

Work together

Screening Tool for Professionals & Parents Addressing Bullying Allegations



| 1. Was the behavior | carried out on purpose? |
|--|-------------------------|
| Yes | No |
| 2. Was the behavior intended to cause harm? (Harm may be physical, verbal, relational, social, emotional, and/or via electronic communication) | |
| Yes | No 🗌 |
| 3. Have there been patterned and pervasive acts of this behavior? (An average of two or more incidents per week, over the course of two or more weeks.) | |
| Yes | No |
| 3a. Does the behavior include electronic communications that can be viewed an unlimited number of times by an unlimited number of people? | |
| Yes | No |
| 4. Does an imbalance of power exist and/or is the target of the behavior unable to stop the bullying behavior from continuing? | |
| Yes | No |

If the answers to questions 1-4 are all **YES**, please refer this incident to a trained professional within 24 hours.

If you provided a NO response to any of the questions (not including 3a), the person completing this form should address the unwanted behavior with the young person according to school, group, or home standards of conduct. Every effort should be taken to address the behavior with the young person as soon as possible.

The full assessment form can be found in the 8 Keys to End Bullying Companion Guide for Parents & Educators.

For more information, visit bit.ly.endbullying16

