

Mandatory Reporting RESOURCING

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Road Map

1. A Look at the Law in Montana
2. Reporting in Practice
3. Reframe – RESOURCING
4. Discussion



"Marcia, do we have anyone in legal who's fluent in both 'Mumbo' and 'Jumbo'?"



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Mandatory Reporters

Professionals required to report include the following:

- Physicians, residents, interns, **members of hospital staffs**, nurses, osteopaths, chiropractors, podiatrists, medical examiners, coroners, dentists, optometrists, or **any other health professionals**
- Teachers, school officials, or **school employees** who work during regular school hours
- Operators or employees of any registered or licensed daycare or substitute care facility, or operators or employees of childcare facilities
- Mental health professionals or **social workers**
- Religious healers
- Foster care, residential, or institutional workers
- Members of the clergy, as defined in § 15-6-201(2)(b)
- Guardians ad litem or court-appointed advocates authorized to investigate a report
- Peace officers or other law enforcement officials
- Child protection specialists
- **Employees of entities that contract with the Department of Public Health and Human Services to provide direct services to children**



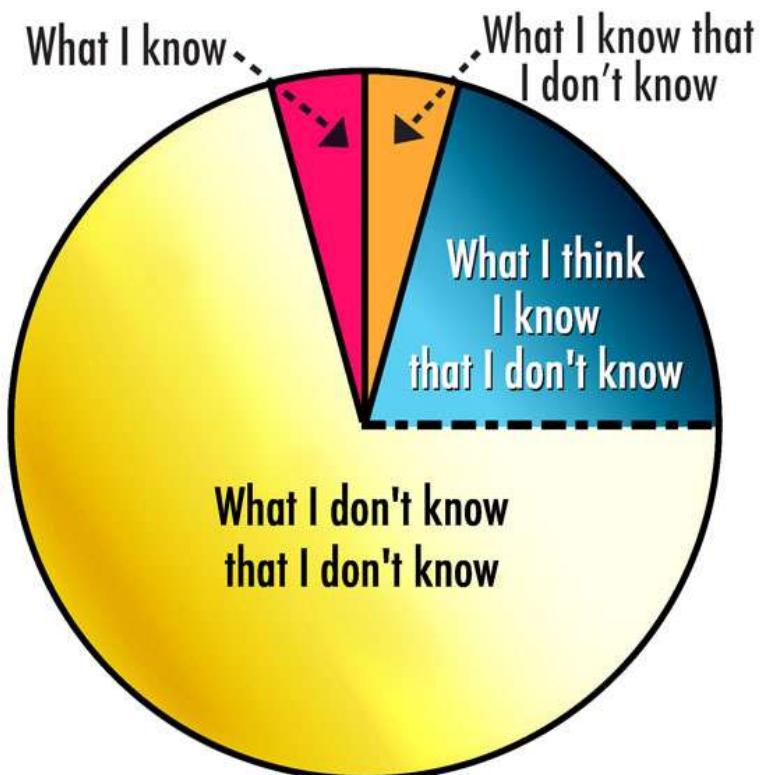
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Quiz!

T/F Mandatory Reporters only have to report information they receive in their official or professional capacity?

TRUE!

- Knows or has **reasonable cause to suspect**, as a result of information received in their **professional or official capacity**, that a child is abused or neglected.
- A health-care professional involved in the delivery or care of an infant **knows that the infant is affected by a dangerous drug**.



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Quiz!



"Surely you can tell me your secret identity."

- **T/F** Physician/Patient Privilege protects a provider from reporting.
 - **False**
- **T/F** A member of the clergy or a priest is **not** required to make a report if the communication is deemed confidential by their established church practice.
 - **True**



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Centralized Intake



**To report child abuse or neglect, call
1 (866) 820-5437.**

1. Your name
2. Contact info
3. Relationship to family
4. Concerns and how you know.
5. Names, dates of birth, address of the family, and who lives in the home.
6. School or childcare of the child(ren).



