

	<b>INDIANA DEPARTMENT OF CHILD SERVICES</b> <b>CHILD WELFARE POLICY</b>	
	<b>Chapter 4: Assessment</b> <b>Section 14: Examining and Photographing a Child and/or Trauma</b>	
	<b>Effective Date:</b> July 1, 2022	<b>Version:</b> 3

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## POLICY OVERVIEW

Examining and photographing a child and/or trauma is necessary to confirm alleged or suspected bodily injuries caused by Child Abuse and/or Neglect (CA/N). Documentation of findings is a critical piece used to complete an assessment of CA/N.

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## PROCEDURE

DCS will examine and document the child's injuries in the least intrusive manner that is sensitive to the child's age, gender, and emotional well-being in accordance with the following guidelines:

1. Notify the non-offending parent, guardian, or custodian if the child's injuries require immediate medical attention and assess their willingness to transport the child for an immediate examination by a medical professional; or

**Note:** If the non-offending parent is unable to be reached and the child needs immediate medical attention, DCS may request law enforcement agency (LEA) assistance or place an emergency call to 911.

2. Move forward with the examination and documentation of the injuries if the child does not need immediate medical attention and the injury can be readily seen on the child with minimal repositioning of clothing. See Practice Guidance for further information on observations and examinations.

DCS will not examine or photograph a child who is alleged to be sexually abused, regardless of the age of the child, including an examination or photographs of the child's private area, (i.e., child's anus, genitalia, or breasts). All allegations involving sexual abuse or trauma, requiring an examination or observation will be completed by a medical professional.

**Note:** DCS is permitted to accept and/or use LEA and medical professional's photographs of visible trauma or injury as documentation and evidence.

The FCM will:

1. Engage the child's parent, guardian, or custodian and explain the necessity of examining and photographing by telling the parent what is happening, why it is happening, and how they can help their child, unless exigent circumstances exist (see policy 4.06 Exigent Circumstances for additional information);

2. Refer the non-offending parent to obtain a medical examination for the child in situations where the injury occurred on a private area on the child's body and the child has disclosed abuse and a possible injury is indicated;

**Note:** If the parent refuses to obtain a medical examination for the child, seek supervisory input to determine whether the allegations require an examination and if court intervention is required.

3. Obtain consent from the child's parent, guardian, or custodian to examine and photograph the child if the CA/N allegations warrant such action and document the consent in the case management system;

**Note:** If consent is not obtained, seek supervisory input to determine whether the allegations require court intervention.

4. Seek a court order if consent to examine and photograph is not given and no exigent circumstances exist if it is determined that court intervention is needed after staffing with the FCM Supervisor;
5. Establish a rapport with the child by spending time talking with the child before initiating the examination or photographing;

**Note:** Ensure the child's culture, religious, and/or spiritual beliefs are always considered when examining and photographing the child.

6. Observe the child's body to determine if there are external marks (e.g., cuts, bruises, welts, burns, scratches, or sores) that may have been caused by CA/N; and communicate with the child what is happening in a logical and descriptive manner. See Practice Guidance for additional information;
7. Ask the child to explain how the injury occurred, if applicable;

**Note:** A child may be afraid to disclose an injury based on threats from the alleged perpetrator to further injure the child or a loved one if they tell. To access and document the safety of the child, photographs should be taken of the place on the child's body where the CA/N is alleged, even if the allegations are denied and/or no visible injuries are located on the child.

8. Photograph the child using the following guidelines once consent is granted (see 4.F Tool: Tips for Photographing a Child and/or Trauma):
  - a. In situations where the injury is on a nonprivate area of the child's body that can be accessed with minimal repositioning of the child's clothing:
    - i. Ask the parent or caregiver of a child under the age of three (3) and/or is nonverbal to reveal the place of alleged abuse on the child's body, or
    - ii. Ask the child who is over the age of three (3) and/or is verbal if they are comfortable displaying the injury, and if the child agrees, observe the injury.
  - b. Request assistance from the parent, guardian, or custodian when adjusting/removing the child's clothing, if deemed necessary for the examination;
  - c. Ensure an adult witness is present in the room when photographing trauma to the body of a child who is 10 years of age and older. The FCM will only remove children's clothing when necessary;

**Note:** Communicate to all witnesses of the examination that they could be required to attend and testify in a court proceeding regarding what they witnessed.

