

Interviewing for the Hotline Assessments

1. A concerned person wants to give you information to help a child, but there can still be obstacles and conflicts for this person, such as the following:

- Incomplete information about the incident. The reporter may have observed enough to become concerned, but not enough to meet the threshold for CPS involvement.
- Incomplete knowledge of child maltreatment law. The reporter may have observed an incident that he/she feels requires a response, but an investigation may not be appropriate, given legal thresholds.
- Conflicting loyalties. The reporter may be a close friend or family member concerned that his/her report could “get the caregiver in trouble” or end a relationship with the caregiver.

2. Question types

2.1. The best information is that provided by the reporter in his/her own words in response to the most **open-ended, non-directional questions**.

- What did you observe?

If the caller does not provide enough information to complete the intake tools without further questioning, start with open-ended orienting questions.

- What about this situation concerned you?
- What about the incident caused you to call the hotline?

2.2. If you need additional information, move on to **narrative-anchored follow-up questions**.

- I’m hearing that _____ aspect of the situation concerned you; tell me more about that.

2.3. Finally, try some **fine-tuning questions**. Use your assessment definitions to ask questions that allow you to distinguish among different levels of response. **Use the attached guide for examples.**

Outline for Interviewing

OPEN-ENDED: What are your concerns?

NARRATIVE-ANCHORED FOLLOW-UP:
You mentioned _____. Tell me
more about that.

FINE-TUNING/MISSING LINK

Sample Threshold Questions

For each main screening criterion, there are some examples of initial focus questions to help determine whether the reporter is concerned about one of the larger areas. If yes, then look at the questions for the subcategories within the larger category for suggestions for questions to determine whether the subcategory applies. These questions are representative, and not all will be appropriate with each call. There are likely other questions that would be helpful in particular circumstances. These questions do not represent everything that should be asked during a call, but are just suggestions to help determine the screening decision.

MAIN CATEGORY	Narrative-anchored Follow-up	SUBCATEGORY	Sample Fine-tuning “Missing Link” Questions
Physical abuse	<ul style="list-style-type: none"> • Did you see an injury on the child? • Did the child tell you he/she was injured? • Is the child acting injured (even if you can’t see the injury)? 	Non-accidental injury	<ul style="list-style-type: none"> • Did you see how the injury was caused? • Did someone tell you how the injury was caused? (Who?) • From your perspective, was this intentional? What makes you think so? • Did [perpetrator] say anything right before or right after?
		Death of child/another child in home	<ul style="list-style-type: none"> • Is the cause of death suspected to be abuse? • What other children live in the home?
		Severe	<ul style="list-style-type: none"> • Has the child received medical treatment? • What would have happened if there had been no treatment? • Describe the injury. • Describe how child reacted immediately following. <ul style="list-style-type: none"> » Listen for indicators of pain, impaired movement, loss of consciousness, etc.
	Other injury	Describe the injury.	
	<ul style="list-style-type: none"> • What did you see the caregiver do to punish the child? • Did you see the caregiver do something dangerous near the child? • Did you hear the caregiver 	Cruel or excessive corporal punishment	<ul style="list-style-type: none"> • What was the caregiver reacting to? • What did the caregiver say? • What were the circumstances when the child was outside (e.g., temperature, time of day, length of time)? What did child do while outside? • How did child react to punishment? • What part of child’s body was struck? By what?

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	threaten the child? <ul style="list-style-type: none"> What did the child (or someone else) tell you about what the caregiver did to punish the child? 		<ul style="list-style-type: none"> What happened to child immediately upon being struck (e.g., fell backward with force, doubled over in pain)? How surprised are you that child wasn't injured?
		Threat of physical abuse	NOTE: FOR THE FOLLOWING THERE IS NO INJURY AND NO INCIDENT IN WHICH CAREGIVER HAS ALREADY TAKEN ACTION.
		Threats of physical harm	<ul style="list-style-type: none"> Has the caregiver followed through with threats before? Does the caregiver seem to make threats to scare the children? Did it appear to be a figure of speech, or a plan? How did the caregiver and child act following the threat (e.g., it was soon forgotten vs. continuing rage in the caregiver and fear in the child)?
		Dangerous behavior toward the child or in immediate proximity of the child	DOMESTIC VIOLENCE (DV) <ul style="list-style-type: none"> What was the nature of the altercation between parents? Was a gun or knife involved? Where exactly was the child? What was the child doing during the altercation (e.g., intervening, being held by one caregiver)? Did the parents seem aware of the child's presence? Did the caregivers take any action to protect the child? OTHER <ul style="list-style-type: none"> What exactly was the caregiver doing? What precautions were taken to protect the child? How close was the child? Was the caregiver

