

NATIONAL CHILDREN'S ALLIANCE STANDARDS FOR ACCREDITED MEMBERS

FORENSIC INTERVIEWS

STANDARD: Forensic interviews are conducted in a manner that is legally sound, of a neutral, fact-finding nature, and are coordinated to avoid duplicative interviewing.

Rationale

Forensic interviews create an environment that provides the child an opportunity to talk to a trained professional regarding what the child has experienced or knows that resulted in a concern about abuse. Forensic interviews are typically the cornerstone of a child abuse investigation, effective child protection and subsequent prosecution, and may be the beginning of the road toward healing for many children and families. The manner in which a child is treated during the initial forensic interview may significantly impact the child's understanding of, and ability to respond to the intervention process and/or criminal justice system. Quality interviewing involves: an appropriate, neutral setting; effective communication among MDT members; employment of legally sound interviewing techniques; and the selection, training and supervision of interviewers.

The purpose of a forensic interview in a Children's Advocacy Center is to obtain a statement from a child, in a developmentally and culturally sensitive, unbiased and fact-finding manner that will support accurate and fair decision making by the involved multidisciplinary team in the criminal justice and child protection systems. Forensic interviews should be child-centered and coordinated to avoid duplication. When a child is unable or unwilling to provide information regarding any concern about abuse, other interventions to assess the child's experience and safety are required.

CACs vary with regard to who conducts the child forensic interview. At a minimum, anyone in the role of a forensic interviewer should have initial and ongoing formal forensic interviewer training. This role may be filled by a CAC employed forensic interviewer, law enforcement officers, CPS workers, medical providers, federal law enforcement officers or other MDT members according to the resources available in the community. State laws may dictate which professionals can or should conduct forensic interviews.

The CAC/MDT's written documents must include the general interview process, selection of an appropriately trained interviewer, sharing of information among MDT members, and a mechanism for collaborative case planning. Additionally, for CAC's that also conduct *Extended Forensic Evaluations* a separate, well-defined process must be articulated.

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Essential Components

A. Forensic interviews are provided by MDT/CAC staff who have specialized training in conducting forensic interviews.

The CAC must demonstrate that the forensic interviewer(s) meets at least ONE of the following *Training Standards*:

Documentation of satisfactory completion of competency-based child abuse forensic
interview training that includes child development.
Documentation of 40 hours of nationally or state recognized forensic interview training
that includes child development.

A system must be in place to provide initial training on forensic interviewing for anyone conducting a forensic interview at the CAC. Many CACs use a combination of MDT members and CAC staff to fulfill this role. While many of the members of the MDT may have received interview training, forensic interviewing of alleged victims of child abuse, and in the context of an MDT response, is considered specialized interviewing and thus requires additional specialized training.

B. The CAC/MDT's written documents describe the general forensic interview process including pre- and post-interview information sharing and decision making, and interview procedures.

The general forensic interview process should be described in the agency's written guidelines or agreements. These guidelines help to ensure consistency and quality of interviews and related discussions and decision-making. These guidelines or agreements must include criteria for choosing an appropriately trained interviewer (for a specific case), which personnel are to attend/observe the interview, preparation/information sharing with the forensic interviewer, use of interview aids, use of interpreters, communication between the MDT and the interviewer, recording and/or documentation of the interview, and interview process/methodology (such as the state or nationally recognized forensic interview training model(s)).

C. Forensic interviews are conducted in a manner that is legally sound, non-duplicative, non-leading and neutral.

Following research-based guidelines will help ensure a sound process. These guidelines as recognized by the members of the MDT should be monitored over time to ensure that they reflect current day practice. Guidelines should be developed and followed to create an interview environment that enhances free recall, minimizes interviewer influence and gathers information needed by all the MDT members involved to avoid duplication of the interview process.

D. MDT members with investigative responsibilities are present for the forensic interview(s).

MDT members, as defined by the needs of the case, are routinely present for the forensic interview. This practice provides each MDT member access to the information necessary to fulfill their professional role and ensures that their respective informational needs are met. Members may include local, state, federal or tribal child protective services, law enforcement and prosecution; they may vary based on case assignments but these parties are routinely present. Observation of interviews does not have to be limited to these parties; the unique needs of the case may require others to observe.

E. Forensic interviews are routinely conducted at the CAC.

Forensic interviews of children, as defined in the CAC/MDT's written documents, will be conducted at the CAC rather than at other settings. The CAC is the setting where the MDT is best equipped to meet the child's needs during the interview.

On rare occasions when interviews take place outside the CAC, steps must be taken to utilize appropriate forensic interview guidelines. Some CACs have established other interview spaces such as a satellite office. MDT members must assure the child's comfort and privacy and protection from alleged offenders or others who may unduly influence the child.

Rated Criteria

F. The CAC/MDT's written documents include:

selection of an appropriate, trained interviewer;
sharing of information among MDT members; and
a mechanism for collaborative case planning.

The CAC/MDT's written documents should outline in writing how these tenets are assured. In doing so, the documents provide for a defined, proactive process for decision making in regards to the forensic interview.

G. The CAC and/or MDT provide opportunities for those who conduct forensic interviews to participate in ongoing training and peer review.

The CAC and/or MDT must provide initial and ongoing opportunities for professionals who conduct forensic interviews to receive specialized training. Training forums may include: attendance at workshops or conferences, reading current research and literature on forensic interviewing, role playing, interviewing children on non-abuse related topics, review of recorded interviews, observations of interviews, peer review, and ongoing supervision.

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	Ongoing education in the field of child consisting of a minimum of 3 hours per ever			interviewing
	Participation in a formalized peer review pro	• •		

In addition, there must be demonstration of the following Continuous Quality Improvement

H. The CAC/MDT coordinate information gathering whether through history taking, assessment or forensic interview(s) to avoid duplication.

All members of the MDT need information to complete their assessment/evaluation. Whether it is the initial information gathered prior to the forensic interview, the history taken by the medical provider prior to the medical evaluation, or the intake by the mental health provider every effort should be made to avoid duplication of information gathering from the child and non-offending family members and should be a process of information sharing among MDT members.