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Owner	Sheree Jackson: Vice President Of Compliance
Policy Area	Compliance
Applicability	Detroit Wayne Integrated Health Network

Child Protective Service Reporting

POLICY

It is the policy of Detroit Wayne Integrated Health Network (DWHN) to protect children, fulfill mandatory reporting obligations, and maintain professional accountability.

PURPOSE

The purpose of this policy is to ensure all staff promptly recognize, document, and report suspected child abuse or neglect in compliance with the **Michigan Child Protection Law** and applicable organizational policies

APPLICATION

Applies to all staff, contractors, and volunteers who have contact with minors through agency programs, including:

Clinicians (psychiatrists, psychologists, therapists, nurses, case managers)

Support staff and administrative personnel

Community partners working under contract with the organization

1. The following groups are required to implement and adhere to this policy:
 - a. DWHN Board,
 - b. DWHN Staff including the following
 1. DWHN PIHP Staff
 2. DWHN Community Care Clinic Staff (Direct Care Staff)
 3. DWHN Community Care Clinic Staff (DWHN staff operating as a CCBHC)
 4. DWHN Crisis Care Center Staff
 5. DWHN Mobile Crisis Staff
 - c. Contractual Staff
 - d. Clinically Responsible Service Provider (CRSP) and their subcontractors

- e. Specialty Providers
 - f. Crisis Services Vendors
 - g. Credentialing Verification Organization (CVO)
 - h. Designated Collaborating Organizations (DCO)
2. This policy serves the following populations:
- a. Adults
 - b. Children
 - c. Individuals with Intellectual and/or Developmental Disabilities (I/DD)
 - d. Serious Mental Illness (SMI),
 - e. Serious Emotional Disturbance (SED),
 - f. Substance Use Disorder (SUD)
 - g. Autism
 - h. Mild/Moderate levels of care
3. This policy impacts the following contracts/service lines:
- a. Autism
 - b. Certified Behavioral Health Clinics
 - c. General Fund
 - d. Grants
 - e. MI-HEALTH LINK
 - f. Medicaid
 - g. SUD

KEYWORDS

1. Definitions

- a. **Abuse:** Harm or threatened harm to a child's health or welfare caused by a parent, legal guardian, or other person responsible for the child's care.
- b. **Neglect:** Failure to provide adequate food, clothing, shelter, medical care, or supervision.
- c. **Reasonable Cause to Suspect:** When, based on professional judgment, a reasonable person would suspect abuse or neglect. Proof is **not required**.

2. Legal Authority

Michigan law requires certain professional, mandatory reporters, to report suspected child abuse or neglect immediately when they have reasonable cause to suspect it, based on observation, information, or disclosure.

Mandatory reporters include:

• Physicians	• Licensed emergency medical care providers.
• Licensed master social workers.	• School counselors.
• Dentists.	• Audiologists.

• Licensed bachelor's social workers.	• Teachers.
• Physician's assistants.	• Psychologists.
• Registered social service technicians.	• Law enforcement officers.
• Registered dental hygienists.	• Marriage and family therapists.
• Social service technicians.	• Members of the clergy.
• Medical examiners.	• Licensed professional counselors.
• Persons employed in a professional capacity in any office of the Friend of the Court.	• Regulated child care providers.
• Nurses.	• Social workers.
• School administrators.	• Employees of an organization or entity that, as a result of federal funding statutes, regulations, or contracts, would be prohibited from reporting in the absence of a state mandate or court order (example: domestic violence provider).
• Physical therapist assistants.	• Physical therapists.
• Athletic trainers.	• Occupational therapists.

The following MDHHS employees also have a legal mandate to report suspected child abuse or neglect:

1. Eligibility specialists.
2. Family independence manager or specialists. -
3. Social services specialists.
4. Social work specialists.
5. Social work specialist managers.
6. Welfare services specialists.

STANDARDS

Reporting Procedure

1. Step 1 – Immediate Verbal Report

- a. Immediately (within the same working day), call Centralized Intake for Abuse and Neglect at:
 1. 1-855-444-3911 (24/7)
- b. Provide all known information, including:

1. Child's name, age, address
 2. Parent(s)/guardian(s) information
 3. Nature of suspected abuse or neglect
 4. Name of alleged perpetrator (if known)
 5. Your relationship to the child and contact information
 6. Any immediate safety concerns
 - c. If the child is in immediate danger, call 911 first, then make the CPS report.
2. **Step 2 – Written Report (Within 72 Hours)**
 - a. Complete a DHS-3200 form ("Report of Actual or Suspected Child Abuse or Neglect")
 1. Available at: <https://www.michigan.gov/mdhhs> Send to:
 - i. Centralized Intake, via fax: (517) 241-0868
 - ii. or via MiBridges secure upload, if applicable
 2. Keep a copy for agency records (secured, confidential)
3. **Step 3 – Notify Supervisor**
 - a. Immediately inform your supervisor or clinical director that a report has been filed (without disclosing unnecessary details).
 - b. The supervisor may provide consultation but cannot override the reporter's obligation to report.
4. Documentation should be entered in the clinical record noting:
 - a. Date/time of verbal report
 - b. Confirmation of DHS-3200 submission
 - c. CPS intake worker's name (if provided)
 - d. Safety steps taken

