What happens when DCF receives a report of child abuse and/or neglect?

When DCF receives a report of abuse and/or neglect, called a "51A report," from either a mandated reporter or another concerned citizen, DCF is required to evaluate the allegations and determine the safety of the children. During DCF’s response process, all mandated reporters are required to answer the Department’s questions and provide information to assist in determining whether a child is being abused and/or neglected and in assessing the child's safety in the home.

Here are the steps in the Child Protective Services (CPS) process:

1. The report is screened. The purpose of the screening process is to gather sufficient information to determine whether the allegation meets the Department’s criteria for suspected abuse and/or neglect, whether there is immediate danger to the safety of a child, whether DCF involvement is warranted and how best to target the Department’s initial response. The Department begins its screening process immediately upon receipt of a report. During the screening process DCF obtains information from the person filing the report and also contacts professionals involved with the family, such as doctors or teachers who may be able to provide information about the child's condition. DCF may also contact the family if appropriate.

2. If the report is "Screened-In," it is assigned for a Child Protective Services (CPS) Response to determine whether there is reasonable cause to believe that a child has been abused and/or neglected. "Reasonable cause to believe" means a collection of facts, knowledge or observations which tend to support or are consistent with the allegations and when viewed in light of the surrounding circumstances and the credibility of the persons providing the information, would lead a reasonable person to view in light of the surrounding circumstances and the credibility of the persons providing the information, would lead a reasonable person to conclude that a child has been abused or neglected. The Response includes an investigation of the validity of the allegation(s) received, a determination of current danger and future risk to the child and an assessment of the capacity of the parent(s)/ caregiver(s) to provide for the safety, permanency and well-being of their child.

3. A determination is made as to whether the report is:
   - "Unsubstantiated" - There is reasonable cause to believe that the child was abused and/or neglected or that the child's safety or well-being was compromised; or
   - "Supported" - There is reasonable cause to believe the child was abused and/or neglected; the actions or inactions by the parent(s)/caring person(s) place the child in danger or pose substantial risk to the child's safety or well-being; or the person was responsible for the child being a victim of sexual exploitation or human trafficking; or
   - "Substantiated Concern" - There is reasonable cause to believe that the child was neglected and the actions or inactions by the parent(s)/caring person(s) create the potential for abuse and/or neglect, but there is not immediate danger to the child's safety or well-being.
   - DCF also determines whether Department intervention is needed to safeguard the safety and well-being of the children in the home. If DCF intervention continues, a Family Assessment and Action Plan are developed with the family.

Some families come to the attention of the Department outside the 51A process: Children Requiring Assistance (CRA) cases referred by the Juvenile Court, cases referred by the Probate and Family Court, babies surrendered under the Safe Haven Act and voluntary requests for services by a parent/family. These cases are generally referred directly for Family Assessment and Action Planning.

What are the timeframes for completing a Screening and/or Response?

- Screening: Begins immediately for all reports. Emergency responses are completed within two hours. For a non-emergency response, screening is completed in one business day and may be extended for additional business days in limited circumstances.
- Emergency Response: Must begin within two hours and be completed within five business days of the report.
- Non-Emergency Response: Must begin within two business days and be completed within 15 business days of the report.
- Family Assessment: May take up to 60 business days.

Will I be informed about the DCF determination?

If you are the mandated reporter who filed the report, you will receive a copy of the decision letter that is sent to the parents or caregiver. In that letter you will be informed of the Department’s response, the determination and whether DCF is opening a case for continued DCF involvement.

Does DCF tell the family who made the 51A report?

DCF regulations do not allow the Department to disclose the name of a reporter unless ordered by a court or required by statute such as when the Department is required to provide the 51A report to the District Attorney or other law enforcement. (CMR 12.00 et seq).

Referrals to the District Attorney

If the Department determines that a child has been sexually abused or sexually exploited, has been a victim of human trafficking, has suffered serious physical abuse and/or injury, or has died as a result of abuse and/or neglect, DCF must notify local law enforcement as well as the District Attorney, who have the authority to file criminal charges.

Child Protection Information

For more information about reporting child abuse and/or neglect:
- [www.mass.gov/dfc](http://www.mass.gov/dfc) for general information or to find a DCF Area Office
- [Child At-Risk Hotline](tel:800-792-5200)
- DCF Ombudsman
  - [817-748-2444](tel:817-748-2444) for inquiries about DCF programs, policies or service delivery.
- [508-929-2000](tel:508-929-2000) for inquiries about DCF programs, policies or service delivery.
- [800-222-2211](tel:800-222-2211) for inquiries about reporting child abuse and/or neglect.
as a mandated reporter, what are your responsibilities?

As a mandated reporter, what are your responsibilities? Under Massachusetts law, mandated reporters must immediately make an oral report to DCF when, in their professional capacity or other concerned individuals to learn about children who may need protection. More than 75,000 reports are received on behalf of children each year. The Department is responsible for protecting children from abuse and/or neglect. DCF seeks to ensure that each child is safe, nurturing, permanent home. The Department also provides a range of services to support and strengthen families with children at risk of abuse and/or neglect.

