



**411 Maltreatment of Minors Reporting and Review Policy**

Section	Initiated	Last Update	Last Review	Related Procedure/Form	Page
Program	November 2022		July 2024	N/A	1 of 5

**Purpose:**

To establish guidelines for the internal and external reporting and the internal review of maltreatment of minors.

**Scope:**

All Employees

**Policy:**

Staff who are mandated reporters must report externally all the information they know regarding an incident of known or suspected maltreatment of a child, in order to meet their reporting requirements under law. All ProAct staff who encounter maltreatment of a minor will take immediate action to ensure the safety of the child. Staff will define maltreatment as sexual abuse, physical abuse, or neglect and will refer to the definitions from MN Statutes, section 260E.03 at the end of this policy.

Any person may voluntarily report to the local welfare agency, agency responsible for assessing or investigating the report, police department, or the county sheriff if the person knows, has reason to believe, or suspects a child is being neglected or subjected to physical or sexual abuse. ProAct staff cannot shift the responsibility of reporting maltreatment to an internal staff person or position. In addition, if a staff knows or has reason to believe a child is being or has been neglected or physically or sexually abused within the preceding three years, the staff must immediately (within 24 hours) make a report to the local welfare agency, agency responsible for assessing or investigating the report, police department, or the county sheriff.

Staff will refer to the *Policy and Procedure on Reporting and Review of Maltreatment of Vulnerable Adults* regarding suspected or alleged maltreatment of individuals 18 years of age or older.

- Staff of ProAct who encounter maltreatment of a child, age 17 or younger, will take immediate action to ensure the safety of the child or children. If a staff knows or suspects that a child is in immediate danger, they will call “911.”

An individual mandated to report physical or sexual child abuse or neglect within a licensed facility will report the information to the agency responsible for licensing the facility. Reports concerning suspected maltreatment of children, or other violations of Minnesota Statutes or Rules, in facilities licensed by the Minnesota Department of Human Services, should be made to the Licensing Division’s Central Intake line at 651-431-6600.

- Incidents of suspected maltreatment of children occurring within a family, in the community, at a family childcare program, or in a child foster care home, should be reported to the local county social services agency or local law enforcement
- When verbally reporting the alleged maltreatment to the external agency, the mandated reporter will include as much information as known to identify the child involved, any persons responsible for the abuse or neglect (if known), and the nature and extent of the maltreatment.



- If the report of suspected abuse or neglect occurred within ProAct, the report should also include any actions taken by ProAct in response to the incident. If a staff attempts to report the suspected maltreatment internally, the person receiving the report will remind the staff of the requirement to report externally.
- When ProAct has knowledge that an external report of alleged or suspected maltreatment has been made, an internal review will be completed. The Program Director, or if not available, the Program Manager is the primary individual responsible for ensuring that internal reviews are completed for reports of maltreatment. If there are reasons to believe that the Program Director or the Program Manager is involved in the alleged or suspected maltreatment, the President is the secondary individual responsible for ensuring that internal reviews are completed.
- The *Internal Review* will be completed within 30 calendar days. The person completing it will:
  - Ensure an Incident and Emergency Report has been completed.
  - Contact the lead investigative agency if additional information has been gathered.
  - Coordinate any investigative efforts with the lead investigative agency by serving as the company contact, ensuring that staff cooperate, and that all records are available.
  - Complete an Internal Review which will include the following evaluations of whether:
    - Related policies and procedures were followed.
    - The policies and procedures were adequate.
    - There is a need for additional staff training.
    - The reported event is similar to past events with the children, or the services involved.
    - There is a need for corrective action by the license holder to protect the health and safety of the children in care.
- Based upon the results of the internal review, ProAct will develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by individuals or the company, if any.
- Internal reviews must be made accessible to the commissioner immediately upon the commissioner's request for internal reviews regarding maltreatment.
- Staff will receive training on this policy, MN Statutes, section 245A.66 and section 260E.03 and their responsibilities related to protecting children in care from maltreatment and reporting maltreatment. This training must be provided within 72 hours of first providing direct contact services and annually thereafter.

## **MINNESOTA STATUTES, SECTION 260E.03 DEFINITIONS**

### **Definitions.**

As used in this section, the following terms have the meanings given them unless the specific content indicates otherwise:

(c) "Substantial child endangerment" means a person responsible for a child's care, who by act or omission commits or attempts to commit an act against a child under their care that constitutes any of the following:

- (1) egregious harm as defined in section [260C.007, subdivision 14](#);
- (2) abandonment under section [260C.301, subdivision 2](#);

(3) neglect as defined in paragraph (f), clause (2), that substantially endangers the child's physical or mental health, including a growth delay, which may be referred to as failure to thrive, that has been diagnosed by a physician and is due to parental neglect;

(4) murder in the first, second, or third degree under section [609.185](#), [609.19](#), or [609.195](#);

(5) manslaughter in the first or second degree under section [609.20](#) or [609.205](#);

(6) assault in the first, second, or third degree under section [609.221](#), [609.222](#), or [609.223](#);

(7) solicitation, inducement, and promotion of prostitution under section [609.322](#);

(8) criminal sexual conduct under sections [609.342](#) to [609.3451](#);

(9) solicitation of children to engage in sexual conduct under section [609.352](#);

(10) malicious punishment or neglect or endangerment of a child under section [609.377](#) or [609.378](#);

(11) use of a minor in sexual performance under section [617.246](#); or

(12) parental behavior, status, or condition which mandates that the county attorney file a termination of parental rights petition under section [260C.301, subdivision 3](#), paragraph (a).