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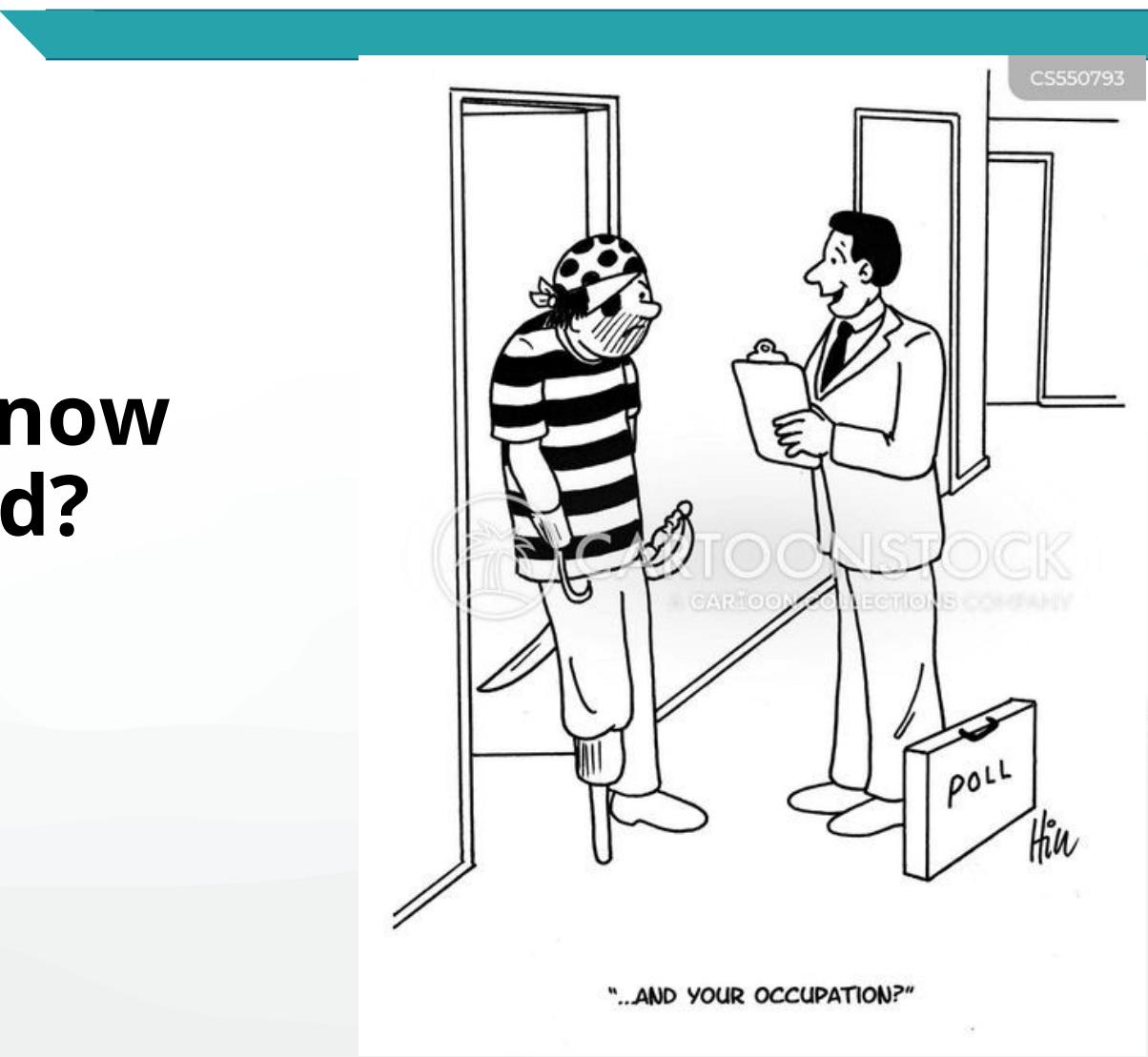
Priority

1. Information Only
2. Request for Service
3. Investigation



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Will They Know I Reported?



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CIRCLE OF TRUST



© REDANDHOWLING *

Therapeutic Alliance



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Transparency Statement

- “Anything you tell me is protected by HIPAA and confidentiality, and in my position, but I am a mandatory reporter...Sometimes people feel nervous about that...Can I tell you what that *really* means?”
- “My job is to support you and help you through any struggles that come up, so if we get to a point where I am concerned, we will talk about it and work through it together.”

