

**PROTOCOL FOR JOINT INVESTIGATION BY
SOCIAL WORKERS AND POLICE OFFICERS
OF ALLEGED AND SUSPECTED CASES OF
CHILD ABUSE – NORTHERN IRELAND**



Keeping People Safe



March 2018

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Statement of Commitment

The aim of this Protocol is to ensure that key partner agencies work together effectively to ensure that the best interests of the child underpin every aspect of child protection work

The partners to this multi-agency protocol are as follows: -

Health and Social Care Board (HSCB)
Police Service Northern Ireland (PSNI)
Belfast Health and Social Care Trust (HSCT)
Northern Health and Social Care Trust (HSCT)
South Eastern Health and Social Care Trust (HSCT)
Southern Health and Social Care Trust (HSCT)
Western Health and Social Care Trust (HSCT)
Regional Emergency Social Work Service (RESWS)
National Society for the Prevention of Cruelty to Children (NSPCC)

This document updates and replaces the last edition of the Protocol which was issued in 2016. It is available from HSCB website www.hscboard.hscni.net or www.psni.police.uk

It is intended to update this document on an annual basis. However, amendments will be made as and when required. Therefore, your comments on this document are of great value because they are based on your knowledge and experience. If you have noticed an omission, or you think it can be improved in any other way, please get in touch with us at:-

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FOREWORD

Protecting, safeguarding and promoting the welfare of our children and young people is one of the most important tasks we undertake. It is one of the ways in which we, Health and Social Services, the Police Service of Northern Ireland, and NSPCC are to be judged.

Our knowledge and understanding of child abuse has grown extensively over the last three decades. However, we continue to work in an ever changing environment. For example, the power of the internet, its accessibility and its ease of use has transformed the way in which all of us behave, yet has created an environment where those suspected of the abuse of children feel safer to conduct their activity. We have seen this in the complex and often hidden nature of child sexual exploitation such as in the use of mobile communications and social media. This and other emerging threats have been incorporated into this updated document to ensure that meeting the welfare needs of children remains paramount.

Likewise, organisational landscapes are also shifting, through reform but also through economic necessity. With the reported levels of child abuse and neglect rising year on year http://www.psni.police.uk/index/updates/updates_statistics.htm, new approaches to tackling child abuse and safeguarding children and getting the best from individuals and teams has been undertaken, and reflected in this document.

Ultimately, the public in Northern Ireland rightly expect us to react positively to critical events. Against this challenging backdrop is our determination to prevent harm, to safeguard children and young people and to pursue offenders. For social workers and police officers, working with, and listening to, children, young people and families is fundamental to what we do. However, it's not just what we do that matters, but how we do it, hence the importance of this Protocol.

1. INTRODUCTION

1.1 This Protocol has been updated to assist police officers and social workers, and, other practitioners who refer to the document, to better safeguard and protect those children and young people who are the subject of joint police and social services child abuse investigations. The Protocol aims to provide clear standards and guidance and should be used in conjunction with 'Achieving Best Evidence Guidance on interviewing victims and witnesses, the use of special measures, and the provision of pre-trial therapy'.

1.2 Although the primary responsibility for safeguarding children rests with parents, a principle enshrined in the Children (Northern Ireland) Order 1995, it is also the duty of every police officer and social worker to safeguard and protect children. The abuse of children, whether sexually, physically, emotionally or by neglect, whether inside the home or outside, is unacceptable. Police and Social Services play an important role in preventing such abuse and in the investigation of crimes committed against children.

1.3 International human rights standards, particularly the United Nations Conventions on the Rights of the Child, identify four core principles: -

- The best interests of the child must be paramount;
- Children have a right to be heard;
- Children have a right not to be discriminated against;
- The state has a duty to protect children.

1.4 In addition to the above, Articles 2 and 3 of the European Convention on Human Rights (ECHR) reminds us that we, as statutory organisations, have a duty to protect, including the 'positive obligation' to do so, and ensure that no one is subjected to inhuman or degrading treatment. Further requirements for police officers are contained in Section 32 of the Police Act (2000), namely the duty to investigate, to protect life and property, to preserve order, to prevent the commission of offences, and where an offence has been committed to take measures to bring the offender to justice. Requirements for social workers are contained in Article 66 of the Children (NI) Order 1995 (click here: <https://www.legislation.gov.uk/nisi/1995/755/article/66>), which places a duty on Social Workers to investigate whether a child is suffering or likely to suffer "significant harm".

