CODES/REFERENCES
O.C.G.A. §19-7-5 Reporting of Child Abuse and Neglect
O.C.G.A. §49-5-12 License and Inspection of Child Welfare Agencies; Standards; Penalties
O.C.G.A. §49-5-41 (a) (5) Persons and Agencies Permitted to Access Records
Title IV-E of the Social Security Act Section 471(a) (9)

REQUIREMENTS
The Division of Family and Children Services (DFCS) County Departments shall inform mandated reporters of their obligation to report known or suspected instances of child abuse and neglect including reports of physical or mental injury, sexual abuse or exploitation or negligent treatment or maltreatment of a child under circumstances that indicate that the child’s health or welfare is threatened.

DFCS shall report to the CPS Intake Communication Center (CICC) known or suspected instances of child abuse and neglect including reports of physical or mental injury, sexual abuse or exploitation or negligent treatment or maltreatment of children receiving aid under Titles IV-B or IV-E, including children in the custody of DFCS.

DFCS State Office and County Departments shall ensure that mandated reporter training is provided annually for mandated reporters.

DFCS County Departments shall provide medical personnel training opportunities regarding their obligation to report to the CICC:
1. Infants born-alive suspected of medical neglect under circumstances that indicate that the child’s health or welfare is threatened; and
2. Infants identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder.

DFCS shall provide notification in the form of the mandated reporter letter via mail, email, or fax to the mandated reporter within 24 hours of the disposition of the Intake Report.

1. This notification will also include the process for the reporter to obtain the findings on reports assigned as an investigation upon request.
2. If the mandated reporter is school personnel, notification will include that they will be provided the findings of a report assigned as an investigation within five calendars of the completion of the investigation.
DFCS shall immediately inform a mandated reporter of their legal obligation to report child abuse or neglect, upon becoming aware of a mandated reporter failing to report known or suspected child abuse and/or neglect.

**PROCEDURES**

DFCS will provide opportunities for educating mandated reporters annually on their legal obligation to report known or suspected child abuse and/or neglect. DFCS staff will provide mandated reporters with the following resources:

1. Locations of web based training for all mandated reporters;
2. **Specific training opportunities for medical personnel** concerning:
   a. Infants born-alive suspected of medical neglect under circumstances that indicate that the child’s health or welfare is threatened; and
   b. Infants identified as being affected by illegal substance abuse or withdrawal symptoms resulting from prenatal drug exposure or a Fetal Alcohol Spectrum Disorder.
3. Referrals to DFCS Education and Training resources on mandated reporter training;
4. Mandated reporter duties and responsibilities to report suspected child abuse and neglect as outlined in **O.C.G.A. §19-7-5, Reporting Child Abuse and Neglect**;

**NOTE:** County Departments may provide mandated reporter training in coordination with the Education and Training Section.

When engaging mandated reporters during the Intake Assessment, **DFCS will provide the following information:**

1. A reporter is immune from any civil or criminal liability when a report is made in good faith; *(See Practice Guidance)*;
2. Reporter information will be kept confidential; however, the case record may be subpoenaed as a result of court proceedings and the reporter cannot be assured confidentiality will be fully protected;
   **NOTE:** If asked or compelled in court to name a reporter, the SAAG/DFCS staff will request that the reporter’s identity be disclosed in the judge’s chambers.
3. If court action is initiated to protect a child, it may be necessary for the reporter to appear in court;
4. The ability to make an anonymous report. If the reporter is unwilling to divulge his/her name, the Intake Case Manager will continue with the intake report.
5. Intake reports that contain an allegation of abuse or neglect will be sent to local law enforcement.
6. The necessity to gather information concerning the six family functioning areas.
7. For reports assigned as an investigation, whether the mandated reporter would like to obtain the findings of substantiated or unsubstantiated verbally or in writing of any report assigned as an investigation;
   **NOTE:** The ICM shall document in Georgia SHINES if the mandated reported requests the findings of the investigation.
8. If school personnel, the findings of substantiated or unsubstantiated on any report assigned as an investigation will be provided within five calendar days of the conclusion of the investigation.

Upon approval of the Intake Assessment, **DFCS will provide** the mandated reporter letter to the mandated reporter within 24 hours of the receipt of the intake report via mail, email or fax. The
letter will include the following information:

1. Notification of the receipt of the intake report and a listing of potential dispositions;
2. Notification of the mandated reporters’ ability to request the findings of substantiated or unsubstantiated if the case is assigned as an investigation;
3. Notification to school personnel that the findings of substantiated or unsubstantiated on any report assigned as an investigation will be provided within five calendar days of the conclusion of the investigation.

When a mandated reporter fails to make a report of known or suspected child abuse or neglect, the County Director or Designee will immediately:

1. Contact the reporter by telephone and inform them of their responsibility as a mandated reporter to report known or suspected instances of child abuse or neglect per O.C.G.A. §19-7-5, Reporting Child Abuse and Neglect and the penalty for not reporting. Inform them that persons who knowingly and willfully fail to report shall be guilty of a misdemeanor.
2. If repeated violations occur, notify the District Attorney.
3. Mail the reporter a copy of O.C.G.A. §19-7-5, Reporting Child Abuse and Neglect to the mandated reporter.