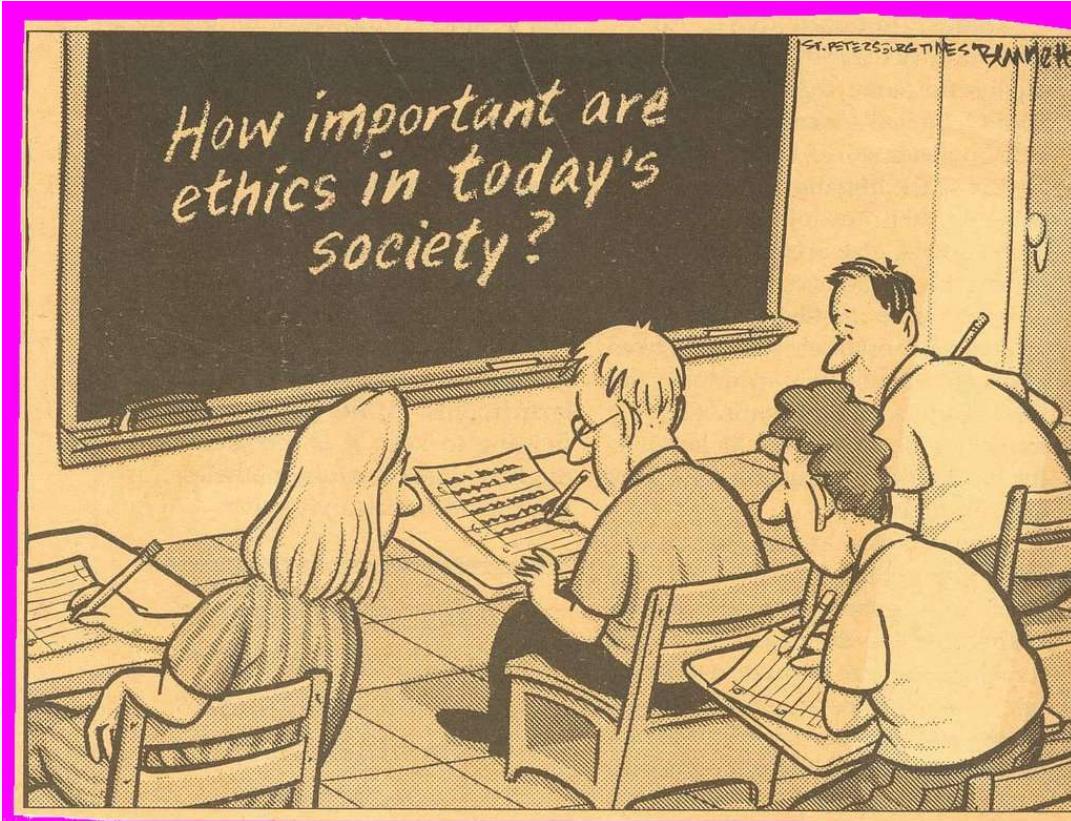
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“You couldn’t ask for a more honest friend.”



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The law is black and white...

And we work in the gray area.



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- Partnership
- Acceptance
- Compassion
- Empowerment



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*“I'd invite you in, but my
life's a mess.”*