(d) "Sexual abuse" means the subjection of a child by a person responsible for the child's care, by a person who has a significant relationship to the child, as defined in section [609.341](#), or by a person in a position of authority, as defined in section [609.341](#), subdivision 10, to any act which constitutes a violation of section [609.342](#) (criminal sexual conduct in the first degree), [609.343](#) (criminal sexual conduct in the second degree), [609.344](#) (criminal sexual conduct in the third degree), [609.345](#) (criminal sexual conduct in the fourth degree), or [609.3451](#) (criminal sexual conduct in the fifth degree). Sexual abuse also includes any act which involves a minor which constitutes a violation of prostitution offenses under sections [609.321](#) to [609.324](#) or [617.246](#). Sexual abuse includes threatened sexual abuse.

(f) "Neglect" means the commission or omission of any of the acts specified under clauses (1) to (9), other than by accidental means:

(1) failure by a person responsible for a child's care to supply a child with necessary food, clothing, shelter, health, medical, or other care required for the child's physical or mental health when reasonably able to do so;

(2) failure to protect a child from conditions or actions that seriously endanger the child's physical or mental health when reasonably able to do so, including a growth delay, which may be referred to as a failure to thrive, that has been diagnosed by a physician and is due to parental neglect;

(3) failure to provide for necessary supervision or child care arrangements appropriate for a child after considering factors as the child's age, mental ability, physical condition, length of absence, or environment, when the child is unable to care for the child's own basic needs or safety, or the basic needs or safety of another child in their care;

(4) failure to ensure that the child is educated as defined in sections [120A.22](#) and [260C.163, subdivision 11](#), which does not include a parent's refusal to provide the parent's child with sympathomimetic medications, consistent with section [125A.091, subdivision 5](#);

(5) nothing in this section shall be construed to mean that a child is neglected solely because the child's parent, guardian, or other person responsible for the child's care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care; except that a parent, guardian, or caretaker, or a person mandated to report pursuant to subdivision 3, has a

duty to report if a lack of medical care may cause serious danger to the child's health. This section does not impose upon persons, not otherwise legally responsible for providing a child with necessary food, clothing, shelter, education, or medical care, a duty to provide that care;

(6) prenatal exposure to a controlled substance, as defined in section [253B.02](#), subdivision 2, used by the mother for a nonmedical purpose, as evidenced by withdrawal symptoms in the child at birth, results of a toxicology test performed on the mother at delivery or the child at birth, or medical effects or developmental delays during the child's first year of life that medically indicate prenatal exposure to a controlled substance;

(7) "medical neglect" as defined in section [260C.007, subdivision 6](#), clause (5);

(8) chronic and severe use of alcohol or a controlled substance by a parent or person responsible for the care of the child that adversely affects the child's basic needs and safety; or

(9) emotional harm from a pattern of behavior which contributes to impaired emotional functioning of the child which may be demonstrated by a substantial and observable effect in the child's behavior, emotional response, or cognition that is not within the normal range for the child's age and stage of development, with due regard to the child's culture.

(g) "Physical abuse" means any physical injury, mental injury, or threatened injury, inflicted by a person responsible for the child's care on a child other than by accidental means, or any physical or mental injury that cannot reasonably be explained by the child's history of injuries, or any aversive or deprivation procedures, or regulated interventions, that have not been authorized under section [121A.67](#) or [245.825](#).

Abuse does not include reasonable and moderate physical discipline of a child administered by a parent or legal guardian which does not result in an injury. Abuse does not include the use of reasonable force by a teacher, principal, or school employee as allowed by section [121A.582](#). Actions which are not reasonable and moderate include, but are not limited to, any of the following:

(1) throwing, kicking, burning, biting, or cutting a child;

(2) striking a child with a closed fist;

(3) shaking a child under age three;

(4) striking or other actions which result in any non-accidental injury to a child under 18 months of age;

(5) unreasonable interference with a child's breathing;

(6) threatening a child with a weapon, as defined in section [609.02, subdivision 6](#);

(7) striking a child under age one on the face or head;

(8) striking a child who is at least age one but under age four on the face or head, which results in an injury;

(9) purposely giving a child poison, alcohol, or dangerous, harmful, or controlled substances which were not prescribed for the child by a practitioner, in order to control or punish the child; or other substances that substantially affect the child's behavior, motor coordination, or judgment or that results in sickness or internal injury, or subjects the child to medical procedures that would be unnecessary if the child were not exposed to the substances;

(10) unreasonable physical confinement or restraint not permitted under section [609.379](#), including but not limited to tying, caging, or chaining; or



(11) in a school facility or school zone, an act by a person responsible for the child's care that is a violation under section [121A.58](#).

**The DHS Maltreatment of Minors Reporting Form is posted at each location and available upon request.**