

Child Abuse and Neglect / Victim of Sexual Assault

Under Connecticut General Statutes, Section 17a-101 et seq. school employees who have reasonable cause to suspect or believe (1) that any child under eighteen has been abused or neglected, has had a non accidental physical injury, or injury which is at variance with the history given of such injury, or has been placed at imminent risk of serious harm, or (2) that any person who is being educated by the technical high school system or a local or regional board of education, other than as part of an adult education program, is a victim of sexual assault, and the perpetrator is a school employee, to report such suspicions to the appropriate authority.

Sharon School District employees shall report suspected abuse and/or neglect, non accidental physical injury, imminent risk of serious harm or sexual assault of a student by a school employee, in accordance with the procedures set forth below.

Definitions

For definitions of child abuse and neglect see Appendix A

For indicators of child abuse and neglect see Appendix B

What Must be Reported?

a) A report must be made when any employee of the Board of Education in the ordinary course of such person's employment or profession has reasonable cause to suspect or believe that any child under the age of eighteen years:

- i) has been abused or neglected;
- ii) has had non accidental physical injury, or injury which is at variance with the history given for such injury, inflicted upon him/her; and/or
- iii) is placed at imminent risk of serious harm;

b) A report must be made when any employee of the Board of Education in the ordinary course of such person's employment or profession has reasonable cause to suspect or believe that any person, regardless of age, who is being educated by the technical high school system or a local or regional board of education, other than as part of an adult education program, is a victim of the following sexual assault crimes, and the perpetrator is a school employee:

- i) sexual assault in first degree;
- ii) aggravated sexual assault in the first degree;
- iii) sexual assault in the second degree;
- iv) sexual assault in the third degree;
- v) sexual assault in the third degree with a firearm; or
- vi) sexual assault in the fourth degree.

Reporting Procedures for Statutory Mandated Reporters

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The following procedures apply only to statutory mandated reporters, as defined above.

When an employee of the Board of Education suspects or believes that a child has been abused, neglected, or has been placed in imminent risk of serious harm, the following steps shall be taken:

- (a) The employee shall immediately, upon having reasonable cause to suspect or believe that a child has been abused, neglected, or placed in imminent risk of serious harm, or has had non-accidental physical injuries or injuries which are at variance with the history of such injuries, and in no case later than twelve (12) hours after having such a suspicion or belief, make an oral report by telephone or in person to the Commissioner of Children and Families or the local law enforcement agency.
- (b) The employee shall also immediately make an oral report to the Building Principal or his/her designee. If the Building Principal or his/her designee is the alleged perpetrator of abuse/neglect then the employee shall instead notify the Superintendent.
- (c) If a report prepared in accordance with Section (a) above concerns suspected abuse or neglect by a school employee, the Superintendent or his/her designee, shall immediately notify the child's parent or guardian that such a report has been made.
- (d) Within 48 hours of making an oral report, the employee shall submit a written report to the Commissioner of Children and Families, or his/her representative, containing all of the required information.
- (e) The employee shall immediately, submit a copy of the written report to the Principal and/or Superintendent or the Superintendent's designee.
- (f) If a report concerns suspected abuse or neglect by a school employee who possesses a certificate, permit or authorization issued by the State Board of Education, the Superintendent shall submit a copy of the written report to the Commissioner of Education, or his/her representative

Contents of Reports

Any report made pursuant to this policy shall contain the following information, if known:

- (a) the names and addresses of the child and his/her parents or other persons responsible for his/her care;
- (b) the age of the child;
- (c) the gender of the child;
- (d) the nature and the extent of the child's injury or injuries, maltreatment or neglect;
- (e) the approximate date and time the injury or injuries, maltreatment or neglect occurred;
- (f) information concerning any previous injury or injuries to, or maltreatment or neglect of, the child or his/her siblings;
- (g) the circumstances in which the injury or injuries, maltreatment or neglect came to be known to the reporter;

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- (h) the name of the person or persons suspected to be responsible for causing such injury or injuries, maltreatment or neglect;
- (i) the reasons such person or persons are suspected of causing such injury or injuries, maltreatment or neglect;
- (j) any information concerning any prior cases in which such person or persons have been suspected of causing an injury, maltreatment or neglect of a child; and
- (k) whatever action, if any, was taken to treat, provide shelter or otherwise assist, the child.

