

SPECIAL PROGRAMS FOR YOUTH	Policy Number: 1.1453
Policy Title: Sexual Abuse and other Child Abuse Reporting	Written: 1/7/2013
Corresponds to:	Revised: 7/29/2019
Title 15, Article 8, Section 1453	Approved by: Mona Tahsini, MFT-SPY Director

I. POLICY

- 1) The health administrator for Special Programs for Youth (SPY), in cooperation with the facility administrators for the Juvenile Justice Center (JJC), shall develop policy and procedures for treating victims of sexual assaults and for reporting such incidents to local law enforcement when they occur in the facility.
- 2) The evidentiary examination and initial treatment of victims of sexual assault shall be conducted at a health facility that is separate from the custodial facility and is properly equipped and staffed with personnel trained and experienced in such procedures. See also SPY Policy 1.1452 Collection of Forensic Evidence
- 3) To ensure the safety of youth in this facility, all treating health care personnel shall report any suspected instances of child abuse sustained by youth either prior to detention or occurring within the facility, as mandated by state law (Penal Code, Sections 11160-11161);

II. DEFINITIONS

As used in this document, the following definitions shall apply:

A. **CHILD ABUSE:** A physical injury inflicted by other than accidental means on a child by another person. Child abuse also includes:

1. Sexual abuse, assault, or exploitation which may occur in various forms, such as rape, incest, molestation, exposure to sex acts, and pornographic activities. (P.C.11165.1)
2. Neglect which may occur in various forms including negligent treatment or maltreatment, physical neglect, medical or nutritional neglect, or inadequate supervision of a child by a person responsible for the child's welfare where harm to the child's health or welfare is indicated or threatened. Neglect includes both acts and omissions on the part of the responsible person. (P.C.11165.1)
3. Willful cruelty or unjustified punishment of a child means a situation where any person willfully causes or permits any child to suffer or inflicts thereon, unjustifiable physical pain or mental suffering, or having the care of custody of any child, willfully causes or permits the person or health of the child to be placed in a situation such that his or her person or health is endangered. (P.C.11165.3)
4. Unlawful corporal punishment or injury means a situation where any person willfully inflicts upon a child any cruel or inhuman

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corporal punishment or injury resulting in a traumatic condition. It does not include an amount of force that is reasonable and necessary for a person employed by or engaged in a public school to quell a disturbance threatening physical injury to person or damage to property, for purposes of self-defense, or to obtain possession of weapons or other dangerous objects within the control of the pupil. It also does not include an amount of force that is reasonable and necessary for a peace officer to quell a disturbance threatening physical injury to person or damage to property to prevent physical injury to person or damage to property, for purposes of self-defense, to obtain possession of weapons or other dangerous objects within the control of the child, or to apprehend an escapee. (P.C.11165.4)

5. Abuse in out-of-home care is defined to include all cases of abuse as defined above occurring where the person responsible for the child's welfare is a licensee, administrator, or employee of any facility licensed to care for children, or an administrator or employee of a public or private school or other institutions or agency. Abuse in out-of-home care does not include an injury caused by a peace officer to quell a disturbance threatening physical injury to person or damage to property, for purposes of self-defense, to obtain possession of weapons or other dangerous objects within the control of a child, or to apprehend an escapee. (P.C.11165.5)

B. **REASONABLE SUSPICION:** means that it is objectively reasonable for a person to entertain the suspicion of child abuse, based upon facts that could cause a reasonable person in a like position, drawing when appropriate on his or her training and experience, to suspect child abuse.

C. **CHILD:** A person under the age of 18 years.

III. PROCEDURES

A. Child Abuse Notification: When it is suspected that a juvenile is the victim of abuse, the following actions shall be initiated:

1. The SPY staff person (clerical, health care provider, behavioral health provider, health educator, dentist, etc.) who first obtains information about, observes, or reasonably suspects child abuse shall report the abuse. Alternatively, when two or more mandated reporters are present and jointly have knowledge of a known or suspected instance of child abuse, and when there is agreement among them, the telephone report may be made by a member of the team selected by mutual agreement and a single report may

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be made and signed by such selected member of the reporting team. Any member, who has knowledge that the member designated to report has failed to do so, shall report this to the SPY Director and thereafter make the report.

The reporting person shall:

a. Without jeopardizing the juvenile, collect all available information in order to make an informed decision and as complete a report as possible.

b. Immediately refer any questions or uncertainties to SPY Director, to the manager on duty; and/or to a staff person at the San Francisco Human Services Agency Child Abuse Hotline at (415) 558-2650. This number is for all youth who are residents of San Francisco. It may be used to obtain the appropriate Child Abuse Reporting Hotline numbers for residents of other counties/states.

c. Inform the juvenile that child abuse reports must be submitted and with whom the reports will be shared.

d. Report such information or suspicion immediately, or as soon as practically possible, by telephone to the Child Abuse Hotline at: (415) 558-2650. The telephone report shall include name of the person making the report, name of the child, present location of the child, nature and extent of the injury, and any other information requested by the agency, including information that led the staff member to suspect child abuse. Obtain the name of the contact person for documentation in the written report.

e. Report such information or suspicion in writing by completing a "Suspected Child Abuse Report" (Form SS 8572) Form SS 8572 shall be submitted via fax within 36 hours of receiving information about the incident.

f. When police abuse is suspected submit completed Form SS 8572 to the San Francisco CPS Hotline. The San Francisco CPS Hotline will forward the form to the Office of Citizen Complaints (OCC). If the abuse is considered serious and therefore warrants immediate action, report information immediately by telephone to the OCC. If there are signs of abuse, request that the OCC send a photographer.

