

Reporting of Suspected Abuse of a Child

Reporting

Any district employees having reasonable cause to believe that any child with whom the employee comes in contact has suffered abuse, or that any person with whom the employee comes in contact has abused a child, shall orally report or cause an oral report to be immediately made by telephone or otherwise to the local office of the Oregon Department of Human Services or to a law enforcement agency within the county where the person making the report is at the time of his/her contact. The district employee should also immediately inform his/her supervisor, principal or superintendent.

If known, such report shall contain the names and addresses of the child, the child's parents or other persons responsible for the child's care, the child's age, the nature and extent of the suspected abuse, the explanation given for the suspected abuse, any other information which the person making the report believes might be helpful in establishing the possible cause of the suspected abuse and the identity of a possible perpetrator.

A written record of the abuse report shall be made by the employee suspecting the abuse of a child. The written record may be made using Nyssa School District's abuse reporting form which includes at a minimum:

1. The name and position of the person making the report;
2. The name, address of the child, the parents or other person responsible for the child's care;
3. The name and position of any witness to the report;
4. A description of the nature and extent of the abuse, including any information which could be helpful in establishing cause of abuse and identity of the abuser;
5. A description of how the report was made (i.e., phone or other method);
6. The name of the agency and individual who took the report;
7. The date and time that the report was made; and
8. The names of persons who received a copy of the written report.

The written record of the abuse report shall not be placed in the student's educational record. A copy of the written report shall be retained by the employee making the report and a copy shall be provided to the employee's supervisor and/or superintendent.

When the district receives a report of suspected abuse of a child by one of its employees, and the superintendent determines that there is reasonable cause to support the report, the district shall place the district employee on paid administrative leave until the Department of Human services or a law enforcement agency either: 1) determines that the report is unfounded or that the report will not be pursued; or 2) determines that the report is founded and the education provider takes the appropriate disciplinary action against the district employee. If the Department of Human services or a law enforcement agency is unable to determine whether the abuse of a child occurred the district may either reinstate the employee or take disciplinary action at the district's discretion.

The written record of each reported incident of abuse of a child, action taken by the district and any findings as a result of the report shall be maintained by the district.

Definitions

1. Oregon law recognizes these types of abuse:
 - a. Physical;
 - b. Neglect;
 - c. Mental injury;
 - d. Threat of harm;
 - e. Sexual abuse and sexual exploitation.

2. "Child" means an unmarried person who is under 18 years of age.

Confidentiality of Records

The name, address and other identifying information about the employee who made the report are confidential and are not accessible for public inspection.

The disciplinary records of a district employee or former district employee convicted of a crime listed in ORS 342.143 are not exempt from disclosure under ORS 192.501 or 192.502. Therefore, if a district employee or former employee is convicted of a crime listed in ORS 342.143, the district that is or was the employer of that employee when the crime was committed shall disclose the disciplinary records of the employee to any person upon request. However, prior to the disclosure of a disciplinary record the district shall remove any personally identifiable information from the record that would disclose the identity of a child, a crime victim or a district employee who is not the subject of the disciplinary record.

Failure to Comply

Any district employee who fails to report a suspected abuse of a child as provided by this policy and the prescribed Oregon law commits a violation punishable by law. A district employee who fails to comply with the confidentiality of records requirements commits a violation punishable by the prescribed law. If

an employee fails to report suspected abuse of a child or fails to maintain confidentiality of records as required by this policy, the employee will be disciplined.

Cooperation with Investigator

The district staff shall make every effort in suspected abuse of a child cases to cooperate with investigating officials as follows:

1. Any investigation of abuse of a child will be directed by the Oregon Department of Human Services or law enforcement officials as required by law. When an administrator is notified that the Department of Human Services or law enforcement would like to interview a student at school, the administrator must request that the investigating official demonstrate that he/she has a warrant, court order, exigent circumstances or parental consent to interview the student. Failure to meet one of these criteria may result in the administrator's refusal to allow the student interview on school property. If the student is to be interviewed at the school, the principal or representative shall make a conference space available. The principal or representative of the school may at the discretion of the investigator, be present to facilitate the interview. Law enforcement officers wishing to interview or remove a student from the premises shall present themselves at the office and contact the principal or representative. The officer shall sign the student out on a form to be provided by the school;
2. When the subject matter of the interview or investigation is identified to be related to suspected abuse of a child, district employees shall not notify parents;
3. The principal or representative shall advise the investigator of any conditions of disability prior to any interview with the affected child;
4. District employees are not authorized to reveal anything that transpires during an investigation in which the employee participates, nor shall the information become part of the student's education records, except that the employee may testify at any subsequent trial resulting from the investigation and may be interviewed by the respective litigants prior to any such trial.

ABUSE REPORT FORM

Physical Neglect Mental Injury Threat of Harm Sexual Abuse Sexual Exploitation

Name of reportant: _____

Position of reportant: _____

If a student, name and address of the parent or guardian responsible for student: _____

Date of report: _____

Name of alleged abuser: _____

Position of alleged abuser: _____

A description of the nature and extent of the abuse, including any information which could be helpful in establishing cause of abuse and identity of the alleged abuser:

A description of how the initial report was made (i.e., phone or other method): _____

Name of the agency and individual who took the report: _____

Date and time initial the report was made: _____

Name of persons who received a copy of the initial written report: _____

Evidence (i.e., letters, photos, videos etc., excluding sexting or sexually explicit photos or videos of individuals under 18 years of age. If sexually explicit images/videos are observed, the person observing the images/videos shall immediately contact local law enforcement and report their observation (attach evidence if possible)):

Date and place of incident or incidents: _____

Name and position of witnesses (if any): _____

Any other information: _____

I agree that all of the information on this form is accurate and true to the best of my knowledge.

Signature

Date

WITNESS DISCLOSURE FORM

Name of Witness: _____

Position of Witness: _____

Date of Testimony/Interview: _____

Description of Instance Witnessed: _____

Any Other Information: _____

I agree that all the information on this form is accurate and true to the best of my knowledge.

Signature: _____

Date: _____