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			<p>aware of child’s presence?</p> <ul style="list-style-type: none"> • How surprised are you that child wasn’t injured?
Emotional abuse	<ul style="list-style-type: none"> • What does the parent do that is upsetting to the child? • How does the child react immediately? • What affect does this have on the child? <ul style="list-style-type: none"> » Mood » Behavior » Relationships » School 	Caregiver actions have led to child’s severe anxiety, depression, withdrawal, or aggressive behavior toward self or others	<ul style="list-style-type: none"> • What is the child’s diagnosis? • How long has the child exhibited the symptom (e.g., severe anxiety, depression, withdrawal, or aggressive behavior toward self or others)? • What are the child’s specific behaviors? • To what extent have these behaviors affected the child’s life? <ul style="list-style-type: none"> » Expelled? Failing school? » Completely isolated, barely talks to anyone? » Losing or gaining weight, persistent insomnia, sleeping so much that he/she is missing lots of school? » Getting into frequent fights, arrests, injuries? » Suicidal (plan, attempts), self-harming (cutting, etc.)? • How is the caregiver’s behavior contributing to the child’s condition?
		Threat of emotional abuse	<ul style="list-style-type: none"> • How long has this been going on? • How does the child react? • To what extent have these behaviors affected the child’s life? (<i>Not REQUIRED to have symptoms, but if there are symptoms, it supports.</i>)

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		Domestic violence	<ul style="list-style-type: none"> • Does the child see the DV? • How does the child know about DV? • What happens between the caregivers? • Was a caregiver injured? • Are weapons involved? • How often? • Has anyone been injured?
		Bizarre or cruel behavior	<ul style="list-style-type: none"> • What exactly has the caregiver done? How does the child know about it? • How does the child react? • How often does this happen? How long has it been going on?
		Caregiver’s mental health concerns	<ul style="list-style-type: none"> • How long has the caregiver had a substance abuse or mental health concern? • To what extent is the caregiver impaired? • What parenting tasks are not being done due to mental health or substance abuse? • How is the caregiver’s behavior affecting child? • How does the child react? • How is the child’s life different because of the concern?
Neglect	<ul style="list-style-type: none"> • What is the caregiver not doing that a caregiver ought to do? • Has the child been injured or become ill as a result? • What is likely to happen to the child if the situation does not change? 	Severe neglect	
		Diagnosed malnutrition	<ul style="list-style-type: none"> • Who diagnosed the malnutrition? • When was the diagnosis made?
		Non-organic failure to thrive	<ul style="list-style-type: none"> • Who diagnosed non-organic failure to thrive? • When was the diagnosis made? • What is the child’s age vs. weight/height? • Has there been a recent change in the relationship of child’s age to child’s height/weight? • Is the child falling behind on developmental milestones?

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		Child’s health/safety is endangered	<ul style="list-style-type: none"> • What injury or illness has the child suffered? • If the situation is not resolved, what is likely to happen to the child? <p>CLOTHING What was the weather like? How long was the child without appropriate clothing? In what way did the caregiver act that caused the child to be without proper clothing?</p> <p>HOUSING CONDITIONS What is the child’s lead level? What symptoms does the child have? Has the child required medical care as a result of environment that would not have been required if the child was in a different environment? How did the caregiver contribute to that environment? Did the caregiver understand his/her actions would cause harm? Can the caregiver control the environmental factors that caused harm? What are the chances the child will need medical care soon if the environment is not corrected?</p> <p>MEDICAL CARE What is the child’s condition? What should the caregiver be doing that is not being done? If it is not done, what will happen? How long will it take for that to happen? If the care is provided, how certain is it that the condition will be improved? Does the caregiver know and understand this? KEY: If result will lead to permanent disability, disfigurement, or death, it is SEVERE. If it will result in lesser harm, it is GENERAL.</p> <p>SUPERVISION</p>