Investigation of the Report

The Board of Education shall permit and give priority to any investigation conducted by the Department of Children and Families or the appropriate local law enforcement agency of a report that a child has been abused or neglected. If the suspected perpetrator of abuse or neglect is a school employee, the Board may conduct its own investigation and take any disciplinary action, in accordance with the provisions of section 17a-101i of the general statutes, as amended, upon notice from the DCF or the appropriate local law enforcement agency that the Board's investigation will not interfere with the investigation of DCF or such local law enforcement agency.

To the extent feasible, this investigation shall be coordinated with the Department of Children and Families or the police in order to minimize the number of interviews of any child and to share information with other persons authorized to conduct an investigation of child abuse and neglect. When investigating a report, the Superintendent or his/her designee shall endeavor to obtain, when possible, the consent of parents or guardians or other persons responsible for the care of the child, to interview the child, except in those cases in which there is reason to believe that the parents or guardians or other persons responsible for the care of such child are the perpetrators of the alleged abuse.

The investigation shall include an opportunity for the suspected perpetrator to be heard with respect to the allegations contained within the report. During the course of an investigation of suspected abuse by a school employee, the Superintendent may suspend the employee with pay or may place the employee on administrative leave with pay pending the outcome of the investigation.

A person reporting child abuse or neglect shall provide any person authorized to conduct an investigation into such claim with all information related to the investigation that is in the possession or control of the person reporting child abuse or neglect, except as expressly prohibited by state or federal law.

The Superintendent shall disclose records received from the Department of Children and Families to the Commissioner of Education and the Board of Education, or its attorney, for the purposes of review of employment status, certification, permit or authorization. Any decision of the Superintendent concerning such suspension shall remain in effect until the Board of Education Acts, pursuant to the provisions of Connecticut General Statutes. The Commissioner of Education shall also be notified if such certified person resigns from his/her employment in the District.

Regardless of the outcome of any investigation by DCF and/or the police, the Superintendent and/or the Board, as appropriate, may take disciplinary action up to and including termination of employment in accordance with the provisions of any applicable statute, if the Superintendent's

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investigation produces evidence that a child has been abused by a certified, permit or authorized school staff member.

If the contract of employment of a certified school employee holding a certificate, permit or authorization issued by the State Board of Education is terminated as a result of an investigation into reports of child abuse and neglect, the Superintendent shall notify the Commissioner of Education, or his/her representative, within 72 hours of such termination.

The District shall maintain records of allegations, investigations and reports that a child has been abused or neglected by a school employee. Such records will be maintained in the District's Central Office. The records shall include any reports made to the Department of Children and Families. Such Department is to have access to all such records.

The Board shall provide to the DCF commissioner or designee, upon request for the purposes of an investigation by DCF of suspected child abuse or neglect by a teacher employed by the Board, any records maintained or kept in District files. Such records shall include, but not be limited to, supervisory records, reports of competence, personal character and efficiency maintained in such teacher's personnel file with reference to evaluation of performance as a professional employee of such board of education, and records of the personal misconduct of such teacher. ("Teacher" includes each certified professional employee below the rank of Superintendent employed by a Board of Education in a position requiring a certificate issued by the State Board of Education.)

Actions following the investigation of the report*Evidence of Abuse by Certain School Employees*

After an investigation has been completed, if DCF, based upon the results of such investigation, has reasonable cause to believe that a child has been abused or neglected by an employee who has been entrusted with the care of a child ("Person entrusted with the care of a child or youth" means a person given access to a child or youth by a person responsible for the health, welfare or care of a child or youth for the purpose of providing education, child care, counseling, spiritual guidance, coaching, training, instruction, tutoring or mentoring of such child or youth.) and who is in a position requiring a certificate, permit or authorization issued by the State Board of Education, DCF shall notify the Superintendent and the Commissioner of Education of such findings and shall provide them with records concerning the investigation, whether or not created by DCF.

If DCF, after the completion of an investigation, has reason to believe that a child has been abused or neglected by an employee who has not been entrusted with the care of a child, who is in a position requiring a certificate, permit or authorization issued by the State Board of Education, and DCF recommends that the employee be placed on the Department of Children and Families abuse and neglect registry because the employee poses a risk to the health, safety or welfare of children, DCF shall notify the Superintendent and the Commissioner of Education of such findings and shall provide them records concerning such investigation whether or not created by DCF.

DCF shall provide this notice whether or not the child was a student in the employing school or school district.

The Superintendent shall suspend the employee, if not previously suspended, with pay and without diminution or termination of benefits. Not later than 72 hours after such suspension, the

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Superintendent shall notify the Board of Education and the Commissioner of Education, or his/her representative, of the reasons for the conditions of suspension.

The suspension of a school employee employed in a position requiring a certificate shall remain in effect until the Superintendent and/or Board of Education acts pursuant to the provisions of Conn. Gen. Stat. §10-151. If the contract of employment of such certified school employee is terminated, or such certified school employee resigns such employment, the Superintendent shall notify the Commissioner of Education, or the Commissioner of Education's representative, within seventy-two (72) hours after such termination or resignation.

The suspension of a school employee employed in a position requiring an authorization or permit shall remain in effect until the Superintendent and/or Board of Education acts pursuant to any applicable termination provisions. If the contract of employment of a school employee holding an authorization or permit from the State Department of Education is terminated, or such school employee resigns such employment, the Superintendent shall notify the Commissioner of Education, or the Commissioner of Education's representative, within seventy-two hours after such termination or resignation.

Regardless of the outcome of any investigation by the Commissioner of Children and Families and/or the police, the Superintendent and/or the Board, as appropriate, may take disciplinary action, up to and including termination of employment, in accordance with the provisions of any applicable statute, if the Superintendent's investigation produces evidence that a child has been abused or neglected by a school employee or that a student has been a victim of sexual assault by a school employee.

The Sharon Board of Education shall not employ a person whose employment contract is terminated or who resigned from employment following a suspension pursuant to Paragraph 8(a) of this policy and Conn. Gen. Stat. § 17a-101i, if such person is convicted of a crime involving an act of child abuse or neglect or an act of sexual assault of a student, as described in Paragraph 3 of this policy.

Delegation of Authority by Superintendent

The Superintendent may appoint a designee for the purposes of receiving and making reports, notifying and receiving notification, or investigating reports pursuant to this policy.

Confidential Rapid Response Team

The Superintendent will establish a confidential rapid response team to coordinate with DCF: (1) to ensure prompt reporting of suspected child abuse or neglect; or 1st, 2nd, 3rd, or 4th degree sexual assault; 1st degree aggravated sexual assault; or 3rd degree sexual assault with a firearm of a student not enrolled in adult education by a school employee; and (2) to provide immediate access to information and individuals relevant to DCF's investigation of such cases.

The confidential rapid response team consists of a local teacher, the Superintendent, a local police officer, and any other person the Board of Education deems appropriate.

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The Board of Education shall not discharge or in any manner discriminate or retaliate against any employee who, in good faith, makes a report or in good faith does not make a report, pursuant to this policy or testifies or is about to testify in any proceeding involving abuse or neglect or sexual assault by a school employee.

The Board of Education also prohibits any employee from hindering or preventing or attempting to hinder or prevent any employee from making a report pursuant to this policy or state law concerning suspected child abuse or neglect or the sexual assault of a student by a school employee or testifying in any proceeding involving child abuse or neglect or the sexual assault of a student by a school employee.

Training

All District employees who are mandated reporters are required to complete a training program pertaining to the accurate and prompt reporting of abuse and neglect, made available by the Commissioner of Children and Families. In addition, all such employees must complete a refresher program at least once every three years.

