

# Mandatory Reporting Requirements: Children Minnesota

*Last Updated: April 2023*

Question	Answer
Who is required to report?	<ul style="list-style-type: none"> <li>• A professional or professional's delegate who is engaged in the practice of the healing arts, social services (including employee assistance counseling and the provision of guardian ad litem and parenting time expeditor services), hospital administration, psychological or psychiatric treatment, child care, education, correctional supervision, probation and correctional services, or law enforcement; or</li> <li>• Employed as a member of the clergy and received the information while engaged in ministerial duties, provided that a member of the clergy is not required to report information that is otherwise privileged (from, for example, a confession).</li> <li>• If the child's parent, guardian, or other person responsible for the child's care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care, the parent, guardian, or caretaker, or a person mandated to report, has a duty to report if a lack of medical care may cause serious danger to the child's health.</li> <li>• A licensing board or other entity whose licensees perform work within a school facility, upon receiving a complaint of alleged maltreatment, shall report the alleged maltreatment to the commissioner of education.</li> </ul>
When is a report required and where does it go?	<p><b>When is a report required?</b></p> <ul style="list-style-type: none"> <li>• A person who knows or has reason to believe a child is being maltreated, or has been maltreated within the preceding three years.</li> <li>• A mandated reporter who knows or has reason to believe that a woman is pregnant and has used a controlled substance for non-medical purpose during the pregnancy or has consumed alcoholic beverages during the pregnancy in a way that is habitual or excessive. Health care and social service professionals need not report a woman's use or consumption of tetrahydrocannabinol or alcohol during pregnancy if the professional is providing the woman with prenatal care or other health care services.</li> </ul> <p><b>Where does it go?</b></p> <ul style="list-style-type: none"> <li>• Depending upon the location of the alleged abuse, the Department of Human Services, the Department of Education, the local welfare agency, a health or corrections agency receiving a report of abuse, the police department, the county sheriff, the tribal social services agency, tribal police department, or other law enforcement agency may be responsible for the investigation.</li> <li>• A list of local welfare agencies can be found at: <a href="http://mn.gov/dhs/people-we-serve/children-and-families/services/child-protection/contact-us/index.jsp">http://mn.gov/dhs/people-we-serve/children-and-families/services/child-protection/contact-us/index.jsp</a>.</li> <li>• A person mandated to report physical or sexual child abuse or neglect occurring within a licensed facility shall report the information to the agency responsible for licensing the facility or a non-licensed personal care provider organization.</li> </ul>

- If a mandated reporter knows or has reason to believe that a child has died as a result of neglect or physical or sexual abuse, the person shall report that information to the appropriate medical examiner or coroner instead of the local welfare agency, police department, or county sheriff.

What definitions are important to know?

- **“Egregious Harm”** means the infliction of bodily harm to a child or neglect of a child which demonstrates a grossly inadequate ability to provide minimally adequate parental care.
- **“Neglect”** means the commission or omission of any of the acts specified under the clauses below, other than by accidental means:
  - failure by a person responsible for a child’s care to supply a child with necessary food, clothing, shelter, health, medical, or other care required for the child’s physical or mental health when reasonably able to do so;
  - failure to protect a child from conditions or actions that seriously endanger the child’s physical or mental health when reasonably able to do so, including a growth delay, which may be referred to as a failure to thrive, that has been diagnosed by a physician and is due to parental neglect;
  - failure to provide for necessary supervision or child care arrangements appropriate for a child after considering factors as the child’s age, mental ability, physical condition, length of absence, or environment, when the child is unable to care for the child’s own basic needs or safety, or the basic needs or safety of another child in their care;
  - failure to ensure that the child is educated, which does not include a parent’s refusal to provide the parent’s child with sympathomimetic medications;
  - nothing in this section shall be construed to mean that a child is neglected solely because the child’s parent, guardian, or other person responsible for the child’s care in good faith selects and depends upon spiritual means or prayer for treatment or care of disease or remedial care of the child in lieu of medical care; except that a parent, guardian, or caretaker, or a person mandated to report, has a duty to report if a lack of medical care may cause serious danger to the child’s health. This section does not impose upon persons, not otherwise legally responsible for providing a child with necessary food, clothing, shelter, education, or medical care, a duty to provide that care;
  - prenatal exposure to a controlled substance used by the mother for a nonmedical purpose, as evidenced by withdrawal symptoms in the child at birth, results of a toxicology test performed on the mother at delivery or the child at birth, medical effects or developmental delays during the child’s first year of life that medically indicate prenatal exposure to a controlled substance, or the presence of a fetal alcohol spectrum disorder;
  - medical neglect;
  - chronic and severe use of alcohol or a controlled substance by a parent or person responsible for the care of the child that adversely affects the child’s basic needs and safety; or
  - emotional harm from a pattern of behavior which contributes to impaired emotional functioning of the child which may be demonstrated by a substantial and observable effect in the child’s behavior, emotional response, or cognition that is not within the normal range for the child’s age and stage of development, with due regard to the child’s culture.
- this chapter does not impose upon persons not otherwise legally responsible for providing a child with necessary food, clothing, shelter, education, or medical care a duty to provide that care

