Things To Know About DCF Reports

Thank you for trusting us with the care of you and your growing baby. We are honored.

Transparency

We realize it can be scary to disclose substance use, mental health concerns, domestic violence, homelessness, or other challenges during pregnancy and postpartum. We are here to help.

The best thing for a healthy baby is a healthy birthing parent. Treatment and accepting referrals for resources is best for you and your baby. We can help connect you to these services during pregnancy so you are prepared to parent once your baby arrives.

As medical professionals we are mandated reporters to the Family Services Division and we want to be up front on situations that would cause us to make a report. A report made does not mean automatically losing custody of a child or that a case will be opened by DCF.

What Is NOT An Automatic Report

- Disclosure of substance use in pregnancy
- Being stable on medications for substance use disorder
- A positive toxicology (drug) test on birth parent or newborn without other safety concerns
- Having a Family Care Plan (FCP)

We Are Required To Report...

- Observing active child abuse/neglect (with current children)
- Concerns for substance use impairment or mental health condition affecting ability to safely parent
  - Unable to meet newborns care needs including feeding, diapering, comforting
- Concerns for domestic abuse that expose newborn/older children to harm
- Concerns for the newborn/older children being present in relation to methamphetamine production
- Concerns for newborn safety in environmental conditions

These examples do not include all possible scenarios and health care professionals have the duty to make a report for any concerns of harm or unsafe conditions related to a newborn or child.

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