Who is a mandated reporter? Massachusetts law defines the following professionals as mandated reporters:

- Physicians, medical interns, hospital personnel engaged in the examination, care or treatment of persons, medical examiners;
- Emergency medical technicians, dentists, nurses, chiropractors, podiatrists, optometrists, osteopaths;
- Public or private school teachers, educational administrators, guidance or family counselors;
- Early education, preschool, child care or after school program staff, including any person paid to care for, or work with, a child in any public or private facility, home or program funded or licensed by the Commonwealth, which provides child care or residential services. This includes child care providers and parental agencies, as well as voucher management agencies, family child care providers and child care home programs;
- Child care licensees, such as staff from the Department of Early Education and Care;
- Social workers, foster parents, probation officers, child support magistrates of the district courts, parole officers;
- Firefighters and police officers;
- School attendance officers, allied health care professionals, licensed human services professionals;
- Psychiatrists, psychologists, clinical social workers, drug and alcohol counselors;
- Persons in charge of a medical or other public or private institution, school or facility or their agents;
- Congregational members, including ordained or licensed leaders of any church or religious body, persons performing official duties on behalf of a church or religious body, persons employed by a religious body to supervise, educate, coach, train or counsel a child on a regular basis; and
- The Child Advocate.

Your report should include:

- Your name, address, telephone number and relationship (if any) to the child;
- All identifying information you have about the child and parent or other caregiver, if known, including emergency contacts and language(s) speaks;
- The nature and extent of the suspected abuse and/or neglect, including any evidence or knowledge of prior injury, abuse, maltreatment, or neglect;
- The identity of the person you believe is responsible for the abuse and/or neglect;
- The circumstances under which you first became aware of the child’s injuries, abuse, maltreatment or neglect, including dates and/or timeframes;
- What action, if any, has been taken thus far to treat, shelter, or otherwise assist the child;
- Any other information you believe might be helpful in establishing the cause of the injury and/or person responsible;
- Any concerns about alcohol/drug use/misuse by the parent/caregiver;
- Any other information that could be helpful to DCF staff in making safe contact with an adult victim in situations of domestic violence (e.g., work schedules, place of employment, daily routines);
- Any concerns you have for the child’s welfare, safety, and/or health;
- Any other information about the family’s strengths and capacities you believe would be helpful in ensuring the child’s safety and/or supporting the family to address the abuse and/or neglect concerns.

Hospital personnel should take photographs of any trauma that is visible on the family that you have referred them to DCF for help, but do not do so if you think it would increase the risk to the child.

How does DCF define abuse and neglect? Under the Department of Children and Families regulations (110 CMR, Section 2.00):

- Abuse: The non-accidental commission of an act by a caregiver which causes, or creates a substantial risk of, physical or emotional injury or sexual abuse to a child, or the commission of a child through sexual abuse or human trafficking, regardless if the person responsible in a caregiver. This definition is not dependent upon location (i.e., abuse can occur while the child is in an out-of-home or in-home setting). DCF defines “sexual abuse” as any non-accidental act by a caregiver upon a child that constitutes a sexual offense under the laws of the Commonwealth or any sexual contact between a caregiver and a child for whom the caregiver is responsible.

- Neglect: Failure by a caregiver, either deliberately or by negligence or inability, to take those actions necessary to provide a child with adequately food, clothing, shelter, medical care, supervision, emotional stability and growth, or other essential care, including maltreatment or failure to thrive; provided, however, that such inability is not due solely to inadequate economic resources or inability to the existence of a handicapping condition.

Physical Injury means: Death; fracture of a bone, a subcutaneous hematoma, burns, impairment of any organ, and any other such nontrivial injury, or soft tissue swelling or skin bruising, depending upon such factors as the child’s age, circumstances under which the injury occurred and the number and location of bruises.

Emotional Injury means: An impairment or disorder of the intellectual or psychological capacities of a child, resulting in observable and substantial reduction in the child’s ability to function within normal range of performance and behavior.

Who is a caregiver? A “caregiver” can be a child’s parent, step-parent, guardian, or any household member entrusted with the responsibility for a child’s health or welfare. In addition, any other person entrusted with the responsibility for a child’s health or welfare, both in and out of the child’s home, regardless of age, is considered a caregiver. Examples may include: relatives from outside the home, teachers or staff in a school setting, workers at an early education, child care or after school program, a babysitter, foster parents, staff at a group care facility, or persons charged with caring for children in any other comparable setting.

When should a report involving domestic violence be filed? Domestic violence is defined as a pattern of coercive controlling behaviors that one person exercises over another in an intimate relationship. Not every situation involving domestic violence merits intervention by DCF. Mandated reporters are encouraged to carefully review each family’s situation and to identify any specific impact on the child(ren) when considering whether or not to file a SIA report with DCF. In some situations, a report may actually create additional risks for the victim and the children. If possible, discuss the filing of a report with the caregiver who is a victim first and address the potential need for safety planning. A report is most likely necessary if the following risk circumstances are current concerns:

- The alleged perpetrator threatened to kill the caregiver, children or self and the caregiver faces for their safety;
- The alleged perpetrator seriously injured the child in an incident where the caregiver was the target;
- The alleged perpetrator coerced the child to participate in or witness the abuse of a caregiver;
- The alleged perpetrator used or threatened to use a weapon, and the caregiver believes that the perpetrator intended or has the ability to cause harm.

For more information on this topic, please refer to the DCF Brochure, Promising Approaches: Working with Families, Child Welfare and Domestic Violence. This brochure is available at www.mass.gov/eohhs/docs/dfc/promising approaches publication.pdf.