Notice of Requirements as a Mandatory Reporter of Child Abuse

Definitions

**Minor/Child** – A person under 18 years of age.

**Child Abuse**

- **Physical Abuse** – Acts or omissions that cause, or fail to prevent, a serious physical injury to a child.
- **Sexual Abuse** - Includes, but is not limited to, rape, sexual assault, molestation, incest, indecent exposure, or otherwise exploiting a child in a manner in which the child is used for gratification or sexual enjoyment by another person.
- **Emotional or Mental Abuse** - Acts or omissions that have an actual or likely severe negative impact on a child’s emotional and behavioral development, including those resulting from persistent or severe emotional mistreatment.
- **Neglect** - A severe or persistent failure to provide for a child’s physical, emotional, or basic needs.

Scope

1. **ALL university employees** are Mandated Reports of Child Abuse per Bloomsburg University of Pennsylvania’s policy PRP 2412 effective December 23, 2014.
2. **All employees** includes all individuals who are employed by or perform services (independent contractors and volunteers) for the University.
3. **Programs include:**
   - University or Non-University sponsored programs on campus; and
   - Programs under the direction of the University at off-campus locations; and
   - Programs and activities limited to daily activities or those that involve the housing of minors.
Reporting Child Abuse

1. All mandated reporters shall call 911 for an in progress child assault.

2. All mandated reporters shall make an immediate report of suspected child abuse to the Department of Human Services (DHS) Childline by calling 1-800-932-0313.
   - See attached Bloomsburg University of Pennsylvania policy PRP 2412 for specific guidance.
   - Contact Jerry Reed, Director of Human Resources, at 570-389-4040 or Kristina Wood, Assistant Director of Human Resources at 570-389-4414 with questions.

3. Immediately following the report to DHS the mandated reporter must notify the Officer in Charge at Bloomsburg University Police Department in person or by calling 570-389-4168. The Director of University Police and the Director of Human Resources will assume responsibility for facilitating the university’s cooperation with the investigation of the report.

4. After an oral report is made to DHS, a written report shall also be made within 48 hours to DHS or to the Columbia County Children and Youth Agency.

Other

- Intimidation or retaliation for having reported child abuse is prohibited.
  - Please contact Jerry Reed at 570-389-4040 or Kristina Wood at 570-389-4414 with any concerns.

- University mandated reporters who willfully fail to report suspected child abuse may be subject to disciplinary action, up to and including dismissal from employment. Mandated reporters may also be subject to criminal prosecution pursuant to the Child Protective Services Law, 23 Pa.C.S. §6319, for willfully failing to report suspected child abuse.

- Employees and volunteers are required to provide written notice to the employer if:
  - Arrested for or convicted of a reportable offense listed in Bloomsburg University of Pennsylvania’s policy PRP 2410 (attached); or
  - Named as a perpetrator in a founded or indicated report of child abuse.

- The employee or volunteer shall provide such written notice within 72 hours of arrest or conviction.
Receipt of Notice of Requirements as a Mandatory Reporter of Child Abuse

I understand that I am a Mandated Reporter of Child Abuse per Bloomsburg University of Pennsylvania’s policy PRP 2412. I have received a copy of this policy and acknowledge my responsibility as a Mandatory Reporter of Child Abuse. I further acknowledge that I am responsible to self-report through a written report to Bloomsburg University of Pennsylvania if I am arrested for or convicted of a reportable offense listed in Bloomsburg University of Pennsylvania’s policy PRP 2410 or if named as a perpetrator in a founded or indicated report of child abuse. I further acknowledge that I have also received Bloomsburg University of Pennsylvania’s policies PRP 2410 and consent to these terms and conditions.

__________________________________________  ______________________________________
SIGNATURE & DATE                     PRINT NAME

__________________________________________
E-MAIL ADDRESS

__________________________________________
TELEPHONE NUMBER

APPLICANT FOR:  FACULTY  STAFF  STUDENT EMPLOYMENT  VOLUNTEER  DEPARTMENT: ________