1.5 This Protocol also seeks to enhance and complement those standards already expected within the Police Service, Health and Social Services, and other investigatory bodies. However, Joint Protocol practitioners should have a working knowledge of the following legislation and important publications.

- European Convention on Human Rights (1953) www.echr.coe.int
- The Human Rights Act 1998 www.legislation.gov.uk/nisi/1995/755/article/6
- The Children (Northern Ireland) Order 1995, supplementary legislation and associated volumes of guidance www.legislation.gov.uk/nisi/1995/755
- Victim Charter <https://www.nidirect.gov.uk/articles/victim-charter>
- Witness Charter <https://www.justice-ni.gov.uk/publications/witness-charter>
- Working Arrangements for the welfare of Safeguarding of child victims of human trafficking <https://www.health-ni.gov.uk/publications/working-arrangements-welfare-and-safeguarding-child-victims-human-trafficking>
- The Sexual Offences (NI) Order 2008 www.legislation.gov.uk/nisi/2008/1769

- Criminal Evidence (NI) Order 1999 www.legislation.gov.uk/nisr/2013/251
- Safeguarding Board (Northern Ireland) Act 2011 www.legislation.gov.uk/ia/2011/7/
- Justice Act (Northern Ireland) 2011 www.legislation.gov.uk/id/ia/2011
- Justice Act (Northern Ireland) 2015 www.legislation.gov.uk/ia/2015
- The Serious Crime Act 2015 <http://www.legislation.gov.uk/ukpga/2015/9/section/76/enacted>
- ‘Co-operating to Safeguard Children’ (DHSSPS 2016)
<https://www.dhsspsni.gov.uk/publications/co-operating-safeguard-children>
- Achieving Best Evidence Guidance on interviewing victims and witnesses, the use of special measures, and the provision of pre-trial therapy.
https://www.google.co.uk/?gws_rd=ssl#q=Achieving+Best+Evidence
- Understanding the Needs of Children in Northern Ireland (UNOCINI) DHSSPS 2008
https://www.google.co.uk/?gws_rd=ssl#safe=active&q=UNOCINI+DHSSPS+2008
- Data Protection Act 1998
- The General Data Protection Regulation (May 2018)
- SBNI Information Sharing Agreement www.safeguardingni.org
- SBNI Child Protection/Safeguarding in Specific Circumstances – Child Sexual Exploitation
www.hscbusiness.hscni.net/pdf/June_2015_SBNI_CSE_Policy_0.5.pdf
- Revision of DHSSPS Children ‘Sharing to Safeguard’ (Revised HSCC 3/96)
www.dhsspsni.gov.uk/de/print/child_protection_guidance
- Safeguarding Board for Northern Ireland – Policy Framework
www.safeguardingni.org/consultation-child-protection-and-safeguarding
- Manual of Practice: Public Protection Arrangements in Northern Ireland
www.publicprotectionni.com
- Regulation and Quality Improvement Authority Inspections (RQIA) www.rqia.org.uk/inspections
- Child Sexual Exploitation in Northern Ireland: Report of the Independent Inquiry – Kathleen Marshall 2014 www.rqia.org.uk/cseinquiry
- The Bichard Inquiry Report (2004)
<https://www.nscb.org.uk/publications/bichard-inquiry-report-2004>
- HMIC: In Harm’s Way: The Role of the Police in Keeping Children Safe (July 2015)
<https://www.justiceinspectorates.gov.uk/hmic>
- HMIC: Online and on the Edge: Real Risks in Virtual World – An inspection into how forces deal with online sexual exploitation of children (July 2015) (Click Here)
<https://www.basw.co.uk/resource/?id=4126>

1.6 The 'Joint Protocol Core Group' recognises the complexities and difficulties faced by investigators from the Police, Social Services and the NSPCC. It is also important that all other relevant agencies are active participants assisting investigators in the information-sharing, early assessment, preparation and planning processes in the investigation of alleged or suspected cases of child abuse, and thereafter in implementing care and support plans for the child and wider family, as appropriate.

