



STATE OF RHODE ISLAND
Department of Children, Youth & Families

STRENGTHENING FAMILIES: A GUIDE FOR MANDATED REPORTERS AS SUPPORTERS

FIRST EDITION



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The Department of Children, Youth and Families (DCYF) has designed this manual to help Mandated Reporters understand:

- The legal responsibility to report suspected child abuse and neglect to the DCYF Child Abuse Hotline.
- How to report suspected abuse and/or neglect to the hotline.
- The difference between poverty and neglect.
- How to reach our warm line or the Support and Response Unit and support a family when a concern does not rise to the level of abuse and/or neglect.
- Implicit and explicit biases and how they impact children and families.
- Key terminology and phrases used during the hotline screening and investigation process.
- The information you have the right to receive as opposed to what will remain confidential.
- What do you do if your report is not screened in and you disagree with that determination?
- The process that occurs after a hotline call is made.
- Disproportionality in our child welfare system and what you can do to help us address it.
- The goals and priorities of our system and how you can help!

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LEGAL DISCLAIMER

This manual is provided as a public service by the Rhode Island Department of Children, Youth and Families. It is intended for the informational use and convenience of interested persons and should not be considered a substitute for the advice of legal counsel. Although the information found in this manual is believed to be reliable as of the time of this manual's publication, no warranty, expressed or implied, is made regarding the accuracy, completeness, or legality of any information, either isolated or in the aggregate. The information is provided "as is". Changes may be periodically made to the information contained herein; these changes may or may not be incorporated into this manual, and information contained in the manual may quickly become outdated. Therefore, we encourage you to consult an attorney of your choice for legal advice and the most recent versions and interpretations of the applicable law. Further, if you find any errors or omissions, we encourage you to report them to the DCYF Office of the Director by email at DCYF.DirOfficeInq@dcyf.ri.gov.

KEY TERMINOLOGY

Abused or Neglected Child, as defined in R.I. Gen. Laws § [40-11-2](#) means a child whose physical or mental health or welfare is harmed or threatened with harm when his or her parent or other person responsible for his or her welfare:

- Inflicts, or allows to be inflicted, upon the child physical or mental injury, including excessive corporal punishment; or
- Creates, or allows to be created, a substantial risk of physical or mental injury to the child, including excessive corporal punishment; or
- Commits, or allows to be committed, against the child an act of sexual abuse; or
- Fails to supply the child with adequate food, clothing, shelter, or medical care, though financially able to do so or offered financial or other reasonable means to do so; or
- Fails to provide the child with a minimum degree of care or proper supervision or guardianship because of his or her unwillingness or inability to do so by situations or conditions such as, but not limited to: social problems, mental incompetency, or the use of a drug, drugs, or alcohol to the extent that the parent or other person responsible for the child's welfare loses his or her ability or is unwilling to properly care for the child; or
- Abandons or deserts the child; or
- Sexually exploits the child in that the person allows, permits, or encourages the child to engage in prostitution as defined by the provisions in § [11-34.1-1](#) et seq., entitled "Commercial Sexual Activity"; or
- Sexually exploits the child in that the person allows, permits, encourages, or engages in the obscene or pornographic photographing, filming, or depiction of the child in a setting that, taken as a whole, suggests to the average person that the child is about to engage in, or has engaged in any sexual act, or that depicts any such child under eighteen (18) years of age performing sodomy, oral copulation, sexual intercourse, masturbation, or bestiality; or
- Commits, or allows to be committed, any sexual offense against the child as sexual offenses are defined by the provisions of chapter 37 of title 11, entitled "Sexual Assault," as amended; or
- Commits, or allows to be committed, against any child an act involving sexual penetration or sexual contact if the child is under fifteen (15) years of age; or if the child is fifteen (15) years or older, and (1) Force or coercion is used by the perpetrator, or (2) The perpetrator knows, or has reason to know, that the victim is a severely impaired person as defined by the provisions of § [11-5-11](#), or physically helpless as defined by the provisions of § [11-37-1](#) (6).

Adoption and Safe Families Act (ASFA) means the act that focuses on improving the safety and permanency of children in foster care. It mandates that if a child has been in foster care for 15 of the past 22 months, states must generally seek to terminate parental rights unless there are strong reasons not to. The law also incentivizes states to increase adoptions from foster care. It emphasizes the need to make reasonable efforts to reunify children with their families if it does not compromise their safety. Overall, ASFA aims to expedite permanency while ensuring child welfare services are effective and accountable.

Child or children or young adult means anyone under the age of 18. However, those over 18 who still receive services from the Department, or who are identified as emotionally disturbed or as having functional developmental disabilities, will also be considered "children (young adult)" under this policy.

Child Abuse Hotline means a toll-free phone number available 24/7 for reporting suspected child abuse or neglect. In Rhode Island, it's 1-800-RI-CHILD (1-800-742-4453).

Child Abuse Prevention and Treatment Act (CAPTA) means a law passed by the U.S. government to help protect children from abuse and neglect. It provides guidelines and funding to states to create programs and services that prevent child abuse and support children who have been harmed. CAPTA also sets rules for how child abuse cases should be reported and handled to ensure children get the help they need.

Child Protective Investigator means an employee of the department charged with responsibility for investigating complaints and referrals of child abuse and neglect and institutional child abuse and neglect.

Children’s Advocacy Center (CAC) means a community-based organization that is a member of the Rhode Island chapter of children advocacy centers and an accredited member (or working toward accreditation) of the National Children’s Alliance.

Conflation means the mixing up of two different things as if they are the same. For example, treating poverty (not having enough money) as if it were the same as neglect (not taking care of someone properly).

Community Services and Behavioral Health Division (CSBH) means the division within the Rhode Island Department of Children, Youth, and Families (DCYF) that focuses on providing a range of support services to children, youth, and families. This division is responsible for overseeing and delivering community-based services and behavioral health support aimed at promoting mental health, emotional well-being, and overall functioning. Its services typically include mental health counseling, substance use treatment, family support, and other interventions designed to help individuals navigate and improve their personal and family circumstances. RIGL §41-72-5.2 – DCYF: Development of a Continuum of Children’s Behavioral Health Programs

Department means Department of Children, Youth and Families.

DCYF Call Floor means the call center operated by the Rhode Island Department of Children, Youth, and Families (DCYF). This Call Floor serves as a centralized point for receiving and managing calls related to child welfare, including reports of child abuse or neglect, inquiries about services, and other related matters. The Call Floor is crucial for ensuring that concerns are promptly addressed and that appropriate responses are initiated to protect the well-being of children and families in Rhode Island.

