

# **CHILD ABUSE REPORTING REQUIREMENTS**

## **CONTACTING THE COUNCIL**

The Boy Scouts requires immediate notification of a Scout executive whenever information about possible child abuse in the Boy Scout program is uncovered. The current policy for after-hours notifications is to wait until the next business day and call the Scout office in Piedmont at 510-547-4493.

The Executive Director will ensure that all state reporting requirements have been met and will also take measures to protect the youth in the Scouting movement.

If an immediate report is to be made due to extreme urgency, a contact to the Office of Child Abuse Control should be made: **259-1800**. The council should be contacted by leaving a message on the council service center answering machine. The "Suspected Child Abuse Reporting Form" should be completed and submitted to the council.

## **REPORTING CHILD ABUSE IN California, Alameda County**

The law says any person having reasonable cause to believe that a child has been subjected to child abuse or acts of child abuse shall report this information immediately to the Division of Youth and Family Services (DYFS).

From 9:00 am to 5:00 pm weekdays, reports of child abuse and neglect can be made to the local DYFS district office. There is at least one district office in every county. The Office of Child Abuse Control (OCAC) operates a toll-free, 24-hour, seven-day-a-week hotline, 259-1800, to receive reports of child abuse and neglect. Calls received at OCAC during normal working hours are immediately referred to the appropriate district office, and calls received after hours are referred to the Special Response Unit (SPRU).

DYFS accepts all allegations of child abuse and neglect by telephone and in person from all sources, including identified sources, news media, anonymous sources, sources that have incomplete information, and referrals from the child or parent themselves.

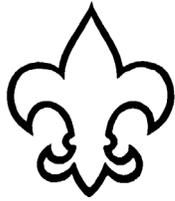
Upon receiving a report of child abuse or neglect, a DYFS caseworker shall investigate the allegations and take such action as is necessary to ensure the safety of the child.

## **IMMUNITY FROM CIVIL OR CRIMINAL LIABILITY**

Any person who, pursuant to the law, reports abuse and neglect or testifies in a child abuse hearing resulting from such a report is immune from any criminal or civil liability as a result of such action.

## **PENALTY FOR FAILURE TO REPORT**

Any person who knowingly fails to report suspected abuse or neglect pursuant to the law or to comply with the provisions of the law is a disorderly person and subject to a fine up to \$1,000 or up to six months imprisonment, or both.



**PIEDMONT COUNCIL**  
**Boy Scouts of America**  
10 HIGHLAND WAY - PIEDMONT, CA 94611  
TEL 510.547.4493 FAX 510.547.4400

### **SUSPECTED CHILD ABUSE REPORTING FORM**

|  |  |                              |              |            |
|--|--|------------------------------|--------------|------------|
| <b>The following Information was Provided to</b> |  | <b>Position</b>              |              |            |
| <b>Name:</b>                                     |  |                              |              |            |
| <b>Address:</b>                                  |  | <b>City</b>                  | <b>State</b> | <b>Zip</b> |
|  |  |                              |              |            |
| <b>Name of Suspected Abuser:</b>                 |  |                              |              |            |
|  |  |                              |              |            |
| <b>Address</b>                                   |  | <b>City</b>                  | <b>State</b> | <b>Zip</b> |
|  |  |                              |              |            |
| <b>Scouting Position (if known)</b>              |  |                              |              |            |
|  |  |                              |              |            |
| <b>Child's Name</b>                              |  | <b>Child's Date of Birth</b> |              |            |
|  |  | / /                          |              |            |
| <b>Address</b>                                   |  | <b>City</b>                  | <b>State</b> | <b>Zip</b> |
|  |  |                              |              |            |
| <b>Parent's Name</b>                             |  | <b>Telephone</b>             |              |            |
|  |  | ( )                          |              |            |
| <b>Physical indicators observed</b>              |  |                              |              |            |
|  |  |                              |              |            |
| <b>Behavioral indicators observed</b>            |  |                              |              |            |
|  |  |                              |              |            |
| <b>Other Indicators observed/known</b>           |  |                              |              |            |
|  |  |                              |              |            |
| <b>Reporter's name &amp; position</b>            |  |                              |              |            |
|  |  |                              |              |            |
| <b>Date of report</b>                            |  | <b>Signature</b>             |              |            |
| / /  |  |                              |              |            |