

Mandatory Reporting Requirements: Children Iowa

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Question	Answer
Who is required to report?	<ul style="list-style-type: none"> • Every health practitioner who, in the scope of professional practice, examines, attends, or treats a child, including a health practitioner who receives information confirming that a child is infected with a sexually transmitted disease. A health practitioner includes: <ul style="list-style-type: none"> • Licensed physician and surgeon; • Osteopathic physician and surgeon; • Dentist; • Optometrist; • Podiatric physician; • Chiropractor; • A resident or intern in any of such professions; • A licensed dental hygienist; • A registered nurse or licensed practical nurse; • A physician assistant; and • An emergency medical care provider. • Any of the following persons who, in the scope of professional practice or their employment responsibilities, examines, attends, counsels, or treats a child : <ul style="list-style-type: none"> • A social worker; • An employee or operator of a public or private health care facility; • A certified psychologist; • A licensed school employee, certified para-educator, holder of a coaching authorization issued by the state, or an instructor employed by a community college; • An employee or operator of a licensed child care center, registered child development home, Head Start program, Family Development and Self-Sufficiency Grant Program regulated by the state, or Healthy Opportunities for Parents to Experience Success-Healthy Families Iowa Program; • An employee or operator of a substance abuse program or facility licensed by the state; • An employee of a Department of Human Services institution regulated by the state; • An employee or operator of a juvenile detention or juvenile shelter care facility approved by the state; • An employee or operator of a foster care facility licensed or approved by the state; • An employee or operator of a mental health center; • A peace officer; • A counselor or mental health professional (as defined below); and • An employee or operator of a provider of services to children funded under a federally-approved

	<p>medical assistance home and community-based services waiver.</p> <ul style="list-style-type: none"> • An employee, operator, owner, or other person who performs duties for a children’s residential facility certified under chapter 237C • A massage therapist licensed pursuant to chapter 152C.
<p>When is a report required and where does it go?</p>	<p>When is a report required?</p> <ul style="list-style-type: none"> • Reasonable belief that a child has suffered abuse. • If a health practitioner involved in the delivery or care of a newborn or infant discovers in the newborn or infant physical or behavioral symptoms that are consistent with the effects of prenatal drug exposure or a fetal alcohol spectrum disorder, the health practitioner shall report such information to the department in a manner prescribed by rule of the department. <p>Where does it go?</p> <ul style="list-style-type: none"> • Mandatory reports shall be made both orally and in writing. Permissive reports may be made orally, in writing or both. • Mandatory oral reports shall be made by telephone or otherwise to the Department of Human Services (Child Abuse Hotline 1-800-362-2178). If the person making the report has reason to believe that immediate protection for the child is advisable, that person shall also make an oral report to an appropriate law enforcement agency. • Permissive reports may be made to the Department of Human Services, the county attorney, or a law enforcement agency.
<p>What definitions are important to know?</p>	<ul style="list-style-type: none"> • “Child” means any person under the age of 18 years. • “Child abuse” or “abuse” means: <ul style="list-style-type: none"> • Any non-accidental physical injury, or injury which is at variance with the history given of it, suffered by a child as the result of the acts or omissions of a person responsible for the care of the child; • Any mental injury to a child’s intellectual or psychological capacity as evidenced by an observable and substantial impairment in the child’s ability to function within the child’s normal range of performance and behavior as the result of the acts or omissions of a person responsible for the care of the child, if the impairment is diagnosed and confirmed by a licensed physician or qualified mental health professional as defined in section 622.1; • The commission of a sexual offense with or to a child pursuant to chapter 709 (sexual abuse), section 726.2 (incest), or section 728.12, subsection 1 (sexual exploitation of a minor), as a result of the acts or omissions of the person responsible for the care of the child or of a person who is fourteen years of age or older and resides in a home with the child; • The failure on the part of a person responsible for the care of a child to provide for the adequate food, shelter, clothing or other care necessary for the child’s health and welfare when financially able to do so or when offered financial or other reasonable means to do so and the failure occurred within five years of a report (Note that for the purposes of this part, failure to provide for the adequate supervision of a child means the person failed to provide proper supervision of a child

that a reasonable and prudent person would exercise under similar facts and circumstances and the failure resulted in direct harm or created a risk of harm to the child. Additionally, a parent or guardian legitimately practicing religious beliefs who does not provide specified medical treatment for a child for that reason alone shall not be considered abusing the child, however this provision shall not preclude a court from ordering that medical service be provided to the child where the child's health requires it.);