Division of Family Services (DFS) means a division within DCYF that works with families to provide support services and ensure child safety.

Educational Program means any public or private school, including boarding schools, or any home-schooling program.

Ex Parte Petition means a court petition filed by one party without the presence of the other party, usually to seek immediate action, like removing a child from their home.

Explicit Bias means conscious and deliberate prejudices or preferences that affect how people think and act.

Family Care Community Partnerships (FCCPs) mean the Department of Children, Youth and Families’ primary prevention resource for the state. FCCPs partner with families and communities to raise healthy children in a safe, caring environment. [Click here for more information.](#)

Healthcare Provider means any provider of healthcare services involved in the delivery or care of infants or care of children.

Implicit Bias means unconscious attitudes or stereotypes that influence behavior and judgments without a person’s awareness.

Indicated Finding means there is sufficient credible evidence to support an allegation of child abuse or neglect, following an investigation by CPS. An Indicated Finding suggests that abuse or neglect has occurred, which may lead to interventions or services for the affected child and family.

Institution means any private or public hospital or other facility providing medical or psychiatric diagnosis, treatment, and care.

Institutional Child Abuse and Neglect means situations of known or suspected child abuse or neglect where the person allegedly responsible for the abuse or neglect is a foster parent or the employee of a public or private residential childcare institution or agency; or any staff person providing out-of-home care or situations where the suspected abuse or neglect occurs as a result of the institution's practices, policies, or conditions.

Law Enforcement Agency means the police department in any city or town or the state police.

Mental Injury includes a state of substantially diminished psychological or intellectual functioning in relation to, but not limited to, such factors as: failure to thrive; ability to think or reason; control of aggressive or self-destructive impulses; acting-out or misbehavior, including incorrigibility, ungovernability, or habitual truancy; provided, however, that the injury must be clearly attributable to the unwillingness or inability of the parent or other person responsible for the child's welfare to exercise a minimum degree of care toward the child.

Neglect means when someone fails to take care of another person's basic needs, like providing enough food, safety, or medical care.

Person Responsible for Child's Welfare means the child's parent; guardian; any individual, eighteen (18) years of age or older, who resides in the home of a parent or guardian and has unsupervised access to a child; foster parent; an employee of a public or private residential home or facility; or any staff person providing out-of-home care (out-of-home care means child day care to include family day care, group day care, and center-based day care). Provided, further, that an individual, eighteen (18) years of age or older, who resides in the home of a parent or guardian and has unsupervised access to the child, shall not have the right to consent to the removal and examination of the child for the purposes of § 40-11-6.

Physician means any licensed Doctor of Medicine, licensed osteopathic physician, and any physician, intern, or resident of an institution.

Poverty means when people don't have enough money to pay for basic needs like food, clothes, or a place to live.

Probable Cause means facts and circumstances based upon as accurate and reliable information as possible that would justify a reasonable person to suspect that a child is abused or neglected. The facts and circumstances may include evidence of an injury, or injuries, and the statements of a person worthy of belief, even if there is no present evidence of injury.

Reasonable Cause means a good reason or enough evidence to believe something is true. For example, seeing signs of abuse might give a reasonable cause to report it.

Rhode Island Children's Information System (RICHIST) means a system that keeps track of reports and investigations related to child abuse and neglect in Rhode Island.

Standard of Proof means that, in order to substantiate a claim of child abuse or neglect, the evidence must show that it is more likely than not that the abuse or neglect occurred. This standard is lower than "beyond a reasonable doubt," which is required in criminal cases, reflecting the need for a balance between protecting children and respecting the rights of families.

Stigmatization means treating someone badly because of a stereotype or negative label. This makes their situation worse and unfairly judges them.

Systemic Bias means unfair treatment that happens because of problems within the system or structure of an organization, leading to unequal experiences for different groups of people.

Unfounded Report means a report of suspected abuse or neglect that, after investigation, does not meet the criteria for substantiation and is therefore dismissed.

INTRODUCTION

Keeping children safe is a top priority in Rhode Island. The state's ability to intervene in families to protect children is granted by law, with both legislation and case law setting the limits of state intervention. State law (RIGL § 40-11-3) mandates that all individuals report known or suspected cases of child abuse or neglect to the Department within 24 hours of awareness. Reports come from various sources, including the public, courts, hospitals, police departments, parents, and relatives.

Mandated reporting laws, established under the Child Abuse Prevention and Treatment Act (CAPTA) in 1974, require states to implement child abuse reporting procedures. While these laws aim to protect children, they have also created a system focused on surveillance, with penalties for non-compliance. Many professionals are concerned about liability for failing to report, which can lead to overreporting.

This manual was prepared to address these concerns by providing clear guidance on the reporting process. It helps mandated reporters better understand their responsibilities while reducing confusion, overreporting, and underreporting. By offering clarity on legal requirements, definitions, and DCYF's authority, this manual aims to support accurate reporting and ensure child protection efforts are both effective and appropriate.



DIFFICULTIES IN REPORTING CHILD ABUSE AND NEGLECT

The Department of Children, Youth, and Families (DCYF) is the state agency responsible for investigating child maltreatment and providing necessary services to children and families when credible evidence of abuse or neglect is found, as mandated by Rhode Island General Law (RIGL § 40-11-3). In federal fiscal year 2023, approximately 80% of DCYF's abuse or neglect investigations originated from reports made by mandated professionals.

Nationwide reports of abuse and neglect have risen sharply. In federal fiscal year 2023, 39% of the 6,409 Rhode Island cases investigated for child maltreatment were substantiated. Despite the increase in reports, many serious cases remain unreported. Meanwhile, many Hotline calls are not accepted for investigation or deemed unfounded after review.

Several factors contribute to the inconsistencies in reporting:

Underreporting	Overreporting
Belief that reporting “doesn’t do any good”: Reporters may feel discouraged if past reports were not accepted or had no clear outcome.	Fear of failing to report: Mandated reporters may report minor incidents out of concern for a child’s safety or fear of consequences for not reporting.
Denial of child maltreatment: Some reporters may not recognize or accept the possibility of abuse or neglect.	Erring on the side of caution: Reporters may submit reports for incidents that do not meet the criteria for abuse or neglect to ensure compliance.
“Gray areas” in legal definitions: Vague laws create confusion about what constitutes abuse or neglect, causing hesitation in reporting.	Lack of understanding of DCYF jurisdiction: Reporters may submit reports for situations beyond DCYF’s legal authority, leading to unnecessary cases.
Lack of clarity in what must be reported: The flexibility in interpreting laws can result in some cases not being reported.	Cultural misunderstandings: Reporters may confuse culturally different parenting practices with abuse, leading to overreporting.