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			<p>What is the child’s age/developmental status? How long has child been left alone? How often is the child left alone? What are some examples of things that happened when the child was alone? What makes it particularly dangerous for this child to be alone?</p> <p>OTHER</p> <ul style="list-style-type: none"> • What were the specific conditions? • How surprised are you that the child was not injured? • What could have happened to the child if third party had not intervened? • How much longer could the child have been in that situation before becoming ill/injured/dying?
		Unexplained and/or suspicious death of a child, and there are other children in the home	<ul style="list-style-type: none"> • What are the circumstances of the child’s death? • Who is investigating? • Why is it being considered suspicious? • Who else is in the home?
	Does the child need something that is not being provided?	General neglect	<i>Understand age/developmental status/vulnerability of children as context for each question:</i>
		Inadequate food	<ul style="list-style-type: none"> • What is the child typically eating? • How often is the child going without meals? • What makes meals inadequate? • Has the child lost weight or failed to gain weight? • Is the child having difficulty in school? • How often does the child go hungry? For how long?
		Inadequate clothing	<ul style="list-style-type: none"> • What clothing does the child have on when outdoors? What is the weather? How long is the child outdoors? • How many days in a row would the child wear

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			<p>clothes between washing? Is the child avoided or ridiculed at school due to clothing? Does the child avoid leaving the house out of concern for clothing?</p>
		<p>Inadequate/hazardous shelter</p>	<ul style="list-style-type: none"> • Would the child likely become ill or injured if the situation in the house is not changed? • To what extent is [dirty clothes, rotting food, etc.] present? How long has it been that way? How does it interfere with normal activities? • What items does the child get into his/her hands that are dangerous? • What precautions is the caregiver taking to protect the child? • What actions is the caregiver taking to the correct situation? • In the absence of [utilities/furniture], what is the caregiver doing instead? Does that pose a danger to the child (e.g., lack of bed—does the child have any orthopedic problem as a result, or issue that would make sleeping on a mattress on the floor dangerous?)? • Does the child depend on electricity for a medical device?
		<p>Inadequate supervision</p>	<ul style="list-style-type: none"> • How long was the child alone? • How often? • What happens when the child is alone? • How has the child been prepared to be on his/her own? • Are there any provisions for supervision? • When the child begins to do something dangerous, what does the caregiver do? • How do we know the child can’t manage on his/her own?

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		Inadequate medical/mental health care	<ul style="list-style-type: none"> • Who indicated the child requires care? • What care is not being provided? • How long has it been that care was not provided? • What has been done to get the caregivers to provide care? • What will happen if care is not provided?
		Child has no parent or guardian capable of providing appropriate care	<ul style="list-style-type: none"> • Where is the caregiver now? • How long will he/she be there? • What plans, if any, were made for child care? • What happened so that those plans are not working? • What leads us to believe the caregiver is not returning?
		Failure to protect	<ul style="list-style-type: none"> • What is it about the temporary caregiver that suggests he/she is inappropriate? How has his/her [drinking, young age, mental health, etc.] prevented him/her from providing adequate care? Can you provide an example of that? Has something happened, or nearly happened, while a child was in his/her care? • Who is harming the child? Does the caregiver know? Who all knows? What do you think the caregiver should be doing that he/she is not doing?
		Threat of neglect	
		Prior failed reunification or severe neglect, and new child in household	<ul style="list-style-type: none"> • How do we know there was a failed reunification or prior substantiation for severe neglect? (Confirm with record check.) • Who is in the house now? Do we know that the child was not there previously?
		Allowing child to use alcohol or other drugs	What did the child consume? How was the caregiver involved? How much did the child

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			consume? How was the child acting afterward? How often does this happen? Was this part of any religious or cultural ceremony?
		Prenatal substance use	<ul style="list-style-type: none"> • Was there a positive toxicology on the mother and/or the child? If not, how do we know the mother used substances prenatally? • What does the mother say about her use? Are there indicators of continuing use (e.g., heard her arranging to get drugs, obvious symptoms of severe dependency)? What drugs does the mother abuse? What is her pattern of use? • How has the mother responded to baby while in hospital? Is she attentive, involved in care? Does she indicate preparations for having baby home? Is she passed out, groggy, inattentive?
		Other high risk birth	How has the caregiver responded to the baby in hospital? In what ways has the caregiver(s) demonstrated inability to provide adequate care? Does the child have special needs? If so, has the caregiver participated in education to learn to provide care? Does the caregiver seem to understand basic information about safely caring for the baby?
Sexual abuse	Are you concerned about someone having sexual contact with the child?	Any sexual act on a child by an adult caregiver or other adult in the household, or unknown perpetrator	<ul style="list-style-type: none"> • What did the child say happened? Who did the child say did this? Does that person live with the child? How did this happen to come up? • What is it about the child’s behavior that has you concerned? How often does the child behave this way? When did it start? Has someone asked the child about this behavior? • Has the child seen a doctor? What do exam/tests show? How significant is that for ruling in or ruling out sexual abuse?