Confidentiality and Protection

1. Reporter identity is confidential by law-MCL 722.625
2. Reporters acting in good faith are immune from civil or criminal liability- MCL 722.625
3. Retaliation against a reporting employee is not allowed.

Documentation Requirements

1. A copy of the DHS-3200 form and any related documentation must be maintained in a confidential file separate from the clinical record.
2. Documentation must include:
 - a. Date/time of oral report
 - b. Name of CPS intake worker (if available)
 - c. Date/time of written report submission
 - d. Any follow-up actions taken

Training and Quality Monitoring

1. All new employees must complete mandatory reporter training during onboarding.
2. Annual refresher training required.
3. Compliance audits should verify:

- a. Timeliness and completeness of reports
- b. DHS-3200 submission logs
- c. Training records for all staff

Non-Retaliation

1. No employee shall be retaliated against for making a good faith report of suspected abuse or neglect.

Special Considerations

1. If abuse involves agency personnel, report directly to CPS and agency administration immediately.
2. In joint custody or treatment situations, do not contact parents before reporting if doing so may increase risk to the child.
3. Collaborate with CPS and law enforcement as requested; do not conduct your own investigation.

Supervisory and Administrative Oversight

1. Supervisors must ensure that staff understand their reporting obligations.
2. The Quality and Compliance Department of organizations are expected to conduct periodic audits to ensure compliance with the policy and requirement.
3. Any failure to report suspected abuse or neglect may result in disciplinary action, and may carry legal consequences under Michigan law.

Review and Revision

1. This policy will be reviewed annually and updated as needed to reflect changes in law or organizational practices.

QUALITY ASSURANCE/IMPROVEMENT

DWIHN shall review and monitor contractor adherence to this policy as one element in its network management program, risk management program, and Quality Assessment/Performance Improvement Program (QAPI) Work-plan.

The quality improvement programs of Network Providers must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

COMPLIANCE WITH ALL APPLICABLE LAWS

DWIHN staff, Contracted Network Providers, and their subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

LEGAL AUTHORITY

1. Michigan Department of Health and Human Services Medicaid Provider Manual (in effect, and as as amended)
2. Medicaid Managed Specialty Supports and Services Concurrent 1915(b)/(c) Waiver Program (PIHP/ CMHSP contracts in effect, and as amended)
3. Michigan Child Protection Law, **MCL 722.621–722.638**
4. Michigan Department of Health and Human Services (MDHHS)
5. DHS-3200 Form and Instructions: <https://www.michigan.gov/mdhhs>
6. MDHHS Guide to Reporting: <https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/>

RELATED POLICIES AND PROCEDURES

None

CLINICAL POLICY

NO

INTERNAL/EXTERNAL POLICY

INTERNAL, EXTERNAL

Attachments

[MR_Guide_to_Detailed_Reporting31419.pdf](#)

[Report of Actual or Suspected Child Abuse or Neglect.docx](#)

Approval Signatures

Step Description	Approver	Date
Operational Review	Shama Faheem: Chief Medical Officer	Pending
Operational Review	Yolanda Turner: Vice President Of Legal Affairs	Pending
Operational Review	Stacie Durant: Vice President Of Finance	Pending
Operational Review	April Siebert: Director of Quality Improvement	Pending
Operational Review	Melissa Moody: Vice President Of Clinical Operations	Pending
Operational Review	Michele Vasconcellos: Director of Customer Service	Pending
Operational Review	Jody Connally: Vice President Of Human Resources	11/2025
Operational Review	Rai Williams: Director of Contract Management	11/2025
Operational Review	Manny Singla: Deputy Chief Executive Officer	11/2025

Operational Review	Brooke Blackwell: Vice President Of Governmental Affairs	11/2025
NCQA Committee	Allison Smith: Director of Strategic Operations	11/2025
NCQA Committee	Tania Greason: Quality Administrator	11/2025
NCQA Committee	Justin Zeller: Project Manager	11/2025
NCQA Committee	Margaret Keyes-Howard: Strategic Planning Administrator	11/2025
Unit Review and Approval	Sheree Jackson: Vice President Of Compliance	11/2025

Applicability

Detroit Wayne Integrated Health Network

Standards

No standards are associated with this document

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