

# Minimal Facts Guidelines



## Information for First Responders

Northeast Regional Children's Advocacy Center (NRCAC) has created Minimal Facts Guidelines for Children's Advocacy Centers and Multidisciplinary Teams to share with first responders in the hopes of avoiding multiple "full" interviews of child victims. First responders, usually law enforcement and child protection, often need to obtain **Minimal Facts** at a scene or initial response to allegations of abuse. Upon establishing safety and collecting **Minimal Facts**, a referral can be made for a specialized forensic interview in a child-friendly setting at a Children's Advocacy Center (CAC). The goal is to minimize trauma to the child and to avoid multiple interviews.



### *Content included in these guidelines:*

- Overview of Minimal Facts
- Next Steps
- Pocket Card (draft for edit by your CAC)

## Overview of Minimal Facts

Upon a report of child abuse allegations, both law enforcement and child protection have initial responsibilities to ensure child safety and assess the situation before referring to the CAC for a forensic interview. Child protection has a timeframe (see state specific timeframes) when they need to see the child/family to assess safety and respond to family needs. The initial child contact must be completed within child protection policy timeframe, but does not usually require a full interview of the child. In many cases, general information necessary to ensure child safety may be gathered from guardians/other referral sources, if they are protective of the child. However, if first responders need to talk with the child to assess the child's safety, emotional state, and physical condition, some tips are outlined below:

### *Minimal Facts: A brief description of what happened*

1. Who is/are the alleged perpetrator(s)? Are there witnesses and/or other victims?
2. What happened? Where on the child's body did the abuse take place?
3. When did it happen? Last time it occurred? Frequency?
4. Where did it happen? Establish jurisdiction.
5. What steps are necessary to assure the safety of the child and other potential victims? Are there siblings or others to whom the perpetrator(s) has access?
6. Is immediate medical attention necessary? If abuse has taken place within 72 hours for pre-pubescent children/120 hours for adolescents, a medical exam is necessary to gather evidence.

### *Tips for talking with children/adolescents:*

- Get at an eye level position with the child and introduce yourself. Let the child know your job is to make sure they are safe.
- Put the child at ease and get the child talking
- Ask the child their name, where they live, what grade they are in school
- Show interest in something about the child such as a toy, what they do for fun, holidays, etc.
- Ask the child if they know why you came to the house or that specific location
- Ask the child if they have any problems they need help with
- Thank them for talking with you and give them information about next steps

### *What NOT to do:*

- Do not ask the child to make a written statement
- Do not polygraph the child or threaten to do so
- Do not offer the child a reward for disclosing (ex: "I'll take you for ice cream if you tell me what happened")
- Do not ask the child to pretend or imagine what might have happened
- Do not touch or hold the child in any way
- Do not take the child on your lap, even to comfort a distressed youngster
- Do not promise the child something over which you have no control

It is understood that all investigations differ in some respect and the approach to **Minimal Facts** must be flexible and permit the responding officer or child protection investigator to use their own on-the-scene judgment. These guidelines do not supersede investigative needs if it is an emergency situation, safety is at risk, or an immediate arrest of the perpetrator is possible. In addition, if the child volunteers detailed information, that information should be written down, or otherwise recorded, and a report should reflect the circumstances under which the child made the disclosure. On the other hand, if the child is not volunteering information, questioning should be avoided, especially leading questions, and **Minimal Facts** should be obtained from other sources whenever possible. Many times, a guardian or another adult can tell you what the child has disclosed with enough information for a referral to the CAC.

Once **Minimal Facts** have been established and a decision made to make a referral for a forensic interview at the CAC, the caregiver should be given information about the forensic interview. First responders should give detailed information to caregivers about the CAC process including: the interview will be conducted by a trained forensic interviewer, the agencies that will be present to observe the interview, the location where the interview will take place, and why caregivers are not able to observe. First responders should inform caregivers that a victim/family advocate will work with their family through the process of the investigation. First responders can provide any other information specific to the CAC in their jurisdiction.

