



## REPORTING SUSPECTED CHILD ABUSE (INS-G016)

Clarksville-Montgomery County School System (CMCSS) recognizes that state law specifies that every citizen has a duty to report suspected brutality, abuse, neglect, or child sexual abuse. In accordance with T.C.A. §37-1-403(b), the district has developed its own policy and procedures for reporting suspected cases of abuse or neglect to give employees guidance to ensure that suspected child abuse is reported promptly.

The district requires any employee who suspects abuse to report that suspicion directly to the Department of Children's Services (DCS), the building level Child Abuse Coordinator AND to the District Lead School Counselors and SRO. In addition to reporting to DCS, any employee who suspects severe physical or sexual abuse is required to contact SRO by phone directly, if not available then contact the Level Director who will notify the appropriate law enforcement agency.

In addition to reporting to DCS, in all cases where the suspected abuser is a CMCSS employee, volunteer, or contracted services provider, or if it is suspected that the abuse occurred on school grounds or while the child was under the supervision or care of the school, district employees will report their suspicions directly to their supervisor who will then report to the Chief Human Resources Officer (CHRO)/ designee who will notify the appropriate law enforcement agency. If an employee suspects a supervisor, individuals may contact CHRO/designee directly.

Each employee has an independent duty under state law and this policy to report child abuse. Persons making a report of child sexual abuse or reporting harm or physical abuse of a child are presumed to be acting in good faith and are immune from any liability, civil or criminal, that may be brought in a state court action. Such person's identity will remain confidential as set forth in the school system's applicable policies and procedures unless otherwise required by law or court order. The referent's name will not be released to any person other than DCS and/or law enforcement and school administrators on a need-to-know basis as required by state law and as needed to "protect the health and safety of the student or other individuals."

The information contained in these training guidelines is to provide supervisors information to use in informing all district employees about the definition of child abuse, how to report suspicions of child abuse, and how to accommodate related investigations.

### How Do I Report Suspicion of Child Abuse? (See Exhibit A)

1. Any CMCSS employee who suspects child abuse must relay their suspicions immediately by telephone, or online, to Central Intake, DCS, Child Protective Services.
  - a. **Telephonic referrals** - call **Central Intake** at 1-855-209-4226 (Educators only) or **1-877-237-0004** and **complete INS-F140**. This line is manned 24-hours a day by Central Intake personnel. The referring party will document the nature of the referral by completing INS-F140 in its entirety.
  - b. **Online referrals** –For online referral, complete INS-F140 and complete the online report at <https://apps.tn.gov/carat/referral/emergency.html>, and keep a record of the submitted online report. **Online referrals are for non-emergency situations only per DCS. Online referrals should NOT be completed for suspected physical and/or sexual abuse or any other concern that requires immediate attention.**
  - c. If the person who suspects child abuse does not have access to a telephone, the referent will contact the Child Abuse Coordinator in the building or area who will make a telephone available so that the employee can report the suspected child abuse.
  - d. After DCS Central Intake has been notified, the employee or Child Abuse Coordinator will email the referral to District Lead School Counselors at [leadcounselors@cmcss.net](mailto:leadcounselors@cmcss.net) and the school resource officer assigned at that location. If the referral involves a CMCSS employee, volunteer or contracted services provider, the referral should be scanned and emailed to the CHRO/designee as well.