2. Principles underpinning the Protocol for Joint Investigation

2.1 The following principles should apply to all investigations:-

- The child's welfare must always be paramount and this overrides all other considerations;
- Like all criminal investigations, one relating to child abuse is a search for the truth and therefore should not rely entirely on the victim's statement or lack of engagement;
- A proper balance must be struck between protecting children and their rights and respecting the rights and needs of the child, those with Parental Responsibility, parent / carers and families; but where there is conflict, the child's interests are paramount;
- Children have a right to be heard, listened to and taken seriously. They should be consulted and involved in all matters and decisions which may affect their lives in a way that is commensurate with their age and understanding. An Advocate, Intermediary or similar may assist in this process;
- Those persons with Parental Responsibility and those with day-to-day care of children should be consulted and involved in matters which concern the children they have care of;
- Actions taken to protect a child, including investigation, if possible, should not cause the child any further unnecessary distress or add to any damage already suffered;
- Intervention should not deal with the child in isolation, whether within the family or wider community: the child must be considered in a family setting, with the impact of concerns also informing an assessment of the needs of other children within the family;
- Where it is necessary to protect the child from abuse, alternatives should be explored which do not involve removing the child from his/her family and which minimise disruption to the family whilst ensuring the safety of the child;
- Actions taken by agencies must be considered, proportionate and well informed so that they are sensitive to and take account of the child's age, gender, stage of development, physical or mental disability, religion, culture, language, communication needs, race and, in relation to adolescents, sexual orientation;
- All agencies concerned with the protection of children must work together on an inter-agency basis in the best interests of children and their families and understand each other's roles, powers and responsibilities;

2.2 This Protocol for Joint Investigation offers an agreed way of working which should ensure that:-

- The PSNI and Social Services maximise co-operation when investigating child abuse;
- The process minimises distress to the child by maximising the co-operation of services and resources essential to the investigation;
- All relevant legislation is complied with and Child Protection Procedures are properly followed and as far as possible children are protected from further abuse;
- Any difference of opinion should be negotiated immediately. However, where this difference is unable to be resolved, it should be escalated to line management;

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- Records are maintained and processes monitored and evaluated throughout the Protocol for Joint Investigation process. It should be noted that all documents produced in an investigation may be subject to disclosure in criminal and civil proceedings;
- A sound platform is provided for further protective work in relation to children and their families;
- Learning is captured. This will also inform future updates of this Protocol and Child Protection Procedures generally; and
- Staff implementing the Protocol avail of appropriate training that they are competent and are provided with supervision to support the development of their practice (see Chapter 10).

3. Key Terms

3.1 A Child

A child is defined as a person under the age of 18.

3.2 Parental Responsibility

Parental Responsibility is defined in Articles 5, 6 and 7 of The Children (Northern Ireland) Order 1995 ([Click Here](#)).

3.3 Legal Age of Consent

The legal age of consent to sexual activity is 16 years of age.

3.4 Criminal Age of Responsibility

The criminal age of responsibility is 10 years of age.

3.5 Significant Harm

While there is no absolute criteria for judging what constitutes significant harm, the Children (NI) Order 1995 defines both **harm** and what is **significant**; -

“**harm**” means ill-treatment or the impairment of health or development and the question of whether harm is significant shall be determined in accordance with Article 50(3);

Where the question of whether harm suffered by a child is **significant** turns on the child’s health or development, his health or development shall be compared with that which could reasonably be expected of a similar child.

In practice, this may include the degree, extent, duration and frequency of harm. Sometimes, a single traumatic event may constitute significant harm, e.g. a violent assault, sexual assault, suffocation or poisoning. More often, significant harm is a series of events, both acute and long-standing, which interrupt, change or damage the child’s physical, mental, emotional and psychological development.

When investigating allegations of abuse against children, practitioners need to be alert to the possibility that there may also be adults at risk of harm and liaise with Adult Safeguarding Services.