When mandated reporters make good faith efforts, and their reports are either not accepted by the DCYF Hotline or are not indicated upon investigation, reporters can feel frustrated and distrustful. Yet, due to the limitations of its legal jurisdiction, DCYF cannot accept some cases. Careful screening of reports by Hotline staff using an evidence-based Structured Decision-Making Tool®, is essential. Investigations of suspected abuse or neglect can be, necessarily, very intrusive for families. The State must exercise its delegated authority cautiously and appropriately to respect the rights of families.

The guiding principle used is “minimally acceptable parenting standards.” The State has the authority to intervene in family life when basic standards of care and protection from harm are not met. Not only the law, but the courts constrain DCYF intervention. It is important to remember that many decisions about child protection are made in conjunction with the court. In Rhode Island, the Family Court determines if there is sufficient evidence to adjudicate a child abused or neglected under the law. The court also determines if children will be removed from their homes and placed in foster care. In making its decisions, the Family Court must have a preponderance of evidence that abuse, or neglect has occurred.

Before diving into the content of this manual, we’ve included a pre-test to gauge your current understanding of key concepts related to child abuse, neglect, and the responsibilities of mandated reporters. The questions focus on recognizing indicators of abuse, the legal duties of reporters, and the role of personal biases in decision-making.





PRE-TEST

1. Possible indicators of physical abuse include:
 - a. Unexplained marks on the body
 - b. Bruises or welts in various stages of healing
 - c. Burns that are in patterns
 - d. All of the above
2. Possible indicators of neglect may include:
 - a. Unkempt appearance, dirty or ill-fitting clothes, and/or body odor
 - b. Extreme hunger or stealing food
 - c. Emotional detachment, persistent untreated health issues, or children being left for extended periods of time
 - d. All of the above
3. Which of the following may be an indicator of sexual abuse?
 - a. Sexual knowledge beyond what is age appropriate
 - b. Recurring pain and itching in the genitals
 - c. Wearing or sleeping with multiple layers of clothing
 - d. All of the above
4. A Mandated Reporter is any person required by law to report suspected child abuse or neglect.
 - a. True
 - b. False
5. Which of the following are Mandated Reporters?
 - a. Teachers and principals
 - b. Social workers
 - c. Rhode Island Citizens
 - d. All of the above
6. What is the role of a Mandated Reporter?
 - a. To conduct an in-depth interview of the child
 - b. To conduct your own investigation of abuse and then call the Child Abuse Hotline
 - c. Report suspicions of abuse or neglect to the Hotline immediately
 - d. All of the above
7. Rhode Island law requires all Mandated Reporters to call the Hotline if they have reasonable cause to believe that child abuse or neglect has occurred.
 - a. True
 - b. False
8. A Mandated Reporter should ask the child for every detail of the abuse or neglect before calling the Hotline.
 - a. True
 - b. False
9. A child must tell you he or she is being abused before you can call the Hotline.
 - a. True
 - b. False
10. Suspected child abuse and neglect should be reported:
 - a. As soon as you have enough evidence to make sure the child is telling the truth
 - b. As soon as you suspect abuse or neglect
 - c. After the child's parents have been notified
 - d. After 24 hours

11. Professional Mandated Reporters fulfill their legal obligation by telling their supervisors about their suspicions of abuse.
 - a. True
 - b. False
12. People know all their own biases; they just know they cannot or should not say those beliefs aloud, so they hide them.
 - a. True
 - b. False
13. Which of the following is an unbiased strategy?
 - a. Taking a neutral perspective.
 - b. Trying to look at the situation objectively, based on the facts of the case.
 - c. Understanding the context of the current situation.
 - d. Improving decisions by asking a colleague for input.
 - e. Using a trauma-informed lens to try to understand the family's perspective.
 - f. All of the above
14. Only negative biases can have negative outcomes.
 - a. True
 - b. False
15. Which of the following is a step to resolving bias?
 - a. Thinking before you speak
 - b. Remembering to have an open mind
 - c. Acknowledging our own biases
 - d. All of the above
16. It is possible to know all of your biases.
 - a. True
 - b. False
17. Informed decision-making relies on the facts of the situation. Understanding our bias allows us to process the situation without preconceived notions, assumptions, and expectations.
 - a. True
 - b. False

PRE-TEST ANSWER KEY

- Possible indicators of physical abuse include:
 - Unexplained marks on the body
 - Bruises or welts in various stages of healing
 - Burns that are in patterns
 - All of the above
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- Which of the following may be an indicator of sexual abuse?
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- a. True
 - b. False



CONFLATION OF POVERTY AND NEGLECT

Conflating poverty with neglect in child welfare systems means mistaking financial hardship for neglectful behavior. This confusion is problematic for several reasons:

- **Misidentifying the Problem:** Poverty can limit a family's access to resources, but it doesn't mean parents are neglecting their children. When the two are confused, families struggling financially may be wrongly seen as neglectful, leading to unnecessary interventions.
- **Unfair Consequences:** Families facing poverty can be unfairly judged and penalized for conditions beyond their control. This could lead to inappropriate actions like removing children from their homes, which doesn't address the real issue—lack of resources.
- **Stigmatization:** Labeling families in poverty as neglectful adds to the stigma they already face, making their situation harder and damaging their dignity.
- **Misuse of Resources:** Instead of providing needed support, resources may be spent on punitive actions when what families really need is practical help, such as housing, food, or healthcare.
- **Family Disruption:** Unnecessary separation of children from their families can cause trauma. Keeping families together and offering the right support is often more helpful.
- **Ineffective Solutions:** Treating poverty like neglect leads to ineffective solutions. Addressing the root cause of poverty ensures better outcomes for children and families.

While economic hardship can threaten family stability, the child welfare system isn't designed to solve poverty. Our role is to connect families with services that provide the support they need, without turning to investigative measures. This is where being a mandated supporter is critical. When in doubt, call 1-888-RI-FAMILY.

In short, conflating poverty with neglect results in misidentification, unfair treatment, stigma, misused resources, family disruption, and ineffective solutions. It's essential for Rhode Island's child welfare system to distinguish between the two, so families can receive the right kind of support. This manual will provide guidance on supporting families facing poverty without resorting to investigations.



IMPACT AND TRAUMA OF CHILD PROTECTION INVESTIGATIONS

Getting it right is crucial. While we are all required to report suspected child abuse or neglect, balancing this responsibility with sensitivity is key. It's essential to know when to report and when to offer **support**, as this helps minimize the trauma families face during an investigation. Our role is to act with both diligence and compassion.