Unconditional Positive Regard



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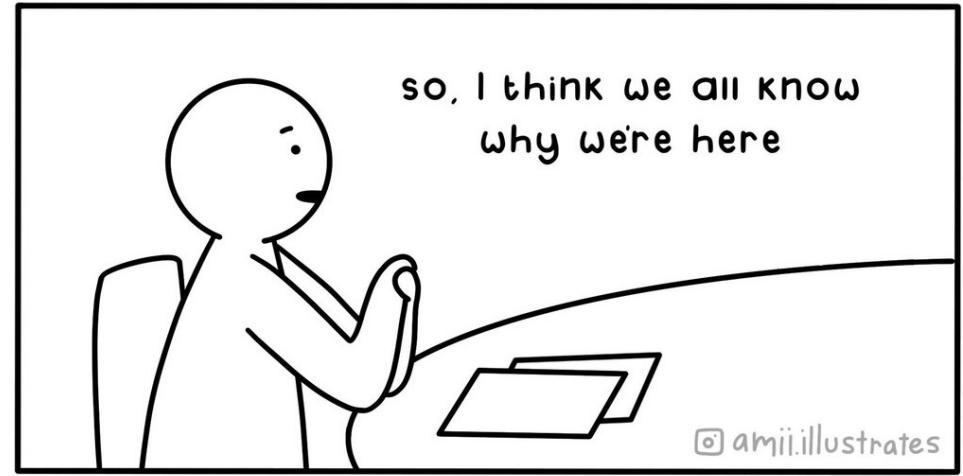
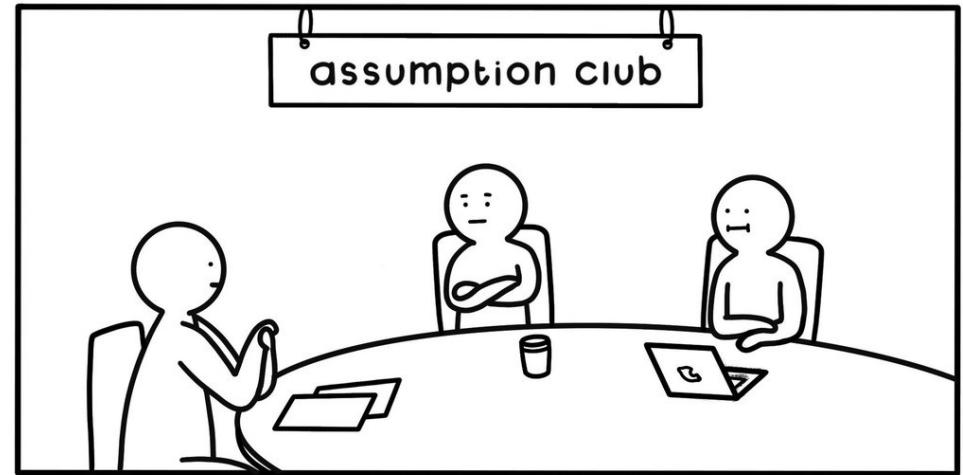
Exceptions

- There would be more danger – or risk – if the individual knew you were going to report the incident.
 - Risk of Fleeing
 - Retaliation
- Historical evidence
- In cases of IMMEDIATE danger, call 911 first, then Centralized Intake.



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Mental Filter



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REMINDER: What is MI?

- A way of talking with people about *change and growth* that strengthens *their* motivation and commitment.
- Flows like a normal conversation – It's not something being done **to** a patient.
- Compassionate attention to the person while watching/listening for change and growth
- MI is a way of doing what you already do.
- It is person-centered.
- It is **not** primarily seeing deficits, diagnoses or problems to be solved.
- It sees a person with strengths, hopes, and relationships who wants to be heard, valued, and viewed as competent.



Disclosures

- **Partnership –**

- Reflection and Affirmation
 - “You love your kids so much. It sounds like you are really worried about how _____ is affecting them.”
- Open Ended Question
 - “What do you think we can do about _____?”

- **Acceptance –**

- “Parenting is so hard. I wonder what you learned about parenting in those situations from your own parents?”
 - Active Listening
- “Is there anything you would want to do differently than your parents in this?”



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Spirit of MI and Disclosures

- **Compassion –**

- Affirm Resilience, Validate Emotions
 - "You have been through so much and somehow you are still here and fighting to make life better for you and your kids. How have you done that?"
 - "Anyone would feel _____ in this situation."

- **Empower –**

- "You said that you want to _____. (Or, I know _____ is important to you.)"
- "What do you think we can do about _____ that is in line with the parent you want to be?"
- "Can I tell you what I know about _____?"
 - Ask, Offer, Ask



Skeptical?



- If someone has disclosed abuse...you have to report.
- So what does it hurt to try?
- Protect the integrity of your professional...even if it's for the next helping professional.