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2. The completed "Suspected Child Abuse Report" and Quality of Care Report form shall be distributed in the following manner by the staff person making the report:

a. The original of Form SS 8572 shall be faxed to the CPS Hotline.

b. One copy of Form SS 8572 shall be filed in the youth's medical chart in the Correspondence Section.

c. One copy of Form SS 8572 and the Quality of Care Report shall be forwarded to SPY Director, or designee, to be filed chronologically in the SPY CPS Report binder and SPY Quality of Care Report Binder.

d. If the youth discloses abuse to a subsequent SPY staff person and the content of that disclosure is the same as the original report on file in the SPY chart, then an additional report does not need to be filled. However, if the disclosure includes different or new information another report must be filed and documented as above.

3. The youth shall be provided medical and mental health care, as needed.

B. Sexual Assault Reporting and Treatment: When it is suspected that a youth has been sexually abused while in custody, follow the procedures laid out in the *SPY response to suspicion/report of sexual abuse of a detained youth* checklist.

C. Police Abuse Reporting and Treatment: When it is suspected that a youth has been abused by the police the following shall be initiated:

1. At the time of admission:

a. The youth with physical injuries which require special medical evaluation and/or intervention shall be refused admission to JJC and sent to SFGH for evaluation and treatment, and a written medical clearance prior to admission.

b. If the suspected abuser (s) is the transporting officer (s), the youth shall be admitted to JJC and the Juvenile Hall

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Admissions Office Staff will be responsible for requesting transportation for the youth by other police officers or by Juvenile Hall staff.

2. After admission:

a. If the youth reports police abuse after admission to JJC, the health care provider who first obtains such information shall immediately consult with the SPY Director or other manager and, as appropriate, implement the procedures outlined above for OCC and CPS reporting.

b. The youth shall be provided medical and mental health care, as needed.

D. Suspected Intra-institutional Abuse by Staff: When a JJC or DPH staff member is suspected to have abused a youth; the procedures outlined below shall be followed:

1. The health care provider who first obtains information about, observes, or reasonably suspects intra-institutional abuse shall

a. Immediately consult with the SPY Director or another manager.

b. Notify the appropriate administrator of the division/department in which the staff member in question is employed.

c. Implement the procedures outlined above for CPS reporting and/or the *SPY response to suspicion/report of sexual abuse of a detained youth* checklist.

2. The SPY Director, or designee, shall notify the Director of Juvenile Hall when a suspected child abuse report has been filed on a Juvenile Hall staff.

3. The suspected staff member (if a SPY employee) shall be immediately reassigned pending the outcome of the investigation.

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4. If child abuse is proven, the immediate supervisor of the staff member in question may recommend disciplinary action up to and including termination.

E. Suspected Intra-institutional Abuse by Peers: When a detainee is suspected to have abused another detainee; the procedures outlined below shall be followed:

1. The health care provider who first obtains information about, observes, or reasonably suspects abuse by another detainee shall

a. Immediately consult with the SPY Director or another manager.

b. in the case of suspected sexual assault, implement the procedures identified in the *SPY response to suspicion/report of sexual abuse of a detained youth* checklist.

2. SPY shall inform the Director of Juvenile Hall of the allegations so that all efforts should be made to preserve the health and safety of the alleged victim and alleged perpetrator.

F. Reporting Historical Abuse. The SPY staff person (clerical, health care provider, behavioral health provider, health educator, dentist, etc.) who first obtains information about historical child abuse (neglect, physical, emotional or sexual abuse) shall:



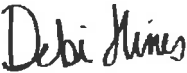


1. Call the appropriate agency (County CPS Hotline, Police Department, etc.) to attempt to verify the historical abuse.
2. If the historical abuse can be verified, the staff person shall document the agency (County CPS Hotline, Police Department, etc.), phone number, and name of contact person in their discipline's progress note section,
3. Note the verified historical abuse under Chronic Problems on the Problem List in the medical chart with the date and staff's initials.
4. If the historical abuse can NOT be verified, the staff person is to file a report as outlined above.

G. Legal Responsibilities: With respect to child abuse reporting, the following rights and responsibilities shall apply:

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1. Mandated reporters who know of or observe a child, within the scope of their employment, that they reasonably suspect is the victim of child abuse must report this to a child protective agency.
 2. Required reports shall be confidential and may be disclosed only as provided by law. Any violation of confidentiality may be punishable by imprisonment, a fine or both.
 3. No supervisor or administrator shall impede the making of a required report or impose punishment for reporting.
 4. Mandated reporters who suspect that a child is a victim of mental suffering may report this to a child protective agency.
 5. Mandated reporters shall have immunity from civil and criminal liability for required reports.
 6. Failure to make a required report can result in imprisonment, a fine, or both. In addition, a mandated reporter who fails to report child abuse may be held liable for damages for injuries attributable to failure to report.

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