## Next Steps for Investigation and Referrals for Child and Family

*After the safety of the child is ensured and Minimal Facts are gathered:*

### **1. Crime Scene**

- a.** Identify crime scene - secure and photograph
- b.** Photograph and collect evidence in paper bags to preserve DNA
- c.** Photograph injuries of victim, if needed
- d.** Determine if search warrant is necessary to secure scene and evidence or if entry can be obtained by consent, including computers/cell phones/other digital evidence

### **2. Medical**

- a.** If the child discloses a recent sexual assault (within 72 hours under the age of 12/within 120 hours age 12 and older), refer the child to the appropriate Sexual Assault Nurse Examiner (SANE) certified hospital site
- b.** For assaults outside of 72/120 hours, refer to a medical professional that specializes in child abuse exams - Child Protection Team, CAC, or other hospital/medical facility that has a linkage agreement with the CAC

### **3. Child Protection**

- a.** As a mandated reporter, make a report to child protection hotline in your jurisdiction

### **4. Restraining Order/Protection from Abuse**

- a.** Advise parent/guardian/adolescent of their rights to obtain an order from the court, based on their relationship with the offender

## Draft Pocket Card

This draft pocket card can be printed double-sided onto a 5" x 7" card and laminated to create a pocket reference guide for First Responders. Adjust the information on the card to reflect your community's protocols.

### Front

AFTER-HOURS RESPONSE	RESOURCES	<p style="text-align: center;"><b>MINIMAL FACTS: GUIDELINES FOR FIRST RESPONDERS</b></p> <p style="text-align: center;">YOUR CAC NAME/LOGO</p>
<p>(Outline who to contact after hours for child abuse investigations, such as:</p> <p style="text-align: center;"><b>Local Police</b></p> <p style="text-align: center;"><b>Local Hospital</b></p> <p style="text-align: center;"><b>CAC</b></p> <p>Edit to reflect your community's protocols)</p>	<p style="text-align: center;"><b>Child Protection Hotline</b></p> <p style="text-align: center;"><b>Sexual Assault Center</b></p> <p style="text-align: center;"><b>Children's Advocacy Center</b></p>	

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<b>GUIDELINES FOR FIRST RESPONDERS</b>		
<p>The following are guidelines for gathering minimal facts while responding to a disclosure of abuse of a child between 3 and ___ years of age. Note: it is understood that every case is unique and first responders may need to be flexible in their approach to these guidelines. If you have any questions, please contact the CAC or ____.</p> <p>First Responders should attempt to ascertain a brief description of what happened by asking the questions listed. This is best done in a private, one-on-one setting. Be sure to ask questions in a supportive, non-judgmental, and non-leading way.</p>	<p style="text-align: center;"><b>Questions to Ask</b></p> <ul style="list-style-type: none"> <li>• Who is the alleged perpetrator(s)? Make sure the victim is safe and not in immediate danger.</li> <li>• What happened? You only need enough information to establish that abuse took place. Do NOT ask the victim for further details.</li> <li>• When did it happen? Does the child need immediate medical attention?</li> <li>• Where did it happen? Establish jurisdiction.</li> </ul>	<p style="text-align: center;"><b>Other Tips</b></p> <ul style="list-style-type: none"> <li>• Never ask "WHY" questions.</li> <li>• DO NOT conduct an in-depth interview.</li> <li>• Do NOT ask the victim to write a statement.</li> <li>• Do NOT attempt to speak with the victim in the presence of the perpetrator, or in front of multiple people.</li> <li>• <b>Law Enforcement:</b> File a report with Child Protection, if indicated.</li> <li>• <b>Child Protection:</b> File a report with local police, if indicated.</li> </ul>

## Additional Resources

Contact Michele Mullen at [michele@nrcac.org](mailto:michele@nrcac.org) for a draft PowerPoint to use in training first responders. This PowerPoint can be edited with your CAC's logo and relevant information.