

Mandated Reporting

| Larimer County Fort Collins/Loveland | Weld County Greeley & Longmont | Boulder County Longmont |
|---|---|---|
| Minors 970-498-6990 At-Risk Adults/Elders 970-498-7770 | Minors 844-264-5437 At-Risk Adults/Elders (970) 346-7676 Report Online | Minors 844-264-5437 At-Risk Adults/Elders (303) 441-1309 |

Therapists as Mandated Reporters

Licensed therapists have a legal and ethical duty to report suspected abuse, neglect and exploitation of protected populations. This includes minors, seniors, and individuals who are legally disabled.

Discussions of mandatory reporting typically focus on abuse and neglect rather than exploitation, although exploitation in the context of reporting usually involves one or both.

Reportable Information: Neglect

Failure to provide food, clothing, shelter, medical care, or supervision to the degree that health, safety, and well being are threatened with harm.

Emotional neglect

A pattern of behavior that impairs a child's emotional development or sense of self worth; may include constant criticism, threats or rejection, as well as withholding love, support, or guidance.

Examples of Emotional Neglect

1. Inadequate nurturing: Ignoring the child's need for affection and support.
2. Exposure to domestic violence
3. Permitting drug or alcohol use
4. Isolation: Denying contact with people outside the home

Physical Neglect

Failure to provide for a child's basic survival needs, such as nutrition, clothing, shelter, hygiene, and medical care; may also involve inadequate supervision and other forms of reckless disregard for the child's safety and welfare.

Medical Neglect

Failure to tend to the healthcare needs of a child, including physical, dental and mental health care. Refusal by a parent or caregiver to facilitate a child's attendance at therapy appointments may constitute medical neglect.

Examples of Physical Neglect

1. Abandonment: Deserting the child.
2. Expulsion: Refusing custody, throwing the child out of the home.
3. Shuttling: Leaving the child with others for long periods.
4. Nutritional: Not providing food, so the child is malnourished or hungry.
5. Clothing: Allowing inappropriate dress for the weather.
6. Other: Inadequate hygiene, reckless behavior, such as driving while intoxicated.

Reportable Information: Abuse

The mistreatment of another, includes physical, emotional, and sexual abuse. May occur within the context of human trafficking.

Sexual Abuse

Sexual behavior by one person upon another which may include but is not limited to penetration, fondling, incest, indecent exposure, sexual assault, exploitation through prostitution or production of pornographic material, exposure to pornographic material, and cyber-sex behaviors.

Physical Abuse

Any non accidental physical injury, ranging from minor bruises to severe fractures or death, as a result of punching, beating, kicking, biting, shaking, throwing, stabbing, choking, hitting, with a hand, stick, strap, or other object, burning, or otherwise harming a child. These injuries are considered abuse regardless of whether the responsible individual intended

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to hurt the child. Physical discipline, such as spanking or paddling, is not considered abuse as long as it is reasonable and causes no bodily injury to the child.

Sex Trafficking

Includes child abuse, neglect and sexual abuse. A person who knowingly sells, recruits, harbors, transports, transfers, isolates, entices, provides, receives, obtains by any means, maintains, or makes available a minor for the purpose of commercial sexual activity commits human trafficking of a minor for sexual servitude. Children under the age of 18 CANNOT consent to commercial sex acts.

Labor Trafficking

Colorado law defines labor trafficking as “involuntary servitude of a minor.”

Reportable Information: Exploitation

Exploitation refers to the illegal or improper use of a vulnerable individual’s income, resources or efforts for another’s profit or gain. Examples include but are not limited to unauthorized withdrawal of funds from an individual’s account, human trafficking, exchanging gifts for sex, and coerced labor.

Protected Populations: Minors

17 is the age of consent. Details below highlight the parameters for consenting to sexual relationships.

- ❖ Individuals age 15 and 16 are able to lawfully engage in sexual behavior with partners who are less than 10 years older than they are. (Ex: Teen age 15 can consent to sexual relationship with a 24 year old, but not a 25 year old.)
- ❖ 13 can
- ❖ Minors under 15 are lawfully able to engage in sexual acts with those who are less than four years older. (13 year old can consent to sexual relationship with a 17 year old.)