- **“Maltreatment”** means (1) egregious harm (as defined above), (2) neglect (as defined above), (3) physical abuse (as defined below), (4) sexual abuse (as defined below), (5) substantial child endangerment (under subd. 22), (6) threatened injury (under subd. 23), (7) mental injury (under subd. 13), or (8) maltreatment of a child in a facility.
- **“Person responsible for the child’s care”** means (1) an individual functioning within the family unit and having responsibilities for the care of the child such as a parent, guardian, or other person having similar care responsibilities, or (2) an individual functioning outside the family unit and having responsibilities for the care of the child such as a teacher, school administrator, other school employees or agents, or other lawful custodian of a child having either full-time or short-term care responsibilities including, but not limited to, day care, babysitting whether paid or unpaid, counseling, teaching, and coaching.
- **“Physical abuse”** means any physical injury, mental injury, or threatened injury, inflicted by a person responsible for the child’s care on a child other than by accidental means, or any physical or mental injury that cannot reasonably be explained by the child’s history of injuries, or any aversive or deprivation procedures, or regulated interventions, that have not been authorized per the statute. Abuse does not include reasonable and moderate physical discipline of a child administered by a parent or legal guardian which does not result in an injury. Abuse does not include the use of reasonable force by a teacher, principal, or school employee. Actions which are not reasonable and moderate include, but are not limited to, any of the following:
  - throwing, kicking, burning, biting, or cutting a child;
  - striking a child with a closed fist;
  - shaking a child under age three;
  - striking or other actions which result in any non-accidental injury to a child under 18 months of age;
  - unreasonable interference with a child’s breathing;
  - threatening a child with a weapon;
  - striking a child under age one on the face or head;
  - striking a child who is at least age one but under age four on the face or head, which results in an injury;
  - purposely giving a child poison, alcohol, or dangerous, harmful, or controlled substances which were not prescribed for the child by a practitioner, in order to control or punish the child; or other substances that substantially affect the child’s behavior, motor coordination, or judgment or that results in sickness or internal injury, or subjects the child to medical procedures that would be unnecessary if the child were not exposed to the substances;
  - unreasonable physical confinement or restraint, including, but not limited to, tying, caging, or chaining; or
  - in a school facility or school zone, an act by a person responsible for the child’s care that is corporal punishment.
- **“Sexual abuse”** means the subjection of a child by a person responsible for the child’s care, by a person who has a significant relationship to the child, or by a person in a current or recent position of authority, to any act which constitutes criminal sexual conduct or sexual extortion. Sexual abuse also includes any act which involves a child that constitutes a violation of prostitution offenses. Sexual abuse includes all reports of known or suspected child sex trafficking involving a child who is identified as a victim of sex trafficking.