Overreporting cases that don't require government intervention can overwhelm the system with unfounded reports, diverting resources from cases with genuine safety risks. In Rhode Island, 64% of investigations are unsubstantiated, meaning families endure invasive scrutiny and potential trauma from the threat of separation, even when no real risk is present.

Because broad reporting requirements encourage professionals to call in anything they find suspicious, even though not everything that may draw suspicion is indicative of maltreatment, mandated reporting often places unnecessary scrutiny on safe, healthy, and functional families.¹

¹ Shellady, *supra* note 30, at 1619 n. 3; Mical Raz, *Unintended Consequences of Expanded Mandatory Reporting Laws*, 139 *Pediatrics* 1, 2 (2017).

IMPACT OF MANDATED REPORTING ON FAMILIES OF COLOR

Across the nation, families of color—especially African American and American Indian/Alaska Native (AI/AN) families—are disproportionately represented in child welfare systems. These families often face poorer outcomes, including a higher likelihood of having their children removed from the home, reduced access to family preservation services, and, for African American children, longer stays in foster care.²

The mandate to report child maltreatment, combined with increased public awareness of child abuse and neglect, has profoundly affected our child welfare system. While mandated reporters play a crucial role in identifying and addressing issues, many assume that a call to the child protection hotline will lead directly to effective support services. Such calls often trigger a series of intrusive and costly actions, such as child protection investigations, rather than connecting families with the support they need. Additionally, broad, and inconsistent reporting practices, coupled with systemic bias, disproportionately impact families of color, who are already overrepresented in both poverty and child abuse reports. This has led to widely disparate experiences and a system that is often punitive and inefficient in its approach to serving families.³

² [Wayback Machine \(archive.org\)](#)

³ Weiner, Anderson, and Thomas, Chapin Hall Policy Brief, *System Transformation to Support Child and Family Well-Being: The Central Role of Economic & Concrete Supports*, (July 2021).

IMPLICIT AND EXPLICIT BIAS IN REPORTING CHILD ABUSE

Understanding the real-world implications of bias in reporting child abuse is critical, as both implicit and explicit biases can greatly impact how cases are handled, potentially endangering children's safety.

Types of Bias

- **Implicit Bias:** This refers to when people have hidden preferences or stereotypes that they are not aware of. For example, a teacher might not notice signs of abuse in a wealthy family because they mistakenly believe that abuse only happens in poorer families. This can lead to serious problems if actual abuse goes unnoticed. Implicit bias can also cause someone to misunderstand normal cultural practices, thinking they are signs of neglect or abuse when they are not.
 - **Noticing Abuse:**
 - **Overlooking Signs:** Hidden biases may cause people to downplay or ignore abuse in certain groups, such as wealthier families.⁴
 - **Misinterpreting Symptoms:** Stereotypes about certain groups can lead to misjudgments about signs of abuse.⁵
 - **Making Decisions:**
 - **Reluctance to Report:** Biases may cause hesitation to report abuse due to assumptions about the family involved.⁶
 - **Assessing Risk:** Implicit biases can influence how seriously a case is viewed and the perceived risk to the child.⁷
- **Explicit Bias:** This occurs when people have clear, conscious prejudices. For instance, if someone has a strong bias against a certain racial or ethnic group, they might unfairly focus on cases involving that group. This can lead to unfair treatment of families and can make it harder for them to get the help they need.

These biases can have profound effects. If abuse is ignored because of bias, children might stay in dangerous situations. On the other hand, if bias causes too many reports to be made about certain groups, families might be unfairly disrupted. This can also damage trust in the child protection system, making it harder for families to get support when they need it.

- **Prejudiced Attitudes:**
 - **Bias Against Certain Groups:** Conscious prejudice toward specific racial or social groups can unfairly affect case handling.⁸
 - **Judging Cultural Practices:** Explicit bias can result in unjust assessments of a family's behavior based on cultural differences.⁹

⁴ [American Psychological Association](#). *Implicit Bias in Child Welfare*.

⁵ [Harvard University Project Implicit](#). *Understanding Implicit Bias*.

^{6,9} [Child Welfare Information Gateway](#). *Bias in Reporting Child Abuse*.

⁷ [National Center for State Courts](#). *The Role of Bias in Child Welfare*.

⁸ [American Psychological Association](#)

- **Reporting and Handling Cases:**

- **Inconsistent Reporting:** Biases can lead to some cases being reported more often due to prejudiced views of the families involved.¹⁰
- **Judging Severity:** Personal biases can affect how seriously someone perceives a case.¹¹

Understanding our own biases is really important for anyone who needs to report child abuse or neglect. Biases are hidden feelings or preferences that can affect how we see things without realizing it. If we don't recognize our biases, they might influence how we report a situation, which could be unfair to the child.

To start, think about your beliefs and experiences. These can shape how you see situations and make you interpret things differently. Awareness of these biases helps us understand how they might affect our judgment. Talking with friends, peers, colleagues, or supervisors can also give us a fresh perspective and help us see any biases we might not notice on our own.

Learning about different cultures and backgrounds is essential. It helps us avoid misunderstandings based on cultural differences. Being mindful of our thoughts and feelings can help us manage our biases and make more objective decisions. By recognizing and working on our biases, we can ensure that reports of child abuse or neglect are fairer and more accurate, helping to protect children in the best way possible.



¹⁰ National Association of Social Workers. *Addressing Bias in Social Work Practice*.

¹¹ Harvard Law Review. *Bias and Its Impact on Child Abuse Cases*.

SUPPORT AND RESPONSE UNIT (SRU)

The Support and Response Unit (SRU) at DCYF is designed to better connect families and their children to support services. DCYF recognizes that many families struggle sometimes and could benefit from accessing services and supports that were traditionally only available to families with formal DCYF or Rhode Island Family Court involvement.

The SRU assists by identifying each family's needs and providing the necessary support to help families thrive. The unit, which is located within DCYF's Division of Family Services (DFS), helps families navigate services in their own communities. It is also a resource for families who are feeling overwhelmed or who need assistance with accessing home—and community-based services for a variety of needs.

SRU staff can offer:

- Assessments for families using established screening and assessment tools.
- Short-term, home- and community-based services for families and children who need support.
- Assistance for families when their older youth are exhibiting wayward or disobedient behavior.
- Local resources to better support families whose children have behavioral health needs.

Rhode Island families are encouraged to call the SRU by dialing **1-888-RI-FAMILY (1-888-743-2659)**.