Distribution of Policy

This policy shall be distributed annually to all school employees employed by the Board. The Board shall document that all such school employees have received this written policy.

Disciplinary Action

Any mandated reporter employed by the Sharon Board of Education who fails to comply with the requirements of this policy shall be subject to discipline.

The Sharon Board of Education shall not hire any person whose employment contract was previously terminated by a board of education or who resigned from such employment, if such person has been convicted of a violation of Section 17a-101a of the Connecticut General Statutes, as amended, relating to mandatory reporting, regardless of whether an allegation of abuse or neglect or sexual assault was substantiated.

APPENDIX A - OPERATIONAL DEFINITIONS OF CHILD ABUSE AND NEGLECT

The following operational definitions are working definitions and examples of child abuse and neglect as used by the Connecticut Department of Children and Families.

For the purposes of these operational definitions, child refers to any person under eighteen (18) years of age, or under twenty-one (21) years of age and in DCF care

- a person responsible for a child's health, welfare or care means:
 - the child's parent, guardian, foster parent, an employee of a public or private residential home, agency or institution or other person legally responsible under State law for the child's welfare in a residential setting; or any staff person providing out-

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of-home care, including center-based child day care, family day care, or group day care

- a person given access to a child is a person who is permitted to have personal interaction with a child by the person responsible for the child’s health, welfare or care or by a person entrusted with the care of a child for the purpose of education, child care, counseling, spiritual guidance, coaching, training, instruction, tutoring or mentoring.

Note: Only a “child” as defined above may be classified as a victim of child abuse and/or neglect; only a “person responsible”, “person given access”, or “person entrusted” as defined above may be classified as a perpetrator of child abuse and/or neglect.

Legal References: Connecticut General Statutes §17a-93; §17a-103a; §17a-101, et. seq., as amended by P.A. 11-93; §46b-120.

Physical Abuse

A child may be found to have been physically abused who:

- has been inflicted with physical injury or injuries other than by accidental means,
- is in a condition which is the result of maltreatment such as, but not limited to, malnutrition, sexual molestation, deprivation of necessities, emotional maltreatment or cruel punishment, and/or
- has injuries at variance with the history given of them.

Evidence of physical abuse includes:

● bruises, scratches, lacerations	● burns, and/or scalds
● head injuries	● internal injuries
● cruel punishment	● death
● reddening or blistering of the tissue through application of heat by fire, chemical substances, cigarettes, matches, electricity, scalding water, friction, etc.	● injuries to bone, muscle, cartilage, ligaments, fractures, dislocations, sprains, strains, displacements, hematomas, etc.
● malnutrition related to acts of commission or omission by an established caregiver resulting in a child’s malnourished state that can be supported by professional medical opinion	● deprivation of necessities acts of commission or omission by an established caregiver resulting in physical harm to child
● misuse of medical treatments or therapies	

Sexual Abuse/Exploitation Sexual Abuse/Exploitation

Sexual Abuse/Exploitation is any incident involving a child's non-accidental exposure to sexual behavior.

Evidence of sexual abuse includes, but is not limited to the following:

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<ul style="list-style-type: none"> oral / genital contact 	<ul style="list-style-type: none"> incest
<ul style="list-style-type: none"> rape 	<ul style="list-style-type: none"> penetration: digital, penile, or foreign objects
<ul style="list-style-type: none"> disease or condition that arises from sexual transmission 	<ul style="list-style-type: none"> other verbal, written or physical behavior not overtly sexual but likely designed to “groom” a child for future sexual abuse
<ul style="list-style-type: none"> indecent exposure for the purpose of sexual gratification of the offender, or for purposes of shaming, humiliating, shocking or exerting control over the victim 	<ul style="list-style-type: none"> coercing or forcing a child to participate in, or be negligently exposed to, pornography and/or sexual behavior
<ul style="list-style-type: none"> fondling, including kissing, for the purpose of sexual gratification of the offender, or for purposes of shaming, humiliating, shocking or exerting control over the victim 	<ul style="list-style-type: none"> sexual exploitation, including possession, manufacture, or distribution of child pornography. online enticement of a child for sexual acts, child prostitution, child-sex tourism, unsolicited obscene material sent to a child, or misleading domain name likely to attract a child to an inappropriate website

Emotional Maltreatment-Abuse is:

- act(s), statement(s), or threat(s), which
- has had, or is likely to have an adverse impact on the child; and/or
- interferes with a child’s positive emotional development.