- e. School personnel will take no action to verify or investigate the complaint.
  - f. Child Abuse Coordinators must maintain a record of all referrals/supporting documentation (Telephonic and Verification of Online Reports, etc.) and maintain these in a secure, confidential location at the building/site level. Record of referrals should include who made the call, the purpose of the call, and the name of the DCS staff member contacted. Due to the sensitive nature of this information, it must be maintained in a secure, confidential manner.
  - g. The employee making the report should provide as much of the following information as possible to DCS: 1) Name, address, and age of child; 2) Name, address and person responsible for the care of the child; 3) Facts that led to the report., and 4) Other pertinent information such as the location of the child's parents/guardians, identity of the alleged perpetrator, other agencies working with the family, the family's knowledge of the referral, the school's past experience with the family, and other children in the family.
  - h. DCS will provide the referent with a Referral ID/intake number. Referral information/updates will be available from the DCS online tracking system using the Referral ID/intake number.
2. In addition to reporting to DCS, any CMCSS employee who suspects child abuse that is of a **severe physical** or **sexual nature** must report their suspicions directly to the SRO by telephone, if SRO not available the Level Director should be contacted, who will notify the Clarksville Police Department or Montgomery County Sheriff's Office as appropriate.
  3. If an allegation of abuse is made against a CMCSS Employee, volunteer, or contract vendor, suspicions should be reported to the Chief Human Resources Officer, or designee immediately after DCS referral has been made, who will notify law enforcement.
- 3.1.1 Only if the alleged abuse is made against a CMCSS employee, volunteer, or contractor, or if the abuse occurred on school grounds or while the child was under the supervision or care of the school, will the school administrator notify the parent/guardian of the student.
4. In accordance with state law, if the suspected abuse or neglect involves a current or previous employee or individual otherwise affiliated with the school, the reporter is required to report directly to DCS. DCS and law enforcement may be contacted prior to notifying the Child Abuse Coordinator in these situations. As noted in INS-P040, if the suspected abuse involves a current employee, the Chief Human Resources Officer/designee must be notified after reporting to DCS and law enforcement.

## CLARIFICATION OF INFORMATION

Employees should address questions regarding this information directly to the building principal or Child Abuse Coordinator for clarification. Principals or Child Abuse Coordinators should notify the District Lead School Counselors of any atypical situations involving DCS personnel that may require Central Office involvement.

## RELATED TRAINING INFORMATION

**PURPOSE:** To familiarize participants with the roles, responsibilities, and functions of both the Department of Children Services (DCS) and CMCSS regarding the reporting of suspected child abuse AND accommodating investigations into alleged child abuse.

**TRAINING FOLLOW UP PLAN:** Principals and Child Abuse Coordinators will familiarize ALL personnel assigned to their respective buildings/areas with basic procedures for reporting suspected abuse and accommodating DCS investigations.

**REFERENCES:** Tennessee Code Annotated §37-1-4-01, et. seq. and §37-1-102, §37-1-611, §37-1-612; DCS Administrative Policy 14.1 – 14.6; CMCSS Policies and Procedures for Reporting Suspected Child Abuse and Accommodating DCS Investigations

**INTRODUCTION:** Public school systems are considered local agencies with a duty to cooperate in child abuse investigations; therefore, any employee of the public school system must report suspected child abuse in accordance with state law and the district's related policies and procedures. DCS is the agency charged with conducting such investigations. As such, we share a common goal and must partner together to ensure the

protection and privacy of our children. We are not adversaries and must see ourselves as co-advocates in doing what is right for the children in Montgomery County. This is the law!