DCYF CHILD ABUSE HOTLINE

The Department's Child Abuse Hotline is a statewide, toll-free service available 24/7 to receive reports of child abuse and neglect (CA/N). The dedicated phone number is **1-800-RI-CHILD (1-800-742-4453)**, and all calls are recorded. You may choose to report anonymously.

All reports are electronically logged and stored in a central registry for a minimum of three years.

If a person has been reported for child abuse or neglect but is found not to have committed abuse or neglect, their record related to that incident will be expunged after three years.

Reports made to the Hotline that do not meet the criteria for a CPS investigation are also expunged after three years. For more details, refer to the Department's policies on CPS investigations ([DOP: 500.0005](#)) and Family Assessment Response ([DOP: 500.0015](#)).

All reports of abuse or neglect must be submitted through the Hotline, whether they involve new cases or families currently or previously active with the Department. Any report received by Department staff outside of the Hotline, whether in person or in writing, must be immediately forwarded to the Hotline for proper processing.

MANDATED REPORTERS

All Rhode Islanders are mandated reporters by law (RI Gen. Laws §§ [40-11-3](#); [40-11-6](#)). All reports made by mandated reporters are kept confidential, and anonymous reporting is also allowed. However, knowingly and willfully filing a false report is a misdemeanor punishable by fines or imprisonment (§ [40-11-3.2](#)).

This means that any person who has reasonable cause to know or suspect that any child has been abused or neglected as defined in § [40-11-2](#) or has been a victim of sexual abuse by another child must report the information to the DCYF Child Abuse Hotline within 24 hours. In addition, any person who has reasonable cause to suspect the sexual abuse of a child in an educational program addressed in § [40-11-3.3](#) must report the information to the DCYF Child Abuse Hotline within 24 hours.

All Rhode Islanders are mandated reporters by law (RI Gen. Laws §§ [40-11-3](#); [40-11-6](#)). This means that any person with reasonable cause to suspect that a child has been abused, neglected, or is a victim of sexual abuse must report the information to the DCYF Child Abuse Hotline within 24 hours. Additionally, any allegations of sexual abuse, harassment, or voyeuristic behavior by a Department provider, vendor, contractor, volunteer, or staff member toward a child must be reported to the CPS Hotline within the same 24-hour timeframe and will be investigated by a Child Protective Investigator (CPI). If the alleged abuse involves an employee, agent, contractor, or volunteer from an educational program, this must also be reported to the Hotline.

DCYF defines a professionally mandated reporter as:

- **Law Enforcement Personnel**, including any: law enforcement officer; field personnel of the Department of Juvenile Justice; field personnel of the Department of Corrections; probation officer.
- **Medical Personnel**, including any physician licensed to practice medicine in any of its branches (medical doctor or doctor of osteopathy); resident; intern; medical administrator or personnel engaged in the examination, care, and treatment of persons; psychiatrist; surgeon; dentist; dental hygienist; chiropractic physician; pediatric physician; physician assistant; emergency medical technician; acupuncturist; registered nurse; licensed practical nurse; advanced practice registered nurse; genetic counselor; respiratory care practitioner; home health aide or certified nursing assistant.
- **Social Service and Mental Health Personnel**, including any licensed professional counselor, licensed clinical professional counselor, licensed social worker, licensed clinical social worker, licensed psychologist, or assistant working under direct supervision of a psychologist; associate licensed marriage and family therapist; licensed marriage and family therapist; field personnel of the Public Health, Human Services, Human Rights, or Children and Family Services
- **Education Personnel**, including any: school personnel (including administrators and certified and non-certified school employees); personnel of institutions of higher education; educational advocate assigned to a child.
- **Childcare Personnel**, including any early intervention provider as defined in the Early Intervention Services System Act; director or staff assistant of a nursery school or a child day care center; or foster parent or childcare worker.

The **DCYF Child Abuse Hotline** operates 24/7 and is staffed by highly trained Child Protective Investigators who handle and assess reports. The Rhode Island Children's Information System (RICHIST) records and tracks all reports, offering immediate access to previous case information and monitoring current investigations. Reports may be made in person, by mail, email, or online; all are referred to the Call Floor for intake processing.

All reports are recorded and maintained in RICHIST for at least three years by law. If a report does not lead to a finding of abuse or neglect, the individual's record will be expunged three years after the case is closed. Reports that do not meet investigation criteria are similarly expunged after three years.

All reports to the CPS Hotline are screened using a validated tool to determine the appropriate Department response. Reports can result in:

- An investigation,
- A family assessment response, or
- A regulatory response.

If a report does not meet the criteria for a Department response, it is screened out, with documentation of any action taken. If no action is necessary, the report is simply documented as screened out.



MANDATED REPORTERS' RESPONSIBILITIES

As a mandated reporter in Rhode Island, you have important duties to help keep children safe from abuse and neglect. Here's what you need to do:

- **Report Signs of Abuse or Neglect**

Report signs that a child might be harmed or not taken care of properly. Some signs to look for include:

- **Injuries:** Unexplained bruises, burns, or broken bones.
- **Neglect:** Not enough food, poor hygiene, or dirty clothes.
- **Emotional Issues:** Extreme mood changes, fearfulness, or acting very withdrawn.
- **Behavior Problems:** Acting out, being very aggressive, or missing school a lot.

- **Report What You See**

If you think a child might be abused or neglected, report it right away:

- **Call the DCYF Child Abuse Hotline:** Report your concerns by calling 1-800-RI-CHILD (1-800-742-4453). This hotline is available 24 hours a day, 7 days a week.

- **When you report, give as many details as you can:**

If you think a child might be abused or neglected, report it right away:

- **What Happened:** Describe the abuse or neglect.
- **Child's Information:** Include the child's name, age, and address.
- **Family Information, if available:** Provide names and contact details for the parents or caregivers.

- **Keep It Private**

Keep the details of your report confidential:

- **Don't Talk About It:** Only share information with people who need to know.
- **Legal Protections:** If you report in good faith, you're protected by law and won't get into trouble even if the report turns out not to be true (RI Gen. Law § [40-11-4](#)).

- **Work with Investigators**

After you make a report, you might need to:

- **Provide More Info:** Answer any questions or give extra details if asked by DCYF or the police.



MAKING A REPORT

DCYF has a statewide toll-free DCYF Child Abuse Hotline that operates twenty-four (24) hours per day, seven (7) days per week. This telephone line is dedicated to receiving reports concerning child abuse and neglect. The number is **1-800-RI-CHILD (1-800-742-4453)**. All calls are recorded. You may call anonymously.

Who will receive a report on the child abuse hotline?