Evidence of emotional maltreatment-abuse includes, but is not limited to, the following:

- rejecting;
- degrading;
- isolating and/or victimizing a child by means of cruel, unusual, or excessive methods of discipline; and/or
- exposing the child to brutal or intimidating acts or statements.

Indicators of Adverse Impact of emotional maltreatment-abuse may include, but are not limited to, the following:

<ul style="list-style-type: none"> depression 	<ul style="list-style-type: none"> withdrawal 	<ul style="list-style-type: none"> low self-esteem
<ul style="list-style-type: none"> anxiety 	<ul style="list-style-type: none"> fear 	<ul style="list-style-type: none"> aggression/ passivity
<ul style="list-style-type: none"> emotional instability 	<ul style="list-style-type: none"> sleep disturbances 	<ul style="list-style-type: none"> somatic complaints with no medical basis

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<ul style="list-style-type: none"> extreme dependence 	<ul style="list-style-type: none"> academic regression 	<ul style="list-style-type: none"> trust issues
<ul style="list-style-type: none"> inappropriate behavior for age or development 	<ul style="list-style-type: none"> suicidal ideations or attempts 	

Physical Neglect

A child may be found neglected who:

- has been abandoned;
- is being denied proper care and attention physically, educationally, emotionally, or morally;
- is being permitted to live under conditions, circumstances or associations injurious to his well-being; and/or
- has been abused.

Evidence of physical neglect includes, but is not limited to:

<ul style="list-style-type: none"> inadequate food 	<ul style="list-style-type: none"> malnutrition
<ul style="list-style-type: none"> inadequate clothing; 	<ul style="list-style-type: none"> inadequate housing or shelter;
<ul style="list-style-type: none"> erratic, deviant, or impaired behavior by the person responsible for the child’s health, welfare or care; by a person given access to the child; or by a person entrusted with the child’s care which adversely impacts the child 	

- permitting the child to live under conditions, circumstances or associations injurious to his well-being including, but not limited to, the following:

<ul style="list-style-type: none"> substance abuse by caregiver, which adversely impacts the child physically 	<ul style="list-style-type: none"> substance abuse by the mother of a newborn child and the newborn has a positive urine or meconium toxicology for drugs
<ul style="list-style-type: none"> psychiatric problem of the caregiver which adversely impacts the child physically 	<ul style="list-style-type: none"> exposure to family violence which adversely impacts the child physical
<ul style="list-style-type: none"> exposure to violent events, situations, or persons that would be reasonably judged to compromise a child’s physical safety 	<ul style="list-style-type: none"> non-accidental, negligent exposure to drug trafficking and/or individuals engaged in the active abuse of illegal substances
<ul style="list-style-type: none"> non-accidental or negligent exposure to pornography or sexual acts 	<ul style="list-style-type: none"> inability to consistently provide the minimum of child-caring tasks
<ul style="list-style-type: none"> inability to provide or maintain a safe living environment 	<ul style="list-style-type: none"> abandonment
<ul style="list-style-type: none"> action/inaction resulting in the child’s failure to thrive 	<ul style="list-style-type: none"> transience

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o inadequate supervision:	o action/inaction resulting in death
o voluntarily and knowingly entrusting the care of a child to individuals who may be disqualified to provide safe care, e.g. persons who are subject to active protective or restraining orders; persons with past history of violent/drug/sex crimes; persons appearing on the Central Registry	o creating or allowing a circumstance in which a child is alone for an excessive period of time given the child's age and cognitive abilities
o holding the child responsible for the care of siblings or others beyond the child's ability	o failure to provide reasonable and proper supervision of a child given the child's age and cognitive abilities.