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Suicide

- Same Process
- Transparency Statement
- Spirit of Motivational Interviewing
- Active Listening
- Warm Hand Off
- [PROSPER Together - Suicide Prevention & Mental Health Training](#)



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Resourcing



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Welfare Checks

- Inability to reach them that is outside their norm.
 - Follow up later with a caring contact or phone call
 - [Now Matters Now](#)
 - Make sure your clients know about 988.



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Duty to Warn

- A therapist's obligation to breach confidentiality to warn individuals at risk of harm.



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Be Direct

- With professionals AND patients/clients.
- When we go outside our lane, messes happen!



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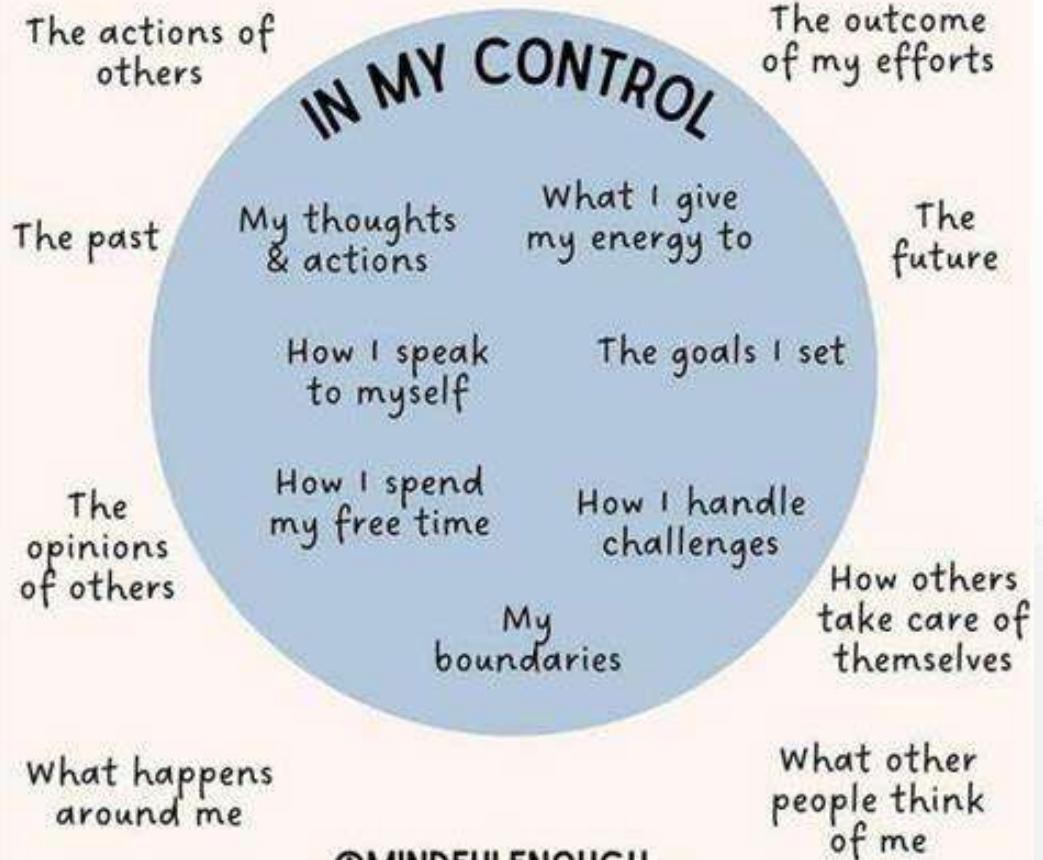
- Do what you can do
- And trust that others are doing what they can do
- Even if it doesn't feel like it...



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System Break Downs

OUT OF MY CONTROL



@MINDFULENOUGH__



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“Be the
change
you wish
to see
in the
world.”

-Mahatma Gandhi



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Break Out!

- Without disclosing PHI - Have you had a situation where you had to call Centralized Intake or Law Enforcement?
- What approach did you take?
- Did it impact your rapport with the patient?
- Is there anything you would do differently today?



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Up Next

Wednesday, February 4th 9:00-10:00

Session 7: Tools Therapists Want You to Have!

There are several basic behavioral interventions that anyone can do. In this session, we will build a toolbox of skills and psychoeducation that can support the health of your patients and build your confidence when working with complex health needs.

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