3.6 Physical Abuse

Physical abuse is deliberately physically hurting a child. It might take a variety of different forms, including hitting, biting, pinching, shaking, throwing, poisoning, burning or scalding, drowning or suffocating a child.

3.7 Emotional Abuse

Emotional abuse is the persistent emotional ill-treatment of a child. It is also sometimes called psychological abuse and it can have severe and persistent adverse effects on the child’s emotional development. Emotional abuse may involve deliberately telling a child that they are worthless or unloved and inadequate. It may include not giving a child opportunities to express their views, deliberately silencing them, or ‘making fun’ of what they say or how they communicate. Emotional abuse may also involve bullying – including online bullying through social networks, online games or mobile phones – by a child’s peers.

Note - Some level of emotional abuse is involved in all types of ill-treatment of a child, though it may occur alone.

3.8 Sexual Abuse

Sexual abuse occurs when others use and exploit children sexually for their own gratification or gain or the gratification of others. Sexual abuse may involve physical contact, including assault by penetration (for example, rape, or oral sex) or non-penetrative acts such as masturbation, kissing, rubbing and touching outside clothing. It may include non-contact activities, such as involving children in the production of sexual images, forcing children to look at sexual images or watch sexual activities, encouraging children to behave in sexually inappropriate ways or grooming a child in preparation for abuse (including via e-technology). Women can commit acts of sexual abuse, as can other children.

Note - The potential risks to children from developments in Information and Communications Technology need to be constantly reviewed. Investigators need to be always vigilant in relation to patterns which indicate the organised sexual exploitation of children.

3.9 Neglect

Neglect is the failure to meet a child's basic needs, whether it be adequate food, clothing, hygiene, supervision or shelter that is likely to result in the serious impairment of a child's health or development. Children who are neglected also suffer from other types of abuse.

3.10 Exploitation

Exploitation is the intentional ill treatment, manipulation or abuse of power and control over a child or young person; to take selfish or unfair advantage of a child or young person or situation, for personal gain. It may manifest itself in many forms such as child labour, slavery, servitude, engagement in criminal activity, begging or other financial fraud or child trafficking. It extends to the recruitment, transportation, transfer, harbouring or receipt of children for the purpose of exploitation. Exploitation can be sexual in nature.

General Considerations

A child may suffer or be at risk of suffering from one or more types of abuse. Abuse may take place on a single occasion or may occur over time.

The examples listed in the categories above are not exhaustive nor should they be taken as definitive proof that abuse has taken place. There also may be other considerations and these should not be ignored. Practitioners need to be alert to the possibility of abuse manifesting itself in new ways not previously considered.

For further information on 'harm in specific circumstances' see Appendix A

4. Investigating Child Abuse

Context

4.1 The Police, Social Services and NSPCC each have their own roles and responsibilities in conducting investigations. They also have specialist skills in terms of assessing and investigating allegations of child abuse. In every investigation of suspected or alleged child abuse, it is necessary for these skills to be combined to provide maximum protection for those children who are at risk or have suffered significant harm. The purpose of this Protocol therefore is to provide guidance in relation to how investigators will co-ordinate their roles and enquiries.

4.2 The Police are tasked with statutory responsibility to prevent and detect crime and to gather evidence in the investigation of alleged or suspected criminal offences committed against children. The foremost objective, however, in common with HSC Trusts and the NSPCC, will be the promotion of the welfare and protection of the child.

4.3 Social Services are tasked with statutory responsibility for child protection investigations. They have a statutory responsibility to make, or cause to be made, inquiries when there is "reasonable cause to suspect that a child who lives, or is found, in the authority's area is suffering, or is likely to suffer, significant harm to decide whether it should take any action to safeguard or promote the welfare of children." (Children (NI) Order 1995 Article 66 (1) (b))

4.4 Where Social Services receive a report of 'concern for a child', such reports should not automatically be referred into the 'Joint Protocol' process without a thorough and rigorous assessment. Where the context of such a report is unclear or where there is limited/insufficient information to allow the case to be properly assessed then initial enquiries should be made by the receiving agency to ascertain if these concerns amount to **an allegation of child abuse or there is reasonable cause to suspect child abuse** before the case is referred into the 'Joint Protocol' process. These initial inquiries should be made as part of the assessment. **If and ONLY if** after these inquiries have been conducted and there is still insufficient information to allow Social Services to determine whether or not the case should be referred into the 'Joint Protocol' process then additional inquiries as part of the assessment may include if necessary making contact with the supervisor, within the Central Referral Unit, to seek information relating to the person(s) concerned.