Note: Inadequate food, clothing, or shelter or transience finding must be related to caregiver acts of omission or commission and not simply a function of poverty alone.

Medical Neglect

Medical Neglect is the unreasonable delay, refusal or failure on the part of the person responsible for the child's health, welfare or care or the person entrusted with the child's care to seek, obtain, and/or maintain those services for necessary medical, dental or mental health care when such person knows, or should reasonably be expected to know, that such actions may have an adverse impact on the child.

Evidence of medical neglect includes, but is not limited to:

- frequently missed appointments, therapies or other necessary medical and/or mental health treatments;
- withholding or failing to obtain or maintain medically necessary treatment from a child with life-threatening, acute or chronic medical or mental health conditions; and/or
- withholding medically indicated treatment from disabled infants with life threatening conditions.

Note: Failure to provide the child with immunizations or routine well child care in and of itself does not constitute medical neglect.

Educational Neglect

Except as noted below, Educational Neglect occurs when, by action or inaction, the parent or person having control of a child five (5) years of age and older and under eighteen (18) years of age who is not a high school graduate;

- fails to register the child in school

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- fails to allow the child to attend school or receive home instruction in accordance with CONN. GEN. STAT. §10-184
- failure to take appropriate steps to ensure regular attendance at school if the child is registered.

Exceptions (in accordance with CONN. GEN. STAT. §10-184):

- A parent or person having control of a child may exercise the option of not sending the child to school at age five (5) or age six (6) years by personally appearing at the school district office and signing an option form. In these cases, educational neglect occurs if the parent or person having control of the child has registered the child at age five (5) or age (6) years and then does not allow the child to attend school or receive home instruction.

Note: Failure to sign a registration option form for such a child is not in and of itself educational neglect.

- A parent or person having control of a child sixteen (16) or seventeen (17) years of age may consent to such child’s withdrawal from school. Such parent or person shall personally appear at the school district office and sign a withdrawal form.

Emotional Neglect

Emotional Neglect is the denial of proper care and attention, or failure to respond, to a child’s affective needs by the person responsible for the child's health, welfare or care; by the person given access to the child; or by the person entrusted with the child’s care which has an adverse impact on the child or seriously interferes with a child’s positive emotional development.

Evidence of emotional neglect includes, but is not limited to, the following:

- inappropriate expectations of the child given the child's developmental level;
- failure to provide the child with appropriate support, attention and affection;
- permitting the child to live under conditions, circumstances or associations; injurious to his well-being including, but not limited to, the following;
 - substance abuse by caregiver, which adversely impacts the child emotionally;
 - exposure to family violence which adversely impacts the child emotionally;
 - psychiatric problem of the caregiver, which adversely impacts the child emotionally; and

Indicators may include, but are not limited to, the following:

• depression	• withdrawal	• low self-esteem
• anxiety	• fear	• aggression/ passivity
• emotional instability	• sleep disturbances	• extreme dependence
• somatic complaints with no medical basis	• inappropriate behavior for age or development	• suicidal ideations or attempts

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• academic regression	• trust issues	
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Moral Neglect

Exposing, allowing, or encouraging the child to engage in illegal or reprehensible activities by the person responsible for the child's health, welfare or care or person given access or person entrusted with the child's care.

Evidence of Moral Neglect includes but is not limited to:

- stealing;
- using drugs and/or alcohol;
- and involving a child in the commission of a crime, directly or by caregiver indifference.

