



Reporting Suspected Abuse or Neglect in Kansas: A Quick Guide to Online Reporting

Main Sections of the Online Report Form



Did the incident happen to an adult or child?

This is a mandatory question that requires you to click on the drop-down box and identify if it is an adult or child report. The report will not submit successfully if this field is left blank.

Protective Services Report

REQUIRED FIELD TO START INTAKE - - - Are you reporting an incident that happened to an adult or a child? **required**

Reporter Information

In this section, fill out your contact information so we can contact you if additional information is needed. We must have at least your name and a phone number to ensure we can properly address your concern in case additional information is needed. To make an anonymous report, please contact us at 1-800-922-5330.

Reporter Information

► In this section, you will fill out your contact information so that we can contact you if we need additional information. We must have at least your name and a phone number in case additional information is needed.

Report Source **required**

Mandated Reporter

Agency/Facility Name Your Title

Your First Name **required** Last Name **required** Middle Initial

Address Type

Street Address of your Agency/Facility

Apartment/PO Box Number

City State **required** Zip Code

County

Primary Phone Number **required** Ext. Phone Type

Secondary Phone Number Ext. Phone Type

Email Address **required**

Gender

Relationship to Alleged Victim **required**

Best time to contact you or an alternate contact name and phone number **required**

Language Spoken Interpreter/Translator Needed?

Are you at risk from the Alleged Perpetrator?

Would you like written notification of the outcome of your Report?

Incident information

In this section, describe the situation which led you to submit a report on the alleged victim. This will include the date/s and possible location, if known. If anyone saw the incident happen, you need to add their contact information to the Other Participant Section. **Please answer as many of the following questions as you can. A lack of description and details may result in your report being closed at intake without further action. It's very important that you provide as much factual detail as possible regarding the situation. The information provided must meet the definitions of abuse, neglect, and/or exploitation according to Kansas codes in order to be assigned for investigation.**

Incident Information
In this section, you will describe what caused you to fill out a report on the alleged victim. If anyone saw the incident happen, you will need to answer as many of the following questions as you can.

On what date did the incident occur? What Time?

Where did the incident occur? **required**

Did the incident occur at an Agency or Facility?

Agency/Facility Name

Agency/Facility Phone Number

Incident Street

Incident Apt/PO Box Number

City Clear State Clear Zip Code

County Clear

Has law enforcement been involved?

Sending Additional Documentation via

Please describe the incident in detail and include the following information.

What has happened that led you to report today? **required**

A description of the incident that led you make a report.

Why do you suspect abuse/neglect/exploitation? **required**

1000 characters remaining

Did you witness the situation; did you receive this information from a 3rd party; did the victim or adult disclose the situation to you?

What information do you have on the victim's functioning on a day-to-day basis? (For child reports only)

600 characters remaining

Does the victim have any mental health concerns, vulnerabilities, disabilities or behavioral concerns? How do they interact with their peers or towards adults? Describe their performance or efforts at school?

What information do you have about the parent's discipline approaches? (For child reports only)

600 characters remaining

Do they use timeout, physical discipline, yell, take away items etc....?

What information do you have about how the caregiver functions on a day-to-day basis? (For child reports only)

600 characters remaining

Does the caregiver have any mental health concerns, vulnerabilities, disabilities or behavioral concerns? How do they interact with the children or towards adults? Are they able to provide adequate care?

Do you think there is risk to our Investigator?

If Yes, please explain.

This can include but not limited to: Firearms in the Home; Dangerous Pets or Animals in the Home; Consumer or Family Mental Health Issues; Consumer or Family Aggressive Behavior; Condition of the Home; Communicable Diseases; or Other Factors.

Participant Section

In the *Participant section*, provide detailed information about everyone involved in the incident; alleged victims, alleged perpetrators, others living in the home and anyone one else who can provide information about the incident. As you continue through the online form, you can add multiple people in each category.

If possible, provide the following information for each person involved in the incident you are reporting:

- Names
- Dates of birth or approximate ages
- Address
- Phone number
- Current Location
- Primary language
- Vulnerable Condition/Disability Type
- Contact information
- School
- Access to the Alleged Perpetrator

You are also asked how each person was connected to the incident you are reporting. Select from the following list.

1. Alleged Victim
2. Alleged Perpetrator
3. Both Alleged Victim and Alleged Perpetrator
4. Other Possible Participants **

- Alleged Victim Information <small>required</small>	Add Edit Delete
- Alleged Perpetrator Information <small>required</small>	Add Edit Delete
- Other Possible Participant Information	Add Edit Delete

**To assist us in locating and assisting the adult or child, always provide information about a parent or caregiver

Additional items:

Attachments

You can attach documents to the web report by clicking on the "Add" link on the Attachment bar at the bottom of the report.

- Attachments	Add Delete
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Final Steps

Spell check-Click on the "Spell Check" link located on the Protective Services Report bar at top of the report.

Submitting your report- Click on the "Submit" link located on the Protective Services Report bar at the top of the report to complete your report.

Spell Check	Submit	Cancel
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