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			<ul style="list-style-type: none"> Who saw this happen? What exactly did they see?
		Sexual act(s) among siblings or other children living in the home	<ul style="list-style-type: none"> What happens between the children? What are their ages (Sizes? Cognitive development?)? Has there been any pressure or coercion for one or more of them to participate?
		Sexual exploitation	<ul style="list-style-type: none"> What does the caregiver make the child do? How is the caregiver involved?
		Threat of sexual abuse	RULE OUT SEXUAL ACT OR EXPLOITATION FIRST.
		Known or highly suspected sexual abuse perpetrator lives with child	<ul style="list-style-type: none"> How do you know the person has a history of sexual abuse? (Confirm with record check.) How do you know he/she lives with child? (NOTE: If a known or highly suspected sexual abuse perpetrator has contact with the child, but does not live with the child, refer to failure to protect.)
		Severely inappropriate sexual boundaries	<ul style="list-style-type: none"> What exactly does the caregiver do? How often does this happen? How do you know the children are aware? What do the children say about how it makes them feel? What happens that makes it seem he/she is doing this on purpose for sexual gratification? Is there an attempt to do this secretly? Are the children asked not to talk about it?
Overrides to evaluate out	Is there a reason child protection should not respond?	Insufficient information to locate child/family	FOLLOW COUNTY POLICY FOR EFFORTS TO LOCATE BEFORE MARKING THIS OVERRIDE.
		Another community agency has jurisdiction	<ul style="list-style-type: none"> Which agency is going to follow up? On what basis is there no requirement for child protection involvement?

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		Historical information only	<ul style="list-style-type: none"> • Is the child age 10 or older? AND • Did maltreatment occur at least a year ago? AND • Were there any reports since then? (Confirm with record check.) AND • What was it that contributed to the maltreatment that has changed?

Sample Response Priority Questions

The following are suggestions for questions that can help distinguish yes and no responses to each question box. These are general suggestions. Specific situations may warrant use of other, more individualized questions.

Tree	Box	Question	Sample Questions
Physical abuse	1	Is the child under age 2 (or capability equivalent)?	<ul style="list-style-type: none"> How old is the youngest child in the home? (If this child is NOT the victim of the current reported incident, is there reason to believe this child is another potential victim?) (If over 2) Is there any child who has a severe developmental disability or emotional disability?
		Does the child require immediate medical attention?	<ul style="list-style-type: none"> Is the child currently in the hospital, ER, doctor's office for evaluation, or treatment? Is the child bleeding, burned, unconscious, severely injured, etc.? (Alert 911.)
		Were caregiver actions or threats brutal or extremely dangerous?	<ul style="list-style-type: none"> What exactly did the caregiver do to the child? What part of the child's body was injured/hit? What did the caregiver hit the child with? What was the result of impact (e.g., was it forceful enough for child to fall)? How old is the child? What is the child's size (especially relative to the caregiver)? Is the child able to get away or protect self to any extent? How surprised are you that the child was not severely injured as a result? How precarious was the situation? How long was the child exposed to the elements, and what were the conditions? Had the other party not intervened, or the child not ducked, etc., what would likely have happened? What kind of force would it have taken to cause an injury like that? What kind of damage can result from an action like that? Does it appear that there has been more than one episode of violence? (for medical professionals)
	2	Does the alleged perpetrator have access to the child within the next ten days?	<ul style="list-style-type: none"> Does the alleged perpetrator live with the child? How much contact does the alleged perpetrator have with the child? When will the alleged perpetrator next see the child? Does the alleged perpetrator have contact with the child via email, text, cell phone? What precautions are in place to prevent contact?