## 1. Child Abuse

### A. Definition of Child Abuse and Neglect

- 1) "Abuse" exists when a person under the age of 18 is suffering from, has sustained, or may be in immediate danger of suffering from or sustaining a wound, injury, disability or physical or mental condition caused by brutality, neglect or other actions or inactions of a parent, relative, guardian or caretaker.
- 2) "Dependent and neglected child" means a child: who is without parent, guardian or legal custodian; whose parent, guardian or person with whom the child lives, by reason of cruelty, mental incapacity, immorality, or depravity is unfit to properly care for such child; who is under unlawful or improper care, supervision, custody or restraint by any person, corporation, agency, association, institution, society or other organization or who is unlawfully kept out of school; whose parent, guardian, or custodian neglects or refuses to provide necessary medical, surgical, institutional, or hospital care for such child; who, because of lack of proper supervision, is found in any place the existence of which is in violation of law; who is in such condition of want or suffering or is under such improper guardianship or control as to injure or endanger the morals or health of such child or others; who is suffering from abuse or neglect; who has been in the care and control of one (1) or more agency or person not related to such child by blood or marriage for a continuous period of six (6) months or longer in the absences of a power of attorney or court order, and such person or agency has not initiated judicial proceedings seeking either legal custody or adoption of the child; who is or has been allowed, encouraged, or permitted to engage in prostitution or obscene or pornographic photographing, filming, posing, or similar activity and whose parent, guardian or other custodian neglects or refuses to protect such child from further such activity; or who is willfully been left in the sole financial care and sole physical care of a related caregiver for not less than eighteen (18) consecutive months by the child's parent, parents or legal custodian to the related caregiver, and the child will suffer substantial harm if removed from the continuous care of such relative.
- 3) "Severe child abuse" means: The knowing exposure of a child to or the knowing failure to protect a child from abuse or neglect that is likely to cause serious bodily injury or death and the knowing use of force on a child that is likely to cause serious bodily injury or death; Specific brutality, abuse or neglect towards a child that in the opinion of qualified experts has caused or will reasonably be expected to produce severe psychosis, severe neurotic disorder, severe depression, severe developmental delay or intellectual disability, or severe impairment of the child's ability to function adequately in the child's environment, and the knowing failure to protect a child from such conduct; the commission of an act toward the child prohibited by § 39-13-309, §§ 39-13-502 -- 39-13-504, § 39-13-515, §39-13-522, § 39-13-527, § 39-13-531, § 39-13-532, § 39-15-302, § 39-15-402, § 39-17-1004, § 39-17-1005, or the knowing failure to protect the child from the commission of such an act toward the child; Knowingly allowing a child to be present within a structure where the act of creating methamphetamine, as that substance is identified in §39-17-408(d)(2), is occurring; Knowingly or with gross negligence allowing a child under eight (8) years of age to ingest an illegal substance or a controlled substance that results in the child testing positive on a drug screen, except as legally prescribed to the child; or knowingly allowing a child to be within a structure where any of the following controlled substances are present and accessibly to the child: any schedule I controlled substances listed in §39-17-406, cocaine, methamphetamine, or fentanyl.
- 4) "Significant injury" means bodily injury, including a cut, abrasion, bruise, burn, or disfigurement, and physical pain or temporary illness or impairment of the function of a bodily member, organ, or mental faculty, involving: a substantial risk of death, protracted unconsciousness, extreme physical pain, protracted or obvious disfigurement; or protracted loss or substantial impairment of a function of a bodily member, organ, or mental faculty.
- 5) "Child sexual abuse" means one (1) or more of the following acts: any penetration, however slight, of the vagina or anal opening of one (1) person by the penis of another person, whether or not there is the emission of semen; any contact between the genitals or anal opening of one (1) person and the mouth or tongue of another person; any intrusion by one (1) person into the

genitals or anal opening of another person, including the use of any object for this purpose, except that it shall not include acts intended for a valid medical purpose; the intentional touching of the genitals or intimate parts, including the breasts, genital area, groin, inner thighs, and buttocks, or the clothing covering them, of either the child or the perpetrator, except it shall not include: (a) Acts that may reasonably be construed to be normal caretaker responsibilities, interactions with, or affection for a child; or (b) Acts intended for a valid medical purpose; the intentional exposure of the perpetrator's genitals in the presence of a child, or any sexual act intentionally perpetrated in the presence of a child, if such exposure or sexual act is for the purpose of sexual arousal or gratification, aggression, degradation, or other similar purpose; the sexual exploitation of a child, which includes allowing, encouraging, or forcing a child to: (a) solicit for or engage in prostitution; or (b) engage in an act prohibited by §39-17-1003; the commission of any act towards the child prohibited by §39-13-309; and for purposes of the reporting, investigation, and treatment provisions §§37-1-603—37-1-615 "child sexual abuse" also means the commission of any act specified in subdivisions (a)(3)(A)-(C) against a child thirteen (13) years of age through seventeen (17) years of age if such act is committed against the child by a parent, guardian, relative, person residing in the child's home, or other person responsible for the care and custody of the child.

