by each agency is the result of negotiations between the ministry and the Indigenous community served by the agency, and the level of delegation provided by the Director.
Duty to report:	All persons living in British Columbia have a duty to report any known or suspected child protection concerns. This duty supersedes an individual's right to privacy and is permitted without consent of the person under Section 33(2)(e) of the Freedom of Information and Protection of Privacy Act.
Fetus:	The unborn child from eight weeks after conception until birth.
MCFD:	Ministry of Children & Family Development supports healthy child development through collaborative professional practice delivered across a range of services. They are a provincial organization that has duties to manage child protection.
MCFD/ICFSA delegated worker:	A worker delegated under s.92 of the CFCSA to exercise the Director's powers, duties and functions for child protection or guardianship. A delegated worker is employed either by MCFD or

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	by ICFSA. Not all MCFD/ICFSA workers are delegated to provide child protection services.
Parent	As per the CFCSA, the definition of "parent" includes: (a)a person to whom guardianship or custody of a child has been granted by a court of competent jurisdiction or by an agreement, and (b)a person with whom a child resides and who stands in place of
	the child's parent or guardian,
	but does not include a caregiver, prospective adoptive parent or director;
Personnel	All Interior Health staff, contractors, medical staff, volunteers and students.
Reason to Believe:	Based on what personnel has seen or on the information they have received, believe a child has been or is likely to be at risk of abuse or neglect. This does not require certainty.

3.0 Policy

3.1 When to Make a Report

- In accordance with <u>s.14 of the CFCSA</u>, all personnel have a legal duty to
 promptly and directly report child protection concerns as identified in <u>s.13</u> of the
 CFCSA to MCFD when they have Reason to Believe a Child has been or is likely
 to be at risk of abuse or neglect.
- This duty supersedes an individual's right to privacy and is permitted without consent of the person under <u>Section 33(2)(e)</u> of the Freedom of Information and Protection of Privacy Act (FOIPPA).
- Personnel have a duty to report when they have a Reason to Believe that a Child who is pregnant has been or is likely to be at risk of abuse or neglect, as the concern is about the Child, not the Fetus; concerns regarding a fetus require written consent, see 3.2 below.

If Personnel are not sure whether the information they have requires making a report, they can contact MCFD to discuss their concerns without mentioning any patient/client identifiers to determine if a formal report should be made. MCFD hold the ultimate responsibility of investigating the suspected child abuse

3.2 When Written Consent is Required to Report to MCFD

Personnel cannot report to MCFD any concerns they have about a Fetus without the written consent of the parent (FORM #807429). This is a change to the former practice of Birth Alerts, where consent was not required.

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3.3 Statutory Duty to Report to Police

Call 9-1-1 when:

A child is in immediate danger.

Call local police detachment when:

A criminal offence against a child has been or is likely to be committed.

Report concerns to MCFD <u>after</u> you call the police.

3.4 Responsibilities

All Personnel:

- Have a duty to report child abuse or neglect concerns.
- Have a responsibility to understand and comply with the provisions of this policy.
- Inform site leadership and/or managers if policy training and education regarding this
 policy are insufficient.

Leaders and Managers:

- Confirm staff are familiar with policy and procedure.
- Confirm program/site procedures for reporting and documenting suspected child abuse or neglect are in are in alignment with the procedure outlined in section 4.0.

3.5 Failure to Comply with Legislation

Anyone who fails to report a child abuse or neglect or knowingly reports a false concern, will be considered to have committed an offence under the <u>CFCSA section 14.6</u> and may be liable to a fine and/or imprisonment. Disciplinary action up to and including termination or loss of privileges may be taken and individuals may be reported to a regulatory body.

4.0 PROCEDURES

4.1 Submitting a Report to MCFD

MCFD has a centralized intake to receive all reports of child protection concerns 24 hours a day. The number to call anywhere in the province, 1-800-663-9122.

Information that should be provided to MCFD, if known, when making the report:

- Information about the child: name, location, date of birth, language spoken, special needs;
- Whether there are any immediate concerns about the child's safety;
- Reasons for believing the child is at risk (include specific details);
- Any statements or disclosures made by the child;
- Information about the family, parents and alleged offender;
- Information about siblings or other children or youth who may be at risk;
- Any previous incidents involving, or concerns about the child;

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- Information about other persons or agencies closely involved with the child, and/or family;
- Information about other persons who may be witnesses or may have information about the child;
- Information about the nature of the child's disabilities, his or her mode of communication, and the name of a key support person; and
- Any other relevant information concerning the child, and/or family, such as language or culture.

The name of the personnel making the report will be kept confidential, unless it is required for the purpose of a court hearing. Refer to <u>s.74 of the CFCSA</u> for additional details. Furthermore, Health Records will redact the names of reporting personnel from the chart in the event of a request for health records.

4.2 After the report is made

Personnel are to document as per usual process for their discipline and must include:

- Specific details of information seen or heard regarding concerns of child abuse and neglect. (Refer to <u>B.C. Handbook for Action on Child Abuse and Neglect</u> for examples)
- Document MCFD/ICFSA contact information and any directions or information they provided.
- Any interventions that the personnel took in response to the knowledge of suspected child abuse and neglect.

5.0 REFERENCES

Child, Family, and Community Service Act http://www.bclaws.ca/civix/document/id/complete/statreg/96046 01#section13

B.C. Handbook for Action on Child Abuse and Neglect

https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/public-safety/protecting-children/childabusepreventionhandbook serviceprovider.pdf

Provincial Health Services Authority-Child Protection Policy http://shop.healthcarebc.ca/phsa/PHSAPOD/Quality%20Safety/Risk%20Management/C-99-11-20566.pdf

Fraser Health Authority-Clinical Policy: Reporting Suspected Child Maltreatment

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