Child Sexual Abuse Reporting

Purpose
To report suspected cases of child sexual abuse to the Department of Family and Protective Services (DFPS) and ensure compliance with state law.

Authority
Article II of the General Appropriations Act and Texas Family Code

Policy
Local Agencies must comply with the provisions of state law related to reporting suspected child sexual abuse of minors, including those minors who are pregnant or postpartum (postpartum includes breastfeeding women).

Definitions
Professional – For WIC reporting purposes, all staff, including volunteers, who interact with clients are considered professionals and must report within 48 hours. The 48 hours reporting requirements begins during a certification when “yes” is selected for any of the affirmative defense questions.

Procedures
I. Local Agency (LA) staff who interact with clients must report minors who are pregnant or postpartum (postpartum includes breastfeeding women). LA staff are considered professionals and must report within 48 hours (see definition).

II. Staff must enter all required information (e.g., Name, DOB, Participant Category, Gender) when creating a record in the MIS. The MIS will automatically send an underage report to DFPS for minors under 14
years of age. Reports will be sent in real time once the record with the DOB and category is created and saved in the system. Family Demographics questions one and two will be auto populated with the information entered when saving a record.

III. The MIS will prompt staff with an alert message to complete affirmative defense questions for minors 14 to under 17 years of age. The system will require staff to complete the affirmative defense form before the certification can be completed.

A. If ‘Yes’ to either question 1 or 2 is selected, then a report will automatically be sent to DFPS when the record is saved. Staff MUST then ask the corresponding follow-up question(s) 1a and/or 2a.

B. Questions 3 and 4 are optional to ask but must be answered if known. If ‘Yes’ to either question 3 or 4 is selected, a report will automatically be emailed to DFPS when the record is saved.

C. Question 5 provides additional details to investigators about the incident being reported and must be answered if known. The details entered will be displayed in the Family Demographics section of the report.

IV. All staff interacting with clients are considered professional staff and must receive child abuse training. New staff must receive this training prior to performing job duties and/or having client interactions. Training must be documented and available for review during Quality Assurance monitoring visits. Link to the training chart: Combined TR chart (texas.gov)
Guidelines

Additional types of abuse are listed at: http://www.statutes.legis.state.tx.us/Docs/FA/htm/FA.261.htm

Reports of other forms of abuse can be made at the Texas Abuse Hotline Website: https://www.txabusehotline.org/Login/Default.aspx

The affirmative defense form questions are as follows:

1. Child’s partner is more than three years older than the child. (required)
   1a. Child’s caregiver was aware of relationship and failed to make a reasonable effort to prevent it.
2. The act involved force or duress. (required)
   2a. The perpetrator was a relative, household member or caregiver.
3. Child’s partner is a registered sex offender OR convicted or adjudicated for a sexual offense. (optional)
4. Child’s caregiver allowed the child to engage in a sexual relationship for personal compensation. (optional)
5. Please provide any additional details regarding the incident being reported. This includes, but not limited to:
   1. the name, age, and relationship of alleged abuser (if applicable).
   2. the address or some other way to locate alleged abuser (if applicable).
Child Sexual Abuse Reporting in TXIN

Q1  Child’s partner is more than three years older than the child.

- Yes
  - Report sent to DFPS
- No
  - Report NOT sent
- Unknown
  - Report NOT sent

Q1a is required when Q1 = YES

Q1a  Child’s caregiver was aware of relationship and failed to make a reasonable effort to prevent it.

- Yes
  - Report sent to DFPS
- No
  - Report NOT sent
- Unknown

Q2  The act involved force or duress.

- Yes
  - Report sent to DFPS
- No
  - Report NOT sent
- Unknown

Q2a is required when Q2 = YES

Q2a  The perpetrator was a relative, household member or caregiver.

- Yes
  - Report sent to DFPS
- No
  - Report NOT sent
- Unknown
**Optional Question**

**Response**

**Action**

**Q3**  
Child’s partner is a registered sex offender OR convicted or adjudicated for a sexual offense.

- Yes  
  Report sent to DFPS  
- No  
  Report NOT sent  
- Unknown  
  Report NOT sent

**Q4**  
Child’s caregiver allowed the child to engage in a sexual relationship for personal compensation.

- Yes  
  Report sent to DFPS  
- No  
  Report NOT sent  
- Unknown  
  Report NOT sent

**Q5**  
Please provide any additional details regarding the incident being reported. This includes, but is not limited to:
1. the name, age, and relationship of alleged abuser (if applicable)
2. the address or some other way to locate alleged abuser (if applicable)

**Family Demographics**
1. Child’s address or some other way to locate (name of school, or directions to home if rural or P.O. box)
2. Name, address and phone number of parent or caregiver (or directions to home if rural or P.O. box)