- 6) "Institutional child sexual abuse" means situations of known or suspected child sexual abuse in which person allegedly perpetrating the child sexual abuse is an employee of a public or private child care agency, public or private school, or any other person responsible for the child's care.
- 7) "Mental injury" means an injury to the intellectual or psychological capacity of a child as evidenced by a discernible and substantial impairment in the child's ability to function within the child's normal range of performance and behavior, with due regard to the child's culture

B. DCS accepts a report of child maltreatment provided it meets these three criteria:

- 1) The report pertains to a child under the age of 18 years, and
- 2) The report alleges harm or imminent risk of harm to the child, and
- 3) The alleged perpetrator is:
  - a. A parent or caretaker, or
  - b. A relative or other person living in the home, or
  - c. An educator, volunteer or employee of a recreational/organizational setting who is responsible for the child; or any individual providing treatment, care or supervision for the child. (Note: you have a professional obligation to report suspected abuse. "If you think it. . . report it.")

C. Referral types:

Physical abuse	Medical neglect	Commercial sexual exploitation of a minor
Drug exposed child	Educational neglect	Psychological harm
Drug exposed child (severe)	Lack of supervision	Domestic violence
Environmental neglect	Abandonment	Child death
Nutritional neglect	Child sexual abuse	

D. DCS does not investigate allegations of minor injuries that are the result of developmentally appropriate discipline or allegations of physical abuse of children by strangers or persons who were not in a caretaking role unless the parent refuses to take necessary action to protect the child from future harm.

DCS accepts all referrals involving sexual abuse of children under the age of 13 years regardless of the previous relationship between the alleged victim and the alleged perpetrator. DCS may assist law enforcement or the district attorney's office in cases of sexual abuse allegations of a child 13-18 years old. DCS does not investigate sexual abuse allegations of a child 13 to 18 years old by an alleged perpetrator who does not have a relationship with the child as defined in B.3) above.

- E. Child abuse may lead to behavioral manifestations in the child victim. While most of the below listed behavioral indicators can have numerous explanations besides child abuse, they are important when they are linked to abuse allegations (see next page).

<b>Preadolescent</b>	<b>Adolescent</b>
1. Stylized behavior; excessive seductiveness	1. Stylized behavior; excessive provocativeness beyond norm for age
2. Unusual interest in sex organs of self or others	2. Shy, withdrawn, overburdened appearance
3. Fearful or suspicious of adults	3. Change in school grades
4. Tugging at clothing in genital area	4. Running away
5. Tired, lethargic, sleepy appearance	5. Self-destructive behavior
6. Regressive behaviors, such as whining, negative changes in toilet habits	6. Substance abuse that is more than experimental
7. Persistent fears or overwhelming nightmares	7. Unwillingness to participate in group activities
8. Blaming or dislike of self	8. Stealing; shoplifting
9. Change in school grades	9. Pregnancy wishes
10. Public or excessive masturbation	10. Prostitution
11. Developmental delays	11. Fear or distrust of men, adults
12. Perceived and/or treated by parent as bad, unusual, and/or different	12. Statements about being bad or undesirable
13. Behavioral extremes (e.g., extremely aggressive or passive, persistent crying)	13. Wary of/avoidance of physical contact
14. Child assumes parent role (i.e., caretaking of one or both parents and/or siblings beyond normal "role-playing" for child's age.	14. Child assumes parent role (i.e., caretaking of one or both parents and/or siblings beyond normal "role-playing" for child's age.
	15. Excessive longing for affection
	16. Reluctant to change clothes for gym

- F. Conversely, there are "normal" preadolescent and adolescent behaviors that in and of themselves that do not indicate great need for concern. These might include the following.

<b>Preadolescent</b>	<b>Adolescent</b>
1. Playing doctor.	1. Sexually explicit conversations, non-coercive, with similar age peers
2. Occasional masturbation	2. Sexual innuendo – flirting
3. Imitation – kissing and flirting	3. Hugging, kissing and holding hands
4. Genital conversations with similar age peers	4. Petting and fondling, non-coercive
5. Exploratory behaviors (Show me yours and I will show you mine) with similar age peers	5. Dirty words or jokes

Associated Documents: INS-A085 Reporting Suspected Child Abuse  
INS-A086 Accommodating DCS Investigations  
INS-P040 Reporting Suspected Child Abuse Procedure  
INS-P041 Accommodating DCS Investigations Procedure  
INS-F140 Department of Children's Services (DCS) Referral  
INS-G017 Training Guidelines for Accommodating DCS Investigations