A DCYF Child Protective Investigator (CPI) will answer the phone. Some helpful hints to remember when reporting abuse and neglect:

- The most helpful and accurate reports are recent and made by the person who witnessed the suspected abuse or neglect.
- Specific and concrete information is needed most:
 - What did you see?
 - What did you hear said?
 - How was the child harmed or put at risk?
- If you are not making the report anonymously, be prepared to share some identifying information. For example, you might be asked your name, your job, where you live, your relationship with the child, and whether there were additional witnesses.
- Please be aware the CPI cannot determine at the time of your report which CPI will be assigned to the case if it is investigated. But if you leave your name and phone number, you will be contacted once the field investigator has been assigned.
- All calls to the Hotline are recorded.

What will be asked when making a report?

When you make a report, you will be asked:

- If you need an interpreter.
- What is the incident you would like to report and when did it happen?
- Were there any other witnesses to the incident being reported?
- Questions about the child:
 - What is the child's name?
 - Does the child have any siblings?
 - How old is the child?
 - How old are any other children involved in the report?
 - What is the child's current location?
 - Where does the child go to school?
 - What time is school dismissed?
 - What is the address of the child's family?
 - What is their contact information?
 - What is the child's mother's name?
- What adults are living in the home?
- Are there any known safety threats in the home like violent individuals, animals, or weapons?

WHAT HAPPENS WHEN DCYF RECEIVES A REPORT?

The DCYF Call Floor and Investigative staff must respond appropriately to each report or allegation of child abuse or neglect. The Department utilizes a standardized screening tool for each report to determine if the report or allegation meets the criteria for an investigation (refer to [DOP: 500.0005 Child Abuse and Neglect Definitions](#)), and if so, the child abuse and neglect report is screened in and assigned a response priority level of 1, 2, or 3.

Response priorities are determined by information received in the child abuse or neglect report and are based on harm or risk of harm to the child. The time limit for the Call Floor to process the report and the time limit for initiating the investigation varies depending on the priority response assigned to the report or allegation of child abuse or neglect. If there is any uncertainty about response priority, the more urgent priority is utilized.

If a call comes in reporting that a child is in immediate danger and immediate police assistance is required, the Call Floor worker:

- Instructs the caller to notify the police and, after terminating the call, the Call Floor worker also notifies the police; or
- Puts the caller on hold and notifies the police or
- Places a three-party call with the police and the reporter.
- The Call Floor supervisor follows up with law enforcement to ensure the child's immediate safety.

The Call Floor worker uses a standardized screening tool to determine the response priority for each screened-in report of child abuse or neglect. They also search RICHIST for any prior agency involvement. The assigned response priority sets the timeframes for processing the Child Protective Services (CPS) report and initiating the investigation.

Child Protective Investigators (CPI) make every effort to respond to each assigned investigation as quickly as possible. However, response priorities allow the CPIs and/or supervisor to triage assignments within the response priority categories when a subsequent report is assigned, requiring a timelier response. All assigned investigations must commence within the designated response priority timeframe:

- **Priority 1 Response**—The Call Floor worker immediately notifies the Call Floor Supervisor. The supervisor reviews the report and forwards it to the Investigative Unit within 30 minutes after the call is terminated. The case is assigned to a Child Protective Investigator, and the CPI responds to the report within two hours of creating the investigative protocol.
- **Priority 2 Response**—The Call Floor worker must process the CPS report within two hours after completing the call. The case is assigned to a Child Protective Investigator (CPI), who responds to the report within twelve (12) hours of the creation of the investigative protocol.
- **Priority 3 Response**—The Call Floor worker must process the CPS report within four hours after completing the call. The case is assigned to a Child Protective Investigator (CPI), who responds to the report within 48 hours of the creation of the investigative protocol.

The response priorities reflect the level of harm or risk of harm to the child:

- Priority 1 response criteria include:
 - Child in imminent danger of physical harm.
 - Child abandoned and in imminent danger.
 - Child unsupervised and in imminent danger.

- Family may flee, or the child may disappear.
- Child at a hospital for examination/parents present and awaiting questioning.
- Child fatality or near fatality due to alleged child abuse or neglect/other children in the family.
- Child held by police/physician/nurse practitioner on a 48-hour hold for Department placement.
- Other circumstances of the case constitute an emergency.
- Priority 2 response criteria include:
 - Alleged abuse or neglect in which the child is not in imminent danger, but other risk factors are present.
 - Child abandoned but not in imminent danger.
 - Child unsupervised but not in imminent danger.
 - Child hospitalized on a 72-hour hold.
- Priority 3 response criteria are used for all other reports with minimal risk of harm to the child.

While specific reports mandate the response priority to be used, other reports are less detailed and require a certain level of training, judgment, and expertise on the part of the worker/supervisor. Certain factors specific to the case situation, when applied to the allegations, may more clearly define risk to the child, including:

- The child's age.
- Physical and mental condition.
- The mental and physical condition of the caretaker(s).
- The mental and physical condition and/or location of the alleged perpetrator(s).
- Any history of prior incidents/harm to the child.
- The need for medical attention for the child.
- The nature and condition of the physical environment (safety/health).

The Call Floor supervisor, the investigative supervisor, and/or the assigned CPI may review the data and decide to change the response priority:

- For good cause, a response priority can be upgraded anytime.
- A response priority cannot be downgraded without prior administrative approval.
- Any change in response priority must be indicated in a Case Activity Note. If downgraded, the approving administrator must document this change in a Case Activity Note.

If a child or children are left unattended and an emergency Priority 1 response is required, the Call Floor worker asks local police to respond. If the police find a caretaker present and appropriate:

- The Call Floor worker contacts and receives the return call from the police notes directly on the CPS report, including the reported information and the name of the officer who responded.
- If there are no other allegations, the case is not assigned as an investigation.

Investigative Unit functions include:

- The investigative assignment supervisor reviews the completed CPS report.
- The referral is assigned to a CPI within the guidelines of the specific response priority.
- An investigation is initiated within the specified response priority time frames.

WHAT MODEL DOES DCYF USE WHEN INVESTIGATING A REPORT?

DCYF CPS uses the Safety Assessment through Family Engagement (SAFE) Model to evaluate and address the safety and well-being of children in their families' homes. The model emphasizes involving families in the assessment and decision-making processes to create safer environments for children while respecting family dynamics and strengths.