NOTE: An employee or volunteer who makes a report to the person designated to make reports to DFCS shall be deemed to have fully complied with O.C.G.A. §19-7-5. Under no circumstances shall the person designated to make reports exercise any control, restraint, modification or make a change to the information provided by the reporter, although the reporter may be consulted prior to the designated person making the report and may provide additional, relevant, and necessary information when making a report.

**PRACTICE GUIDANCE**

**Mandated Reporters in Georgia**

Mandated reporters, in many instances, have long standing relationships and a unique perspective on the children and family for which they are reporting maltreatment. Information based on this perspective is therefore vital to intake decision-making process. Mandated Reporters per O.C.G.A. §19-7-5 Reporting Child Abuse and Neglect are:

1. Physicians licensed to practice medicine, interns, residents;
2. Hospital or medical personnel;
3. Dentists;
4. Licensed psychologists and persons participating in internships to obtain licensing to Chapter 39 of Title 43;
5. Podiatrists;
6. Registered professional nurses or licensed practical nurses licensed to Chapter 24 of Title 43 or nurse’s aides;
7. Professional counselors, social workers, or marriage and family therapists licensed to Chapter 10A of Title 43;
8. School teachers;
9. School administrators;
10. School guidance counselors, visiting teachers, school social workers, or school psychologists certified pursuant to Chapter 2 of Title 20;
11. Child welfare agency personnel, as that agency is defined pursuant to O.C.G.A. §49-5-12;
12. Child counseling personnel;
13. Child service organization personnel;
14. Law enforcement personnel;
15. Reproductive healthcare facility or pregnancy resource center personnel and volunteers;
16. Persons that are employees or volunteers at a hospital, school, social agency, or similar facility;
17. Clergy members when information is received outside the context of confession or other similar communication required to be kept confidential under church doctrine or practice. (receipt from another source even in conjunction with the confession of the maltreater)

Requirements of a Mandated Reporter Based on O.C.G.A. §19-7-5 Reporting of Child Abuse and Neglect
Mandated reporters are required to report known or suspected instances of child abuse and/or neglect in the following manner:

1. Make an oral report immediately, but in no case later than 24 hours from the time there is reasonable cause to believe a child has been abused, by telephone to 1-855-GA-CHILD or otherwise and followed by a report in writing, if requested.
2. Ensure that reports contain the names and addresses of the child and the child’s caregivers, if known, the child’s age, the nature and extent of the child’s injuries, including any evidence of previous injuries, and any other information that the reporting person believes might be helpful in establishing the cause of the injuries and the identity of the maltreater.

Mandated Reporter Training
DFCS shall provide Mandated Reporters training related to their obligation to report known or suspected child abuse and/or neglect. Such trainings can be provided in person or by referring mandated reporters to available training including those available online at the following links:

1. Mandated Reporter Law Webinar Training
2. Mandated Reporter Training
   a. Select Course Menu;
   b. Scroll to Health and Safety Section;
   c. Select Mandated Reporters: Critical Links in Protecting Children.
3. Mandated Reporter Training for Medical Professionals
   a. Select Course Menu;
   b. Scroll to Health and Safety Section;
   c. Mandated Reporting Requirements: A Track for Georgia Medical Professionals

Building Community Partnerships with External Stakeholders:
External Stakeholders within the local community, including mandated reporters are an important resource and can be a wealth of information for DFCS at any point during the life of a case, from intake through case closure. When DFCS and external stakeholders work collaboratively, each entity can learn and grow from each other through cultivating the partnership by:

1. Learning about the availability of new resources and how to access them;
2. Closing cases more confidently knowing that community services and supports are available to families;
3. Gaining a critical understanding and perspective of the neighborhoods in which they

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4. Making more informed decisions regarding out of home care and placement in the community;
5. Reducing stress caused by working in isolation from the community
6. Increasing local awareness of child maltreatment and related issues;
7. Forming and strengthening relationships with community members, which can build trust between families, child welfare agencies and service providers.

Traditionally, child maltreatment responses have been from a single agency and focused on obtaining facts and information related to the allegations of abuse or neglect. As child welfare practice has evolved, more external stakeholders have become involved with the families DFCS serves through the schools, service providers, mental health professionals etc. Despite any differences between DFCS and these external stakeholders, all share one primary goal, which is serving children and families. As the traditional agency leading the community in child welfare interventions DFCS has an opportunity to take the initiative to build strong collaborative relationships with the external stakeholders within their community. Additionally, in order to better develop a common understanding of what each stakeholder’s respective role and responsibility should be regarding child welfare in Georgia DFCS should be providing training to external stakeholders on a regular basis and participating in other multi-disciplinary activities within the community. Further information on building collaborative partnerships with community stakeholders may be found at https://www.childwelfare.gov/pubs/usermanuals/partners/

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