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HISTORICAL

<ul style="list-style-type: none"> • No witnesses 	<ul style="list-style-type: none"> • History of prior "accidents"
<ul style="list-style-type: none"> • Inconsistent or changing descriptions of accident by child and/or parent 	<ul style="list-style-type: none"> • Child's developmental level inconsistent with history
<ul style="list-style-type: none"> • Absence of parental concern 	<ul style="list-style-type: none"> • Child is handicapped (physically, mentally, developmentally) or otherwise perceived as "different" by parent
<ul style="list-style-type: none"> • Unexplained school absenteeism 	<ul style="list-style-type: none"> • History of precipitating crisis
<ul style="list-style-type: none"> • Delay in seeking appropriate care after injury 	

PHYSICAL

<ul style="list-style-type: none"> • Soft tissue injuries on face, lips, mouth, back, buttocks, thighs or large areas of the torso 	<ul style="list-style-type: none"> • Clusters of skin lesions; regular patterns consistent with an implement;
<ul style="list-style-type: none"> • Shape of lesions inconsistent with accidental bruise; 	<ul style="list-style-type: none"> • Bruises/welts in various stages of healing;
<ul style="list-style-type: none"> • Fractures/dislocations inconsistent with history; 	<ul style="list-style-type: none"> • Laceration of mouth, lips, gums or eyes;
<ul style="list-style-type: none"> • Bald patches on scalp 	<ul style="list-style-type: none"> • Abdominal swelling or vomiting;
<ul style="list-style-type: none"> • Adult-size human bite mark(s) 	<ul style="list-style-type: none"> • Rope marks
<ul style="list-style-type: none"> • Fading cutaneous lesions noted after weekends or absences 	<ul style="list-style-type: none"> • Burn pattern consistent with an implement on soles, palms, back, buttocks and genitalia; symmetrical and/or sharply demarcated edges

BEHAVIORAL

<ul style="list-style-type: none"> • Wary of physical contact with adults 	<ul style="list-style-type: none"> • Expresses fear of parents
<ul style="list-style-type: none"> • Affection inappropriate for age, extremes in behavior, aggressiveness / withdrawal 	<ul style="list-style-type: none"> • Feels responsible (punishment "deserved")
<ul style="list-style-type: none"> • Reports injury by parent 	<ul style="list-style-type: none"> • Reluctance to go home
<ul style="list-style-type: none"> • Poor self-esteem; 	<ul style="list-style-type: none"> • Clothing covers arms and legs even in hot weather.

Indicators of Sexual Abuse

STUDENTS**REGULATION****Child Abuse and Neglect / Victim of Sexual Assault****HISTORICAL**

<ul style="list-style-type: none"> • Vague somatic complaint 	<ul style="list-style-type: none"> • Excessive school absences;
<ul style="list-style-type: none"> • Inadequate supervision at home 	<ul style="list-style-type: none"> • History of urinary tract infection or vaginitis
<ul style="list-style-type: none"> • Complaint of pain; genital, anal or lower back/abdominal 	<ul style="list-style-type: none"> • Complaint of genital itching
<ul style="list-style-type: none"> • Any disclosure of sexual activity, even if contradictory. 	<ul style="list-style-type: none"> • Vague somatic complaint; Excessive school absences
<ul style="list-style-type: none"> • Inadequate supervision at home; History of urinary tract infection or vaginitis 	<ul style="list-style-type: none"> • Complaint of pain; genital, anal or lower back/abdominal; Complaint of genital itching
<ul style="list-style-type: none"> • Any disclosure of sexual activity, even if contradictory. 	

PHYSICAL

<ul style="list-style-type: none"> • Discomfort in walking, sitting; • 	<ul style="list-style-type: none"> • Evidence of trauma or lesions in and around mouth
<ul style="list-style-type: none"> • Vaginal discharge/vaginitis 	<ul style="list-style-type: none"> • Vaginal or rectal bleeding
<ul style="list-style-type: none"> • Bruises, swelling or lacerations around genitalia, inner thighs 	<ul style="list-style-type: none"> • Any other signs or symptoms of sexually transmitted disease
<ul style="list-style-type: none"> • Dysuria 	<ul style="list-style-type: none"> • Vulvitis
<ul style="list-style-type: none"> • Pregnancy. 	