The SAFE Model involves:

- **Family Engagement:** The SAFE Model prioritizes involving family members in the safety assessment process. This means working directly with parents and caregivers to understand their perspectives, address their concerns, and collaborate on creating safety plans.
- **Comprehensive Safety Assessment:** The model thoroughly assesses the child's safety by considering immediate and long-term risks. It evaluates the family's ability to provide a safe environment and identifies potential threats to the child's well-being.
- **Strengths and Needs:** The SAFE Model focuses on identifying the family's strengths, resources, and needs. This balanced approach helps develop solutions that leverage the family's existing support systems while addressing areas that need improvement.
- **Safety Planning:** Based on the assessment, safety plans are developed with input from the family. These plans outline steps the family will take to ensure the child's safety and may include services or interventions to support the family in creating a safe home environment.
- **Ongoing Collaboration:** The model encourages continuous engagement with the family throughout the process. This ongoing collaboration helps monitor progress, adjust safety plans as needed, and provide additional support as needed.
- **Evidence-Based Practice:** The SAFE Model uses evidence-based practices and tools to guide assessments and interventions. This ensures that the approaches used are supported by research and effective in improving child safety.

The SAFE Model aims to create a more supportive and collaborative environment for families, leading to better outcomes for children and strengthening family dynamics. By involving families directly and focusing on their strengths, the model helps to address safety concerns while promoting family well-being.





DCYF STANDARD OF PROOF

The Standard of Proof to indicate a Child Abuse or Neglect report is a “preponderance of the evidence.” This is defined as evidence that is of greater weight or more convincing than the evidence in opposition to it; that is, evidence that, as a whole, shows that the fact sought to be proved is more probable than not.

The Child Protective Investigator (CPI) must continually weigh the reliability and importance of each piece of information received during the investigative process. If a case is screened in for investigation, the DCYF procedure requires the assigned Child Protective Investigator (CPI) to contact the reporter. They will follow up with the reporter to confirm the information provided to the hotline. Please note that an investigation will not be terminated solely because an allegation’s source is unavailable or recants.

This includes assessing the credibility of the statements of individuals interviewed during the investigation. To assess credibility, the CPI considers the following:

- Opportunity for the witness to have seen, heard, or known what he/she is telling the CPI.
- Logic, accuracy, and consistency in reporting the witness and responses of the witness when confronted with any discrepancies.
- Behavior, manner, and style of the interaction of the witness, e.g., the witness was/was not nervous; the witness did/did not answer questions directly.
- Ability to corroborate the witness’s statements with other evidence (this does not preclude indicating a report based on the statement of one witness if the CPI believes the witness).
- Potential bias or hostility of the witness towards the CPI or the family being investigated.
- The competency level of witnesses is needed to understand the truth and have the ability to express what was observed, especially with young children, accurately.
- Competency of a child witness need not be the sole factor in whether a case is indicated or unfounded.
- Alleged victim, perpetrator, or witness on an individualized basis and not solely by the individual’s status, such as status as resident or staff in an investigation of institutional abuse.

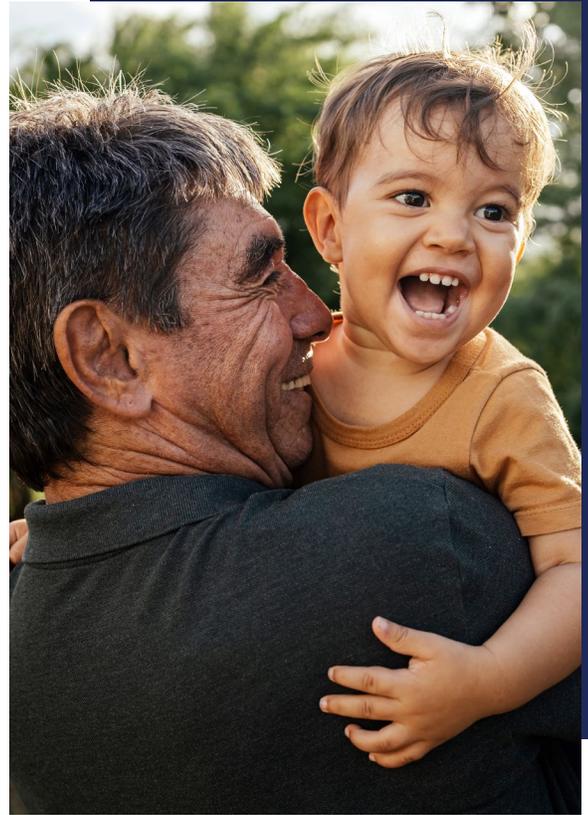
Documenting the evidence gathered is an essential part of the investigation. The CPI accurately complies with [DOP 500.0065: Documenting the Results of Child Protective Investigations in RICHIST](#) and [DOP 500.0075, Investigative Reports and Record Keeping](#).

- If an allegation is indicated, the CPI documents how the evidence was weighed to determine whether the allegations are more likely true than not.
- CPI documents his/her assessment of the credibility of witnesses.
- If relying on a qualified expert to base a decision, the CPI documents the level of expertise and weight placed on the qualified expert’s testimony.

The Standard of Proof for Filing an Ex Parte Petition for Custody is evidence that a child suffered or is likely to suffer abuse or neglect and that there exists a substantial risk that continued care and custody by the parent/person responsible for the child’s care may result in further harm to the child.

Standard of Proof for a Probable Cause Hearing is defined as reasonable grounds to suspect that a child has been abused or neglected based on reliable facts and circumstances.

- If a child has been removed from the home by an Ex Parte Detention Order, the parent's counsel may request a Probable Cause Hearing at the arraignment. Within 10 days of the request, a hearing is held before the Family Court. At this hearing, the Department of Children, Youth, and Families (hereinafter the Department) must show cause for the removal and for continuing to keep the child out of the home pending a trial on the merits.
- Credible hearsay is permitted at the discretion of the Court.
- Several types of evidence may be introduced to meet the standard of proof, including:
 - Reports from physicians or police.
 - Alleged elements of abuse and/or neglect.
 - Prior reports of abuse and/or neglect unless irrelevant because of the passage of time or judgment of the Court.
 - Account of interviews conducted with the parent(s), child(ren), or others involved in the investigation.
 - CPI's observations.
 - Account of the Department's attempts, if possible, to maintain the child in the home.



Standard of Proof for Trial (Dependency/Abuse/Neglect Petition or Termination of Parental Rights Petition) is "clear and convincing" evidence. This means evidence that indicates that the thing to be proved is highly probable or reasonably certain. This is a greater burden than the preponderance of the evidence but less than evidence beyond a reasonable doubt.

