a. **What or is there is a legal age for a minor (under 18) to be left alone due to parents working?**

I believe my response during the live webinar was that the law doesn’t specify a minimum age, but I thought there was guidance about this in NC’s Child Protective Services manual. The manual addresses this issue in its chapter on structured intake, via the following Question and Answer:

**Is the parent/caretaker leaving a child age 8 or younger alone with no supervision?**

There is no legal age established for when a child can stay at home alone; however, North Carolina fire code specifies that children under age 8 should not be locked or confined. A report alleging a child under age 6 left alone requires an immediate response. The length of time the child is left alone, along with the child’s age, and cognitive abilities factor into whether the child can be safely left alone. Some important questions to ask are: Is the child afraid to stay at home alone? Is the child providing care for siblings? Does the child know how to contact emergency personnel? How long is the child being left alone? Is the child in an isolated area?

The manual is online at [DHHS Online Manuals Chapter VIII - Protective Services](#). The quote above is from Section 1407, Structured Intake.

b. **Is it legally required to report to the facility supervisor or note in the patient’s chart that you have filed a report with DSS?**

Whether to tell the facility supervisor that a report has been made or will be made is not addressed by state law, but it may be addressed in local agency policies. Plus it strikes me as a good idea generally. How to document the disclosure of information is also not addressed by either HIPAA or state law, but it should definitely be documented. If an individual exercises their right to get an accounting of disclosures of their Protected Health Information, this disclosure must be included in that accounting.

c. **Are recurrent Sexually Transmitted Infections (STIs) in a teenager a Law Enforcement or Department of Social Services (DSS) report?**

It depends on the specific facts and circumstances.

A report to DSS is required when a health care provider has cause to suspect a child is abused or neglected. The recurrence of STIs is an important fact, but it must be evaluated in the context of other information that is known about the teenager.

**A report to law enforcement is required** only if the treating health care provider determines that the child has a serious physical injury or recurrent illness that is believed to be due to non-accidental trauma. Please note that the [Decision Tool](#) addresses only reports to law enforcement. Do not use it to decide whether to report to DSS.