- d. In situations where the injury has occurred on the buttock or stomach area of the child's body and the child has disclosed that the abuse occurred and/or the child or another person has viewed the injury, have an adult witness present, when possible; and ask the child if they are comfortable showing the area or a partial area of the injury to be photographed and/or documented, and document if the child agrees;
  - e. The FCM may photograph the child's anus, genitalia, or breasts if injuries are unexplained and there is a concern for the child's safety, if appropriate, and in the presence of a medical professional; and
  - f. Discontinue efforts to examine or photograph the child if the child's discomfort level is too high to complete an examination and make alternate arrangements for the child to be examined and photographed by a medical professional.
9. Upload the photographs to the case management system, document the name and title of all witnesses during the examination, and label all hardcopy photographs. Make detailed notes about each injury (e.g., location, color, shape, size [using a ruler to measure or a coin to compare size] and whether open or raised). See policy 4.22 Making an Assessment Finding for additional guidance;

**Note:** All photographs and recordings taken or obtained during the assessment should be protected by handling and storing in a secure manner.

10. Refer the child for further examination by medical, dental, and mental health professionals, as needed (see policy 4.16 Medical and Psychological Examinations, Drug Screens and Substance Abuse Evaluations); and
11. Seek supervisory support, as needed, during the examination/documentation process.

The FCM Supervisor will:

1. Staff with the FCM regarding an assessment that warrants an examination but is unable to be completed. This includes but is not limited to:
  - a. The parent, guardian, or custodian refuses to provide consent for the child to be interviewed,
  - b. The parent, guardian, or custodian refuses to obtain a medical examination of the child, if deemed necessary, and/or
  - c. The child is not comfortable completing the observation.
2. Determine if court intervention is needed when the parent, guardian, or custodian refuses to provide consent to observe the child; and
3. Ensure all required documentation is entered in the case management system.

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## RELEVANT INFORMATION

### Definitions

N/A

### Forms and Tools

- [4.F Tool: Tips for Photographing a Child and/or Trauma](#)

## Related Policies

- [4.06 Exigent Circumstances for Interviewing Alleged Child Victims](#)
- [4.16 Medical and Psychological Examinations, Drug Screens, and Substance Abuse Evaluations](#)
- [4.22 Making an Assessment Finding](#)

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## LEGAL REFERENCES

- [IC 31-33-8-7: Scope of assessment by department of child services; order for access to home, school, or other place, or for mental or physical examinations; petition to interview child; order; requirements](#)
- [IC 31-33-8-3: Photographs and x-rays](#)
- [IC 31-33-10-3: Photographs, xrays, and physical medical examinations; delivery to department of child services; notice of existence](#)
- [IC 31-33-10-1 Duty to photograph, x-ray, and physically examine trauma visible on child](#)

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## PRACTICE GUIDANCE- DCS POLICY 4.14

*Practice Guidance is designed to assist DCS staff with thoughtful and practical direction on how to effectively integrate tools and social work practice into daily case management in an effort to achieve positive family and child outcomes. Practice Guidance is separate from Policy.*

### **Sensitivity During an Examination**

When a stranger observes a child's body, it can be frightening for the child. The FCM should be sensitive to the child's needs. While observing the child, it is important to be clear with the child, speaking calmly and confidently about the process. Some children may want to engage in conversation during the examination and be reassured by the FCM, while others may want to be quiet.

Parents may be reluctant to have their children examined. Their fear and reluctance may be picked up by the child and exacerbate an already anxious situation. Parents need to be told what is happening, why it is happening, and how they can help their children. The FCM should enlist the parents' assistance when removing the child's clothing. If the parents are not cooperative with an examination, FCMs should address child safety and take appropriate action.

### **Standard Precautions When Not in Presence of Medical Personnel**

To maintain the dignity of a child three (3) years of age and older, the FCM should ask a child to leave their underwear on during an examination. The front waistline of the underwear may be lowered to allow observation of the lower abdomen and upper pelvic area. The rear of the underwear may also be lowered completely to expose the buttocks to allow observation.

FCMs should not ask a child to remove their bra. The bra should be left on, and the child may shift the bra straps from side to side, to observe the areas of the chest and back directly under the straps. The FCM should never ask the child to shift their bra in such way that the breasts may be exposed.

### **Witnesses**

It is always good practice to have an adult witness present when examining a child, when possible and practical. Depending upon the circumstances, an appropriate witness may be another FCM, LEA, school personnel, or the child's parent, guardian, or custodian.

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