Protected Populations: Elders & At-Risk Adults

In Colorado, individuals age 70 and older have protected status.

At-risk adults are those age 18+ who are unable to provide or obtain services necessary for their health, safety, and welfare or who lack the capacity to make or understand responsible decisions.

Conditions that increase risk for both elders and at-risk adults include dementia, “physical and mental frailty,” developmental disabilities, brain injury, behavioral disorders, and mental health disorders.

Reportable Disclosures

Reportable information for elders and at-risk adults is essentially the same as it is for minors, except it is put into the context of the nuances specific to these populations.

Mistreatment

Physical, emotional and sexual abuse, caretaker neglect, exploitation and other harmful acts committed by another person against an elder or at-risk adult. Exploitation includes financial abuse. Caretaker neglect includes denial of medical and dental care which may involve controlling medications in a way that is harmful to the individual’s health.

Self-Neglect

An elder or at-risk adult substantially endangers their health, safety, and/or welfare because they are not meeting their essential human needs.

Reporting: Minors

Report “immediately upon receiving” information. The law is silent regarding the exact definition of *immediate*. (Ex: Do therapists end session when a disclosure is made in order to make a report?)

FPCC Policy

Make the report before the end of the day. If the disclosure was made late in the day, the report should be filed by noon the following day. If there is a possibility the report will not be filed within 24 hours, the therapist must inform leadership so the report may be delegated to another individual to be filed.

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Reporting: Elders and At-Risk Adults

Within 24 hours of disclosure

Follow Up: Incident Report

- ❖ Use the incident report form to document the reportable information and the report, then upload the incident report to the chart. Reference the report and the reportable disclosure in the session note, if applicable.
- ❖ Information should be concrete and directly relevant to the reportable information. Keep content factual, focusing on the disclosure or observation that led to the report and avoid statements of judgment or opinion. It can help to structure your documentation in the form of a timeline, writing your note in the order that events occurred.
- ❖ Consult with FPCC leadership for support or consultation if needed.

General Information

- ❖ If an individual is in **imminent danger**, filing a report is not appropriate. Call 911 or crisis response.
- ❖ It is not the therapist's job to prove abuse, neglect or exploitation. Therapists are only required to report suspicions. The job of investigating is left to authorities.
- ❖ Reports are made to the county department, local law enforcement, or the state reporting hotline (844-264-5437). The hotline will route reporters back to the county, so if possible, the county contact numbers have been provided.
- ❖ **Always note the reference number and any information provided regarding next steps to include in the incident report (not given with every report, but it's recommended to ask if there is any information you can have about next steps).**
- ❖ Anonymous reporting is allowed, but it will not prove you fulfilled your obligation as a mandated reporter (neither will sharing the reportable information with someone else in order to delegate it, however if it's necessary to delegate to leadership, we will all have a vested interest in getting the report filed).
- ❖ Child Protective Services does not disclose names of reporters to family members, however reporters can be called to testify. Reports made to law enforcement are not confidential (for example if you call 911 or the non-emergency/sheriff's number or file a criminal report online through the county).
- ❖ If possible and appropriate, involve the client in making the report as it can promote empowerment. Answer questions about the reporting process, normalize fears, and share information about DHS, including that their intention is to keep people safe. **Do not make promises or speculate about outcomes.**
- ❖ If you suspect making a report will increase the risk of danger for your client, create a safety plan with the client. If it is suspected a report will endanger another individual who cannot participate in safety planning, consult with leadership.
Ex: An abusive parent is aware of a report, which could lead to violence. The therapist could create a plan with the other parent to stay in a safe place until authorities are involved. Or, a plan could be developed with an older teen to increase safety until authorities have intervened. If it is suspected a report will endanger someone else who cannot participate in safety planning, consult with leadership.

Further Information

[DHS Colorado](#)

[Child Abuse/Neglect Definitions](#)

[Seniors](#)

[At-Risk Adults](#)