4.5 It is important, where a child is the victim of or witness to alleged or suspected child abuse that an assessment is conducted to establish the context of what is suspected or alleged. The safety and welfare of the child must be paramount and initial considerations must include the need to take immediate action in terms of making initial decisions about safeguarding and the criminal investigation. As such some initial questioning of the child may be necessary.

Any initial questioning should be intended to elicit a brief account of what is alleged to have taken place; when it becomes apparent that a referral is required under the Protocol for Joint Investigation, then, a more detailed account should not be pursued at this stage but should be left until the formal interview takes place. In depth questioning should not be conducted nor should a 'statement' be recorded at this stage. If the witness response to the open question "Tell me what happened to you" does not include what when who and where, the following questions should be asked and any responses recorded contemporaneously: -

- What happened? (Enough detail to establish what offence has taken place)
- When did it happen? (In order to prioritise actions)

- Who is involved? (Enough information to trace suspects and other potential Victims)
- Where did it happen? (Enough information to identify all relevant scenes)

This is because this information is likely to influence decisions made in respect of the following aspects of both the criminal and child protection investigation: -

- Forensic and medical examination of the victim;
- Scene of crime examination;
- Interviewing of/speaking to other witnesses;
- Arrest of alleged offender(s); and
- Witness support;
- Need to safeguard the victim/witness.

Some initial questioning may also be needed in order to obtain enough information to formulate a risk assessment for the victim/witness, to take whatever action is necessary to remove or reduce any risks that are identified.

4.6 Before making a referral, the police officer or social worker should ensure they have accessed all available and relevant information to assess the child's/children's situation. There needs to be recognition by those agencies to which this Protocol applies that the assessment and investigative procedures/processes of partner agencies are sound and judgments well informed. Detailed discussion between the agencies will take place at the point of referral to examine the initial information gathered, to share any additional information held by the receiving agency and to determine whether the referral should be agreed as a Joint Investigation.

4.7 This protocol supports the exchange of information between the PSNI and Social Services to safeguard children in the investigation of alleged or suspected child abuse. All such exchanges of information can be made verbally but should be followed up in writing on the form PJI 1. A written record must be made of what information has been shared and the rationale for doing so.

Referral Stage

4.8 'Referrals' to the police service under this Protocol must be made on the basis that: -

1. There is an allegation or reasonable cause to suspect the abuse of a child; or
2. There is a suspicion that a crime has been committed against a child relating to the categories of abuse within this protocol (physical, sexual or wilful neglect (cruelty)); or
3. In some cases, abuse may not constitute a criminal offence, e.g. neglect through poor parenting rather than wilful cruelty. Similarly, a criminal offence may not constitute abuse (e.g. consensual sex between two 15 year olds. In cases such as these, referral into the CRU is required with a proportionate response that is focused on principles of proportionality, least intervention and education rather than prosecution.

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4.9 Reports which amount to 'concerns' for a child should not be referred under this Protocol, without initial enquiries being made to ascertain if these concerns amount to an allegation of child abuse or reasonable cause for suspecting abuse.

4.10 The decision to commence a 'Joint Investigation' will not take place at the point of referral. The joint decision to initiate, or not, a 'Joint Investigation' follows an assessment of the information, the allegation and its context.

4.11 It should be noted that where a clear allegation of child abuse is made, by any person, or, where grounds exist to suspect child abuse, the referring professional should not in these circumstances be conducting further enquiries until the outcome of the joint assessment, between HSCT and police, under the terms of this Protocol, is agreed. However, this does not negate the need, where necessary, to ensure all appropriate steps have been taken to ensure the immediate safety of the child/children.

4.12 The agency making the referral will do so by completing the electronic Form PJI 1 with all relevant available information of the allegation, its context, and any relevant information which will assist the assessment and decision-making process. This is forwarded electronically (via the secure CJSM network) to the partner agency following which immediate consultation by telephone will then take place between the relevant Social Worker and the Police in relation to the referral. Staff from both agencies must be available at the time to discuss the referral and agree on its outcome.