1. The CPI and/or primary worker relies on certain documents and/or tangible evidence to prepare for his/her testimony and/or actual courtroom use, including:
 - a. Body Charts - outlining the injury.
 - b. Color Photographs - depicting injury to the child and/or home environment.
 - c. X-rays - showing current or pattern of previous injury.
 - d. Medical Records are maintained by hospitals, treatment physicians, school doctors, public health nurses, and other qualified medical professionals.
 - e. Miscellaneous Records - mental health evaluations, school records, prior child abuse/neglect reports.
 - f. Child Protective Services (CPS) Investigation documents/forms.
2. The above evidence (1, a-f) must qualify as "business records" before their use at a trial:
 - a. Made in the regular course of business of the hospital/agency.
 - b. It was the regular course of business to make such a record/document.
 - c. Entries/documents made at or near the time of transaction/event.
 - d. The above (2, a-c) have been certified by the agency head/designee to be true.

WHAT HAPPENS AFTER AN INVESTIGATION?

If DCYF finds that a child has been abused or neglected but it's not necessary to remove the child from their home, they might keep the child at home and offer support to the family. They can also ask the Family Court to order treatments for the family and child.

If the abuse or neglect is very serious and could harm the child, DCYF has to go to court to have the child removed from the home. They might also ask the court to remove the person suspected of abuse. DCYF must inform the parent or guardian about the court action, what might happen, and the parent's rights.

CPIs assigned to the Call Floor do not disclose to the reporter whether a case is screened in or out. Their role is to gather information from the reporter and ask any necessary questions to understand the situation fully. The CPI then uses the Structured Decision Making (SDM) tool, which helps guide whether the case should be screened in for investigation or screened out. After the CPI makes this determination, the case is sent to the Call Floor Supervisor for final approval.

When DCYF decides that services are needed to address abuse, neglect, or family issues, the family might get involved with the **Division of Family Services (DFS)** at DCYF. Often, these families are also involved with **Rhode Island Family Court** for related issues. DFS also works with families dealing with juvenile justice matters in Family Court.

Once a family is assigned to a DFS worker, they are officially "open to DFS." The worker will contact the family to start assessing the issues that led them to DCYF. This includes learning about the family's history and current services like medical, mental health, or educational help. Parents may need to sign a release form to allow the worker to talk to service providers.

If needed, DFS might ask for specialized evaluations to better understand the family's needs and find the right services. Children and youth with DFS might be living with parents, a guardian, a relative, a foster parent, or in a care facility. DFS helps families access services to keep children safe at home or to safely return them to their home. If that isn't possible, DFS looks for alternative options like adoption or legal guardianship.

DFS works with families, the Department, and community partners to set goals and find appropriate services and support. They assess child safety in any living situation, help maintain connections to family, school, and community, and ensure that permanency is achieved promptly, following the [Adoption and Safe Families Act](#).

Many needed services are available through [The Division of Community Services & Behavioral Health \(CSBH\) | RI Department of Children, Youth & Families](#). CSBH develops care for children's behavioral health needs, supports children in family settings, and aims to prevent hospitalization. They work with community providers and other organizations to create a comprehensive care system that keeps children safe and supports families.

The DCYF Office of Educational and Constituent Support Services (Education Team) provides support to our Divisions of Child Protective Services, Family Support, CSBH, and Youth Development to improve educational outcomes for children and youth experiencing foster care. Through collaborative relationships with the school districts throughout Rhode Island, the Education Team is able to find opportunities on the case and systems level to help children and youth experiencing foster care succeed educationally. The Education Team Administrator also serves as DCYF ADA/Section 504/Civil Rights Coordinator as it relates to client related issues.

DCYF also provides support to children and families who are not involved with the department through the [Family Care Community Partnerships program \(FCCP\)](#) and other home-based services.

POST-TEST

1. Possible indicators of physical abuse include:
 - a. Unexplained marks on the body
 - b. Bruises or welts in various stages of healing
 - c. Burns that are in patterns
 - d. All of the above
2. Possible indicators of neglect may include:
 - a. Unkempt appearance, dirty or ill-fitting clothes, and/or body odor
 - b. Extreme hunger or stealing food
 - c. Emotional detachment, persistent untreated health issues, or children being left for extended periods of time
 - d. All of the above
3. Which of the following may be an indicator of sexual abuse?
 - a. Sexual knowledge beyond what is age appropriate
 - b. Recurring pain and itching in the genitals
 - c. Wearing or sleeping with multiple layers of clothing
 - d. All of the above
4. A Mandated Reporter is any person required by law to report suspected child abuse or neglect.
 - a. True
 - b. False
5. Which of the following are Mandated Reporters?
 - a. Teachers and principals
 - b. Social workers
 - c. Rhode Island Citizens
 - d. All of the above
6. What is the role of a Mandated Reporter?
 - a. To conduct an in-depth interview of the child
 - b. To conduct your own investigation of abuse and then call the Child Abuse Hotline
 - c. Report suspicions of abuse or neglect to the Hotline immediately
 - d. All of the above
7. Rhode Island law requires all Mandated Reporters to call the Hotline if they have reasonable cause to believe that child abuse or neglect has occurred.
 - a. True
 - b. False
8. A Mandated Reporter should ask the child for every detail of the abuse or neglect before calling the Hotline.
 - a. True
 - b. False
9. A child must tell you he or she is being abused before you can call the Hotline.
 - a. True
 - b. False
10. Suspected child abuse and neglect should be reported:
 - a. As soon as you have enough evidence to make sure the child is telling the truth
 - b. As soon as you suspect abuse or neglect
 - c. After the child's parents have been notified
 - d. After 24 hours

11. Professional Mandated Reporters fulfill their legal obligation by telling their supervisors about their suspicions of abuse.
 - a. True
 - b. False
12. People know all their own biases; they just know they cannot or should not say those beliefs aloud, so they hide them.
 - a. True
 - b. False
13. Which of the following is an unbiased strategy?
 - a. Taking a neutral perspective.
 - b. Trying to look at the situation objectively, based on the facts of the case.
 - c. Understanding the context of the current situation.
 - d. Improving decisions by asking a colleague for input.
 - e. Using a trauma-informed lens to try to understand the family's perspective.
 - f. All of the above
14. Only negative biases can have negative outcomes.
 - a. True
 - b. False
15. Which of the following is a step to resolving bias?
 - a. Thinking before you speak
 - b. Remembering to have an open mind
 - c. Acknowledging our own biases
 - d. All of the above
16. It is possible to know all of your biases.
 - a. True
 - b. False
17. Informed decision-making relies on the facts of the situation. Understanding our bias allows us to process the situation without preconceived notions, assumptions, and expectations.
 - a. True
 - b. False



POST-TEST ANSWER KEY

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STATE OF RHODE ISLAND
Department of Children, Youth & Families

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1-800-RI-CHILD (Hotline)
1-888-RI-FAMILY (Warm Line)