



FOR IMMEDIATE RELEASE

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**ACS & DOHMH ISSUE NEW GUIDANCE TO HOSPITALS MAKING CLEAR WHEN POSITIVE TOXICOLOGY TESTS OF CAREGIVERS OR NEWBORNS DO NOT WARRANT A REPORT TO THE STATE CHILD ABUSE HOTLINE**

*Guidance Aims to Reduce Unwarranted Reports of Possible Child Abuse or Neglect, Especially Involving Families of Color*

The NYC Administration for Children's Services (ACS) and the NYC Department of Health and Mental Hygiene (DOHMH) issued new guidance to hospitals citywide making clear the child abuse reporting requirements for newborns prenatally exposed to substances and their caregivers. In New York State, hospital staff, like doctors, are mandated reporters and required to report suspected child abuse and neglect to the Statewide Central Register of Child Abuse and Maltreatment (SCR). However, by law, a positive drug test of a parent and/or a newborn baby is not in itself a basis for a report of abuse or neglect. The new guidance aims to reduce unwarranted reports of possible child abuse, especially involving families of color.

"This new guidance is part of our overall work to reduce unnecessary and inappropriate child welfare involvement, especially for families of color," **said ACS Commissioner David A. Hansell.** "The bottom line is that reports to the State child abuse hotline should only be made when there is a reasonable concern about the child's safety, and there are other routes to helping families access services they may need."

"Racism in healthcare takes a toll on Black and Brown New Yorkers in so many ways and medical discrimination should not be a newborn's first experience upon coming into the world," **said Health Commissioner Dr. Dave Chokshi.** "This guidance will aim to keep children safe and together with their families when appropriate."

When a person suspects that a child is being abused or maltreated, they should make a report to the SCR, which is administered by the New York State Office of Children and Family Services (OCFS). If the State accepts the report, the report is sent to the county's child welfare agency to investigate. As a result, in New York City, ACS has no discretion as to whether to conduct the investigation if the State accepts the report. ACS then has up to 60 days to conduct an investigation. Each year on average, ACS conducts about 55,000 investigations involving about 80,000 children, and two-thirds are unfounded, meaning there was no credible evidence of abuse or neglect. Approximately 20-25% of investigations involve substance misuse, usually together with other allegations.

This new guidance will help hospital and other medical staff understand that calls should be made when there is a concern about the child's safety. Neither a positive drug test of a parent nor a positive toxicology of a newborn baby is in itself a basis for a report of abuse or neglect or, if investigated, a determination that evidence of abuse or neglect existed. The guidance also

makes clear that health professionals can make service referrals to families without contacting the SCR.

The guidance clarifies that medical providers can meet the requirement to develop and monitor Plans of Safe Care for infants and their caregivers without involving child protective services. Such an approach is appropriate when a substance use disorder is identified but the provider has no maltreatment or abuse concerns; when an infant is born substance affected by a medication that is part of an approved treatment plan for the mother; or if the medical provider is aware that the mother is actively participating in a substance use disorder treatment plan.

To read the full guidance, [click here](#)

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