



# Child Protective Services Law

All persons (including volunteers) who come into contact with children at any time in the course of their work **are considered mandated reporters of child abuse** and are required by State Law to report to law enforcement authorities all cases of suspected child abuse.

Any person who willfully fails to report child abuse commits a crime and is subject to prosecution.

Persons having reasonable cause to suspect that a child has been subjected to child abuse, or acts of child abuse, shall report immediately to the following:

- If you suspect a child is in imminent danger from abuse,  
**PLEASE CALL 911 IMMEDIATELY.**
- Please call the Child Abuse Hotline (24-hour): **1-800-932-0313**
- Please also complete the CY 47 form available from the County Children & Youth Services. It is to be filed within 48 hours of your call. The form is available for completion online at [www.compass.state.pa.us/cwis](http://www.compass.state.pa.us/cwis) or you may fax or mail the form to the appropriate Office of Children and Youth.
- Please call the Appropriate Office of Children and Youth Services:

Berks	610-478-6700	Bucks	215-348-6950
Carbon	570-325-3644	Luzerne	570-826-8710
Lehigh	610-782-3064	Monroe	570-420-3590
Northampton	610-829-4690	New Jersey	877-652-2873
Schuylkill	570-628-1050	Montgomery	610-278-5800
- The Pastor (or Board of Pastors of the Regional School )
- The Principal of the school
- Attorney Joseph A. Zator at 610-432-1900; please forward a copy of the CY-47 to Attorney Zator.
- If abuse occurs in a school setting, there may be additional reporting requirements. Please see your Principal. If the suspected perpetrator is the Principal, then see your Pastor, or the Superintendent of Education for the Diocese.

**\*\*Please document who you spoke to and when**

Anyone making a report is immune from civil or criminal liability provided a report is made in good faith.

**The Diocese of Allentown urges any questions  
about the interpretation of the law be resolved in favor of reporting.**

# Flow Chart for Mandated Reporters



## Call 911 if the child is in imminent danger.

Please choose either option A or B before making a report. Note that you should not call ChildLine (option A) if you intend to submit the CY-47 form online (option B). Calling and submitting the form online would constitute duplicate reports. Keep copies of all your correspondence and a record of whom you spoke to. Contact Pam Russo, Secretary for Catholic Health, Human Services, and Youth Protection, with any questions about the reporting process at 610-871-5200, ext. 2204 or at [prusso@allentowndiocese.org](mailto:prusso@allentowndiocese.org).

### Option A

Call ChildLine and complete the CY-47 form by hand.

1

Call ChildLine at 1-800-932-0313 and complete the CY-47 form by hand.

The CY-47 form can be found online as a PDF at:

[www.keepkidssafe.pa.gov](http://www.keepkidssafe.pa.gov)

Click on Resources and then Forms.

Click on Report of Suspected Child Abuse (the CY-47) to print form.

Complete all information on the CY-47, as far as you are able.

There may be questions you are not able to answer.

2

Mail or fax the CY-47 within 48 hours to the local county Office of Children & Youth Agency as directed.

### Option B

Submit the CY-47 form online.

1

Complete the CY-47 form and submit it online at:

[www.compass.state.pa.us/cwis/public/home](http://www.compass.state.pa.us/cwis/public/home)

You do not need to call ChildLine if you file electronically.

You are required to create a Keystone ID to submit an electronic report. A confirmation of the submittal will be sent by email. Complete all information on the CY-47, as far as you are able.

There may be questions you are not able to answer. Please print a copy of the report before you exit the website.

2

A courtesy call to the local county Office of Children and Youth Agency should be made.

3

Inform the person in charge: Pastor, Board of Pastors, Principal, Administrator, or Secretary of Secretariat.

4

Call the Diocesan Legal Counsel and email, mail, or fax the copy of the CY-47:  
Attorney Joseph Zator  
4400 Walbert Avenue, Allentown, PA 18104  
[jzator@zatorlaw.com](mailto:jzator@zatorlaw.com) (email is preferred method of contact)  
(p) 610-432-1900 | (f) 610-432-1707

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Email, mail, or fax a copy of the CY-47 to the Secretary for Catholic Health, Human Services, and Youth Protection:  
Pam Russo  
[prusso@allentowndiocese.org](mailto:prusso@allentowndiocese.org)  
(p) 610-871-5200, ext. 2204 | (f) 610-439-7693

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Within 30-60 days, you should receive a letter from the Local County Office of Children & Youth that reports findings.  
Keep a copy of the letter. Send the original to Diocesan Legal Counsel, and send a copy to the Secretary for Catholic Health, Human Services, and Youth Protection.



DIOCESE OF ALLENTOWN  
OFFICE OF CATHOLIC HEALTH,  
HUMAN SERVICES, AND YOUTH PROTECTION  
OFFICE OF THE SECRETARY  
POST OFFICE BOX F  
ALLENTOWN, PENNSYLVANIA 18105-1538

DIOCESE OF ALLENTOWN  
CHILD PROTECTIVE SERVICES LAW POLICY  
ACKNOWLEDGMENT FORM

I HEREBY ACKNOWLEDGE THAT I HAVE RECEIVED A COPY OF THE DIOCESE OF ALLENTOWN'S CHILD PROTECTIVE SERVICE LAW POLICY.

I HAVE REVIEWED THE CHILD PROTECTIVE SERVICES LAW POLICY AND UNDERSTAND ITS CONTENTS, AND THE PROCESS THAT I MUST COMPLETE IF I HAVE REASONABLE CAUSE TO SUSPECT THAT A CHILD HAS BEEN SUBJECTED TO CHILD ABUSE OR ACTS OF CHILD ABUSE.

I FURTHER UNDERSTAND THAT THE DIOCESE OF ALLENTOWN HAS ISSUED THE CHILD PROTECTIVE SERVICES LAW POLICY FOR INFORMATIONAL OR GUIDANCE PURPOSES ONLY AND THAT THE DIOCESE DOES NOT INTEND FOR THE POLICY TO CREATE A CONTRACT OR ANY TYPE OF BINDING OBLIGATION ON THE DIOCESE. THE DIOCESE OF ALLENTOWN MAY PERIODICALLY REVIEW THE CHILD PROTECTIVE SERVICES LAW POLICY, AND IT RESERVES THE RIGHT TO AMEND OR INTERPRET THE POLICY AS IT DEEMS APPROPRIATE IN ITS SOLE DISCRETION. A COPY OF THIS ACKNOWLEDGMENT FORM SHALL BE PLACED IN MY PERSONNEL OR VOLUNTEER FILE.

\_\_\_\_\_  
(DATE)

\_\_\_\_\_  
(SIGNATURE OF EMPLOYEE/VOLUNTEER)

\_\_\_\_\_  
(PLEASE PRINT NAME)

\_\_\_\_\_  
(DIOCESAN LOCATION)

\_\_\_\_\_  
(CITY)