

Child Interview – Foster Care

Specialist Name:

U#

Date:

Overall Evaluation

Engagement and Rapport

Meets Standards (10-8)

Needs Improvement (7-6)

Does Not Meet (5 or less)

- | | | |
|--|-----|----|
| 1) Introduced self and clearly explained role _____ | Yes | No |
| 2) Explained the purpose of the interview _____ | Yes | No |
| 3) Used appropriate tool to engage/interview the child _____ | Yes | No |
| 4) Listened to and responded to the child's questions _____ | Yes | No |
| 5) Appropriate use of casual conversation throughout the interview _____ | Yes | No |
| 6) Engaging and receptive towards the child _____ | Yes | No |
| 7) Respectful to the child throughout the interview _____ | Yes | No |
| 8) Non-threatening towards the child _____ | Yes | No |
| 9) Non-judgmental towards the child _____ | Yes | No |
| 10) Empathetic towards the child (verbally acknowledged fears and/or concerns) _____ | Yes | No |

Overall Feedback - Rapport and Engagement:

Total Number:

Interviewing

Meets Standards (7-6)

Needs Improvement (5-4)

Does Not Meet (3 or less)

- | | | |
|---|-----|----|
| 1) Used open ended questions throughout majority of interview _____ | Yes | No |
| 2) Avoided leading and coercive questions _____ | Yes | No |
| 3) Allowed the child to speak without interrupting (appropriate use of silence) _____ | Yes | No |
| 4) Attentive to the child's body language _____ | Yes | No |
| 5) Effective use of redirection and summarization _____ | Yes | No |
| 6) Interview flowed well _____ | Yes | No |
| 7) Spoke on the child's developmental level _____ | Yes | No |

Overall Feedback - Interviewing:

Total Number:

Assessing Safety

Meets Standards (6-5)

Needs Improvement (4-3)

Does Not Meet (2 or less)

- | | | | |
|--|-------|-----|----|
| 1) Clearly gauged the child's understanding of being a Resource Family | _____ | Yes | No |
| 2) Clearly identified how the child defines safe | _____ | Yes | No |
| 3) Follow-up questions regarding safety throughout the interview | _____ | Yes | No |
| 4) Gauged the child's feelings regarding at least two of the following: | _____ | Yes | No |
| o Having new children in the home – | | | |
| o Sharing personal time with their parents – | | | |
| o Other people visiting the home – | | | |
| 5) Gathered sufficient information in at least two of the following: | _____ | Yes | No |
| o Discipline (for the bio children and the foster children) – | | | |
| o Daily routines – | | | |
| o Sleeping arrangements – | | | |
| 6) Gauged the child's fears/concerns regarding at least two of the following: | _____ | Yes | No |
| o Other people visiting the home – | | | |
| o Relationship with new children – | | | |
| o Changes in family structure – | | | |

Overall Feedback - Assessing Safety:

Total Number:

Developmental Plan Recommendations:

Grader Name:

Grader Signature: