

DEPARTMENT OF HEALTH SERVICES  
COUNTY OF LOS ANGELES

SUBJECT: **GUIDE TO SUSPECTED CHILD  
ABUSE REPORTING**

REFERENCE NO. 822.1

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## **GUIDE TO SUSPECTED CHILD ABUSE REPORTING**

1. **NOTIFY** law enforcement **IMMEDIATELY** if the child is suspected to be in imminent danger.
  - **CALL** the 24-hour Child Protection Hotline at **1 (800) 540-4000** as soon as possible to make the verbal report to the **Department of Child and Family Services (DCFS)**. To access the priority hotline for Medical Providers, **press \*** within the first 10 seconds of the call and a prompt will request a code be entered. **Enter the code 3237 (DCFS)**. Once the code is entered, the caller will be given options to select.

**Press 1** for safely surrendered baby

**Press 4** for all other inquiries (Child Report –Medical queue)

    - You will be given a **REFERRAL NUMBER**, which is also the Case Number.
2. **COMPLETE** the **Suspected Child Abuse Report (SCAR)** form SS8572 **within 36 hours** and **submit to DCFS** via ONE of the following ways:
  - **Mail:** **Department of Child and Family Services (DCFS)**  
**1933 S. Broadway Avenue, 5th Floor, Los Angeles, CA 90007**
  - **Fax:** **(213) 745-1728 or (213) 745-1730**
  - **Online:**
    1. **dcfs.lacounty.gov**
    2. On the left-hand side, under RESOURCES, click on “For Mandated Reporters Only (Complete your Mandated Report Online)”
    3. Enter the REFERRAL NUMBER and proceed
3. **MAIL** (or FAX if available) a copy of the completed **Suspected Child Abuse Report** to the jurisdictional law enforcement agency.

# Notify

Law Enforcement if a Child is in Immediate Danger



# Call

1 800 540-4000

**As Soon as Possible** to make a VERBAL Report to DCFS



# Complete

The WRITTEN Report and submit to DCFS **within 36 hours** by:

Mail, FAX, or Online



# Mail

A Copy of the Report to the Jurisdictional  
Law Enforcement Agency