Tree	Box	Question	Sample Questions
			<ul style="list-style-type: none"> • Is the alleged perpetrator able to bail out? • How committed is the caregiver to keeping the alleged perpetrator away from the child?
	3	Is there a prior history of physical abuse?	CWS/CMS record check. Look for investigated physical abuse by any adult caregiver currently in the home.
		Is there current domestic violence?	<ul style="list-style-type: none"> • Is there any violence in the home? • Do the caregivers get along? • Any violence with current or former boyfriends/girlfriends? • POLICE RECORD CHECK • CWS/CMS record check
		Is there current caregiver mental health concern?	<ul style="list-style-type: none"> • Does either caregiver have any mental health concerns? • Does he/she seem in touch with reality? • Is he/she having an unusually hard time coping? • Does he/she seem depressed? • Has he/she been talking about suicide or otherwise hurting self or others? • CWS/CMS record check
		Is there current caregiver substance abuse concern?	<ul style="list-style-type: none"> • Does anyone in the house abuse drugs or alcohol? • Does he/she get drunk/high?
		Is the child fearful or vulnerable?	<ul style="list-style-type: none"> • Does the child appear afraid of going/remaining home? • What has the child said? Is the child acting afraid? • Does the child have a way to stay safe if he/she goes/remains home? • Could the child protect self or get away if a problem arises? • Is there reason to suspect another incident tonight or in the next several days? • When are you expecting to see the child again? • Is the child expected to be in school or some other public/planned activity over the next several days? <p>KEEP IN MIND THE SEVERITY OR LACK OF SEVERITY OF THE ALLEGATION. THE GREATER THE SEVERITY, THE MORE VULNERABLE THE CHILD.</p>
	4	Is there a protective adult in the home?	<p>Is there another adult in the home in addition to the alleged perpetrator? If so:</p> <ul style="list-style-type: none"> • Does he/she know about the alleged incident? If so, what has he/she said or done in response?

Tree	Box	Question	Sample Questions
			<ul style="list-style-type: none"> • Was he/she present for alleged incident? Did he/she do anything to protect the child? • Would he/she be physically and emotionally capable of protecting the child if this happened again? • Is he/she going to be with the child in next several days? • Does he/she use excessive corporal punishment as well? • How much time has gone by since most recent known incident? <ul style="list-style-type: none"> • Was the incident one in a series of concerns, or was it a one-off situation? • How did perpetrator react when it was over? What has he/she said? Does he/she express regret for incident? • Has he/she apologized, and/or expressed a plan to not harm the child again? If so, has he/she ever made and broken promises like this in the past? • Was the incident an unusual circumstance, or is he/she often volatile/violent/ impulsive/angry?
Emotional abuse	1	Is the child exhibiting behavior that requires immediate mental health evaluation?	<ul style="list-style-type: none"> • Is the child suicidal (i.e., has attempted, has a current plan, or other indication of significant suicide threat)? • Is the child self-harming? • Has the child recently set fires or been cruel to animals? • Is the child threatening to harm others? Is there a plan? Has the child taken some steps toward harming others? • Does the child seem out of touch with reality? • Is the child so depressed, anxious, or withdrawn that he/she has stopped engaging in daily activities? When did this start? How long has it been going on?
	2	Is the caregiver's behavior cruel, bizarre, or extremely dangerous?	<ul style="list-style-type: none"> • What exactly has the caregiver done? Whom did the caregiver hurt? How do you know the child saw or was aware? • What exactly has the caregiver said? Does it seem caregiver was making a poor attempt at a joke? Was it a figure of speech? How did the child and others respond? Did they seem shaken? Afraid? • How long did the caregiver make the child [particular action]? How did the child react? How often does this happen? (Consider child's age.) • How does the child respond to violence between the caregivers? Does the