	<p>Sexual abuse includes child sex trafficking. Sexual abuse includes threatened sexual abuse, which includes the status of a parent or household member who has committed a violation that requires registration as an offender.</p>
<p>What timing and procedural requirements apply to reports?</p>	<ul style="list-style-type: none"> <li>• An oral report (by telephone or otherwise) must be made immediately (as soon as possible but in no event longer than 24 hours).</li> <li>• Within 72 hours of making an oral report (exclusive of weekends and holidays), the reporter must send a written report.</li> </ul>
<p>What information must a report include?</p>	<ul style="list-style-type: none"> <li>• A report, whether oral or written, should contain sufficient information to identify: <ul style="list-style-type: none"> <li>• The child;</li> <li>• Any person believed to be responsible for the maltreatment of the child if the person is known;</li> <li>• The nature and extent of the maltreatment; and</li> <li>• The name and address of the reporter.</li> </ul> </li> <li>• A Resource Guide for Mandated Reporters may be accessed at: <a href="https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2917-ENG">https://edocs.dhs.state.mn.us/lfserver/Public/DHS-2917-ENG</a></li> <li>• The Minnesota Child Maltreatment Intake, Screening and Response Path Guidelines may be accessed at: <a href="https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5144-ENG">https://edocs.dhs.state.mn.us/lfserver/Public/DHS-5144-ENG</a></li> </ul>
<p>Anything else I should know?</p>	<ul style="list-style-type: none"> <li>• Any person <i>may</i> voluntarily report to the local welfare agency, agency responsible for assessing or investigating the report, police department, county sheriff, tribal social services agency, or tribal police department if the person knows, has reason to believe, or suspects a child is being or has been maltreated.</li> <li>• Failure to Report: <ul style="list-style-type: none"> <li>• If a mandatory reporter knows or has reason to believe that a child is or has within the preceding three years been maltreated, and fails to report this, the person is guilty of a misdemeanor.</li> <li>• If a mandatory reporter knows or has reason to believe that two or more children not related to the perpetrator have been maltreated, by the same offender within the preceding ten years, and fails to report this, the person is guilty of a gross misdemeanor.</li> <li>• If a parent, guardian, or caretaker of a child who knows or reasonably should know that the child's health is in serious danger and who fails to report this as required is guilty of a gross misdemeanor if the child suffers substantial or great bodily harm because of the lack of medical care. If the child dies because of the lack of medical care, the person is guilty of a felony and may be sentenced to imprisonment for not more than two years and/or to payment of a fine of not more than \$4,000.</li> </ul> </li> <li>• The following persons are immune from any civil or criminal liability that otherwise might result from their actions, if they are acting in good faith: (1) a person making a voluntary or mandatory report under this chapter or assisting in an assessment of maltreatment, (2) any person with a duty to report or a supervisor employed by a local welfare agency, the commissioner of an agency responsible for operating or supervising a licensed or unlicensed day care facility, residential facility, agency, hospital, sanitarium, or other facility or institution required to be licensed or certified, or a school, or a nonlicensed personal care provider organization and (3) a public or private school, facility, or the employee of any public or private school or facility who permits access by a local welfare agency, the Department of Education, or a local law</li> </ul>

- enforcement agency and assists in an investigation or assessment of alleged maltreatment.
- A person who is a supervisor or a person with a duty to report employed by a local welfare agency, the commissioner of human services, or the commissioner of education complying with their duties to report or any related rule or provision of law is immune from any civil or criminal liability that might otherwise result from the person's actions, if the person is (1) acting in good faith and exercising due care, or (2) acting in good faith and following the information collection procedures.
  - Any physician or other medical personnel administering a toxicology test to determine (i) the presence of a controlled substance in a pregnant woman, (ii) in a woman within eight hours after delivery to determine whether there is evidence that she has ingested a controlled substance if the woman has obstetrical complications that are a medical indication of possible use of a controlled substance for a nonmedical purpose, or (iii) in a child at birth or during the first month of life to determine whether the mother used a controlled substance for a nonmedical purpose during pregnancy, is immune from civil or criminal liability arising from administration of the test, if the physician ordering the test believes in good faith that the test is required under this law and the test is administered in accordance with an established protocol and reasonable medical practice.
  - Immunity does not apply to any person for failure to make a required report or for committing maltreatment.
  - Any person who knowingly or recklessly makes a false report shall be liable in a civil suit for any actual damages suffered by the person or persons so reported and for any punitive damages set by the court or jury, plus costs and reasonable attorney fees.

Statutory  
citation(s):

- Minn. St. §§ 260E.03, 260E.06, 260E.08, 260E.09, 260E.14, 260E.31, 260E.32, 260E.34