BEHAVIORAL

<ul style="list-style-type: none"> • Low self-esteem 	<ul style="list-style-type: none"> • Change in eating pattern
<ul style="list-style-type: none"> • Unusual new fears 	<ul style="list-style-type: none"> • Regressive behaviors
<ul style="list-style-type: none"> • Personality changes (hostile/aggressive or extreme compliance) 	<ul style="list-style-type: none"> • Depression
<ul style="list-style-type: none"> • Decline in school achievement 	<ul style="list-style-type: none"> • Social withdrawal; poor peer relationship
<ul style="list-style-type: none"> • Indicates sophisticated or unusual sexual knowledge for age 	<ul style="list-style-type: none"> • Seductive behavior, promiscuity or prostitution
<ul style="list-style-type: none"> • Substance abuse 	<ul style="list-style-type: none"> • Suicide ideation or attempt
<ul style="list-style-type: none"> • Runaway. 	

Indicators of Emotional Abuse**HISTORICAL**

<ul style="list-style-type: none"> • Parent ignores/isolates/belittles/rejects/scapegoats child 	<ul style="list-style-type: none"> • Parent's expectations inappropriate to child's development
<ul style="list-style-type: none"> • Prior episode(s) of physical abuse 	<ul style="list-style-type: none"> • Parent perceives child as "different"

PHYSICAL

STUDENTS**REGULATION****Child Abuse and Neglect / Victim of Sexual Assault**

<ul style="list-style-type: none"> • (Frequently none) 	<ul style="list-style-type: none"> • Failure to thrive
<ul style="list-style-type: none"> • Speech disorder 	<ul style="list-style-type: none"> • Lag in physical development
<ul style="list-style-type: none"> • Signs/symptoms of physical abuse. 	

BEHAVIORAL

<ul style="list-style-type: none"> • Poor self-esteem 	<ul style="list-style-type: none"> • Regressive behavior (sucking, rocking, enuresis)
<ul style="list-style-type: none"> • Sleep disorders 	<ul style="list-style-type: none"> • Adult behaviors (parenting sibling)
<ul style="list-style-type: none"> • Antisocial behavior 	<ul style="list-style-type: none"> • Emotional or cognitive developmental delay
<ul style="list-style-type: none"> • Depression 	<ul style="list-style-type: none"> • Suicide ideation/attempt
<ul style="list-style-type: none"> • Extremes in behavior - overly aggressive/compliant 	

Indicators of Physical Neglect:**HISTORICAL**

<ul style="list-style-type: none"> • High rate of school absenteeism 	<ul style="list-style-type: none"> • No food intake for 24 hours
<ul style="list-style-type: none"> • Parental inattention to recommended medical care 	<ul style="list-style-type: none"> • Inadequate supervision, especially for long periods and for dangerous activities
<ul style="list-style-type: none"> • Child frequently unattended; locked out of house 	<ul style="list-style-type: none"> • Frequent visits to school nurse with nonspecific complaints
<ul style="list-style-type: none"> • Family member addicted to drugs/alcohol 	<ul style="list-style-type: none"> • Home substandard (no windows, doors, heat), dirty, infested, obvious hazards

PHYSICAL

<ul style="list-style-type: none"> • Hunger, dehydration 	<ul style="list-style-type: none"> • Poor personal hygiene, unkempt, dirty
<ul style="list-style-type: none"> • Constant fatigue or listlessness 	<ul style="list-style-type: none"> • Unattended physical or health care needs
<ul style="list-style-type: none"> • Infestations 	<ul style="list-style-type: none"> • Multiple skin lesions/sores from infection
<ul style="list-style-type: none"> • Dental cavities/poor oral hygiene 	<ul style="list-style-type: none"> • Inappropriate clothing for weather/size of child, clothing dirty; wears same clothes day after day

BEHAVIORAL

<ul style="list-style-type: none"> • Comes to school early, leaves late 	<ul style="list-style-type: none"> • Frequent sleeping in class
<ul style="list-style-type: none"> • Begging for/stealing food 	<ul style="list-style-type: none"> • Adult behavior/maturity (parenting siblings)
<ul style="list-style-type: none"> • Delinquent behaviors 	