- The acts or omissions of a person responsible for the care of a child which allow, permit, or encourage the child to engage in acts prohibited pursuant to section 725.1 (prostitution);
- An illegal drug is present in a child's body as a direct and foreseeable consequence of the acts or omissions of the person responsible for the care of the child;
- The person responsible for the care of a child has, in the presence of the child, unlawfully uses, possesses, manufactures, cultivates, or distributes a dangerous substance, as defined in section 232.96A, subsection 16, paragraph "e", or knowingly allows such use, possession, manufacture, cultivation, or distribution by another person in the presence of a child; possesses a product with the intent to use the product as a precursor or an intermediary to a dangerous substance in the presence of a child; or unlawfully uses, possesses, manufactures, cultivates, or distributes a dangerous substance specified in 232.96A, subsection 16, paragraph "f", subparagraph (1), (2), or (3), in a child's home, on the premises, or in a motor vehicle located on the premises. and the incident occurred within five years of a report to the department
- The commission of bestiality in the presence of a minor by a person who resides in a home with a child, as a result of the acts or omissions of a person responsible for the care of the child;
- The person responsible for the care of a child knowingly allowing a person custody or control of, or unsupervised access to a child under the age of fourteen or a child with a physical or mental disability, after knowing the person is required to register or is on the sex offender registry under chapter 692A. (Note, this section does not apply to (i) child living with a parent or guardian who is a sex offender required to register or on the sex offender registry under chapter 692A, (ii) A child living with a parent or guardian who is married to and living with a sex offender required to register or on the sex offender registry under chapter 692A, or (iii) a child who is a sex offender required to register or on the sex offender registry under chapter 692A who is living with the child's parent, guardian, or foster parent and is also living with the child to whom access was allowed.);
- The person responsible for the care of the child has knowingly allowed the child access to obscene material as defined in section 728.1 or has knowingly disseminated or exhibited such material to the child; or
- The recruitment, harboring, transportation, provision, obtaining, patronizing, or soliciting of a child for the purpose of commercial sexual activity as defined in section 710A.1.
- **"Mental health professional"** means a person who:
 - Holds at least a master's degree in a mental health field, including, but not limited to, psychology, counseling, nursing, or social work; or is licensed by the state to practice medicine;
 - Holds a license to practice in the appropriate profession; and
 - Has at least two years of post-degree experience, supervised by a mental health professional, in assessing mental health problems and needs of individuals used in providing appropriate mental

	<p>health services for those individuals.</p> <ul style="list-style-type: none"> • “Person responsible for the care of a child” means: <ul style="list-style-type: none"> • A parent, guardian, or foster parent; • A relative or any other person with whom the child resides and who assumes care or supervision of the child, without reference to the length of time or continuity of such residence; • An employee or agent of any public or private facility providing care for a child, including an institution, hospital, health care facility, group home, mental health center, residential treatment center, shelter care facility, detention center, or child care facility; • Any person providing care for a child, but with whom the child does not reside, without reference to the duration of the care.
<p>What timing and procedural requirements apply to reports?</p>	<ul style="list-style-type: none"> • Reports by mandatory reporters must be made both orally and in writing. Reports made by permissive reporters may be oral, written or both. • Oral reports shall be made within 24 hours. Written reports shall be made within 48 hours after the oral report.
<p>What information must a report include?</p>	<ul style="list-style-type: none"> • The oral and written reports shall contain as much of the following information as possible: <ul style="list-style-type: none"> • The name and home address of the child, the child’s parents, or other people believed to be responsible for the child’s care; • The child’s present whereabouts if not the same as the parents or other person’s home address; • The child’s age; • The nature and extent of the child’s injuries, including any evidence of previous injuries; • The name, age and condition of other children in the same home; • Any other information which the person making the report believes might be helpful in establishing the cause of the injury to the child, the identity of the person or persons responsible for the injury, or in providing assistance to the child; and • The name and address of the person making the report.
<p>Anything else I should know?</p>	<ul style="list-style-type: none"> • The employer or supervisor of a person who is a mandatory or permissive reporter shall not apply a policy, work rule, or other requirement that interferes with the person making a report of child abuse. • A person participating in good faith in the making of a report, photographs, or X-rays, or in the performance of a medically relevant test pursuant to this chapter, or aiding and assisting in an assessment of a child abuse report, shall have immunity from any liability, civil or criminal, which might otherwise be incurred or imposed. The person shall have the same immunity with respect to participation in good faith in any judicial proceeding resulting from the report or relating to the subject matter of the report. • An employer shall not take retaliatory action against an employee as a reprisal for the employee’s participation in good faith in making a report, photograph, or X-ray, or in the performance of a medically relevant test pursuant to this chapter, or aiding and assisting in an assessment of a child abuse report pursuant to section 232.71B. This section does not apply to a disclosure of information that is prohibited by statute. • Any person, official, agency, or institution required by this chapter to report a suspected case of child abuse who knowingly and willfully fails to do so is guilty of a simple misdemeanor.

- Any person, official, agency, or institution required by section 232.69 to report a suspected case of child abuse who knowingly fails to do so or who knowingly interferes with the making of such a report in violation of section 232.70 is civilly liable for the damages proximately caused by such failure or interference.
- A person who reports or causes to be reported to the department of human services false information regarding an alleged act of child abuse, knowing that the information is false or that the act did not occur, commits a simple misdemeanor.
- A person who is required to report suspected child abuse may take or cause to be taken, at public expense, photographs, X rays, or other physical examinations or tests of a child which would provide medical indication of allegations arising from an assessment. A health practitioner may, if medically indicated, cause to be performed radiological examination, physical examination, or other medical tests of the child. A person who takes any photographs or X rays or performs physical examinations or other tests pursuant to this section shall notify the department that the photographs or X rays have been taken or the examinations or other tests have been performed. The person who made notification shall retain the photographs or X rays or examination or test findings for a reasonable time following the notification. Whenever a member of the staff of a medical or other private or public institution, agency or facility, that person shall immediately notify the person in charge of the institution, agency, or facility or that person's designated delegate of the need for photographs or X rays or examinations or other tests
- If a health practitioner discovers in a child physical or behavioral symptoms of the effects of exposure to cocaine, heroin, amphetamine, methamphetamine, or other illegal drugs, or combinations or derivatives thereof, which were not prescribed by a health practitioner, or if the health practitioner has determined through examination of the natural mother of the child that the child was exposed in utero, the health practitioner may perform or cause to be performed a medically relevant test, as defined in section 232.73, on the child. The practitioner shall report any positive results of such a test on the child to the department. A positive test result obtained prior to the birth of a child shall not be used for the criminal prosecution of a parent for acts and omissions resulting in intrauterine exposure of the child to an illegal drug.

Statutory citation(s):

- Iowa Code §§ 232.68, 232.69, 232.70, 232.73, 232.73A, 232.75., 232.77