Tree	Box	Question	Sample Questions
			<p>child intervene? Has anyone been seriously injured as a result of DV? Has DV involved guns, knives or other weapons? Has the child been directly in the path of DV, even if unharmed?</p>
Neglect	1	Does the child need immediate medical/mental health evaluation?	<ul style="list-style-type: none"> • Has a doctor, paramedic, nurse, or other medical personnel reported that the child needs immediate medical evaluation? • Has a mental health professional reported that the child needs immediate mental health evaluation? • If the reporter is a non-medical/mental health person, does the child have symptoms of failure to thrive? • What would happen if treatment is not begun in the next five days?
	2	Are the child's physical living conditions <i>immediately</i> hazardous to his/her health or safety?	<p>CONSIDER THE CHILD'S AGE/DEVELOPMENTAL STATUS.</p> <ul style="list-style-type: none"> • What exactly is the hazard? How long has the child been living there with that hazard? (Note: In some instances, longer reduces sense of imminence because it suggests that odds of harm are quite low. In other circumstances, longer will increase sense of imminence if cumulative harm occurs over time, such as exposure to toxins.) • Is there something about the child's behavior that makes him/her more likely to become ill/injured by this? • Has someone recently been injured/become ill? • How long could a child that age be exposed to that before it causes harm? • How seriously would the child be harmed?
	3	Is the child currently unsupervised?	<p>CONSIDER THE CHILD'S AGE/DEVELOPMENTAL STATUS.</p> <ul style="list-style-type: none"> • Is the child alone/unattended at this moment? • How recently was the child alone/unattended? • Is there reason to believe the child will again be unattended/alone in the next five days? • Is the person presently caring for the child so impaired/incompetent, etc. that the child has already been injured or nearly injured? • If the child is expected to be left with a concerning caregiver, how often is the caregiver in a condition that he/she can't provide appropriate care? What leads to the conclusion that he/she would be unable to provide care over the next few days? • If the caregiver has disappeared with no apparent intent to return, who is caring for the child now? Is he/she able and willing to do so for a few

Tree	Box	Question	Sample Questions
			days?
	4	Is the child a drug-exposed newborn who will be discharged within the next five days?	<ul style="list-style-type: none"> • What substance showed up in tox screens and/or what has the caregiver admitted to using? • What is the planned discharge date? • Have the caregivers expressed a desire to discharge against medical advice? • Is there an indication that the caregivers are planning to leave without waiting for discharge?
		AND no caregiver appears willing and able to provide for the child upon discharge?	<ul style="list-style-type: none"> • Has the caregiver used recently? Has caregiver used since birth? Are there indications the caregiver will resume use? • Has the caregiver done what is necessary to prepare to take the child home? CONSIDER ANY SPECIAL NEEDS OF THE CHILD. • If there is a second caregiver, does he/she appear willing and able to help even if birth parent does not? • Has either caregiver ever had an unsuccessful reunification case? RECORD CHECK
Sexual abuse	1	Is there current abuse as evidenced by disclosure?	<ul style="list-style-type: none"> • If the child disclosed, is the child saying an incident happened recently? Did the child name an alleged perpetrator who lives with the child now? • Is there a recent onset of concerning sexualized behaviors? Is there a recent significant change in the child's behavior that suggests abuse is current?
		Credible witnessed account?	Did witness see an incident recently?
		Or medical evidence?	Does medical evidence suggest recent sexual activity?
	2	Is the non-offending caregiver willing and able to protect, including seeking medical attention if needed?	<ul style="list-style-type: none"> • Is there another caregiver in the home who is not alleged as a perpetrator? (If no, the box must be answered no.) • Does the non-offending caregiver know about disclosure/concern? (If no, must be answered no.) • If the non-offending caregiver knows, how has he/she reacted? Is he/she blaming the child, angry at the child? Is he/she threatening the child to not disclose or to cover up? Is he/she coaching the child to disclose things that are NOT true? If a medical exam has been recommended, is the non-offending caregiver cooperative? NOTE: This caregiver does not need to express absolute belief in child's disclosure at this time, but a yes answer indicates he/she is supportive of child and open to hearing the child's

Tree	Box	Question	Sample Questions
			account.
	3	Does the perpetrator have access to the child within the next five days?	<ul style="list-style-type: none"> • If child named an alleged perpetrator(s), does he/she live with the child, or is the alleged perpetrator likely to have contact with the child in next five days? Does the alleged perpetrator have email, text, or phone contact ability with the child? Could he/she contact the child at school, church, or other place? • If the alleged perpetrator is unknown, is there any concern that the alleged perpetrator could be someone who lives with the child or has contact with the child? Has the child provided indicators such as “It happened a long time ago...? I don’t see that person anymore,” or has the child specifically denied that the alleged perpetrator is someone in his/her home, but not further identified?