4.13 The receiving agency of the referral will review the information contained on the Form PJI 1 and add any further information as necessary that assists in the assessment and decision-making process.

4.14 Referrals to the police will be directly to the Central Referral Unit (CRU) during office opening hours (0800 – 1700 weekdays and 0900 – 1700 at weekends) or, outside of CRU opening hours, to a PSNI Call Management Centre. The CRU may be contacted on telephone number 02890 259299 or '101', the general police telephone line. The CRU email address CRU@psni.pnn.police.uk

4.15 In circumstances which are urgent and require immediate action and the referring agency is unable to access the electronic Form PJI 1 (Appendix C) they can make the referral initially by telephone and complete the form PJI 1 as soon as practicably afterwards.

4.16 Once the initial assessment has been conducted and outcome decided the nominated Police person, within the CRU, will then complete the Form PJI 1 detailing the outcome decided and the rationale for this decision.

4.17 In any circumstances where during the initial assessment, it becomes clear that the child is on or has previously been on the child protection register then this should be actively considered as an aggravating factor when deciding on the outcome.

4.18 The nominated police person within the CRU will then forward electronically (via the secure CJSM network) to the relevant nominated Social Worker the fully completed Form PJI 1 for review, action and for its storage with the relevant Social Services case file.

4.19 In order to make a referral, and engage in initial consultation between agencies, staff are required to have completed Module 1 Joint Protocol Training ('Initial Consultation and Interview Assessment Training' for practitioners) or Joint Protocol Manager's Training Programme.

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4.20 There may be exceptional circumstances where to ensure there is no delay and to protect that child, other children or adults from immediate serious harm, a Social Worker who has not completed Module 1 Joint Protocol Training, can make a referral to the CRU directly, subject to having discussed the matter and agreed an outcome with their manager/Senior Social Worker. This will enable that Social Worker to make the referral in accordance with the Protocol and agree with the CRU the appropriate outcome (the referring Social Workers name being recorded on the top of the Form PJI 1 and the Manager/Senior Social Worker name at the bottom). Where the outcome differs from that previously agreed by that Social Worker and their Manager/Senior SW then the case will be brought to the attention of that Manager/Senior Social Worker who should then immediately liaise with the CRU directly to resolve the disagreement.

Information Gathering and Recording

4.21 As part of any initial assessment and subsequent consultation process as part of a referral, the nominated person from each agency will gather information, which will be the basis for making a decision as to the need for a joint investigation. This information gathered and shared will also be updated onto each agency's information systems (see Appendix B – Referral Information Checklist).

4.22 The nominated person from each agency will consult with any other professional or other person, whose knowledge of the child and/or family may be relevant to the assessment and outcome of the case.

4.23 In cases of suspected child sexual abuse (in children and young people under 18 years of age), consultation should also take place with a relevant medical professional at The Rowan.

4.24 Where a member of the CRU, a Child Abuse Investigation Unit (CAIU) officer, other relevant police officer or a Social Worker has information to share, with the necessary approval of their supervisory officer/line manager, they should, for future reference and auditing purposes, maintain a record.

4.25 Where necessary, the nominated police officer will check Police computer systems i.e., NICHE, PNC, VISOR and PND for relevant information that may be of use in reaching a decision about the management of the case and ensure it is cross referenced on Form PJI 1.

4.26 The nominated Social Worker will check all information systems and any other relevant data base for information that may be of use in reaching a decision about the management of the case and ensure that it is cross referenced on Form PJI 1.

4.27 The information gained from professionals or other persons who may have knowledge of the child, family or circumstances of the child should always be considered in making the decision about the Joint Protocol assessment outcome, and any other future action, in relation to that child and/or their family.

4.28 The investigation of any form of homicide, or suspected case of homicide, is specialised and will be investigated by the Major Investigation Team (MIT), in accordance with current police guidelines. However, in the case of a suspected child homicide, Senior Investigating Officers should at least seek the expertise of CAIU officers or, if appropriate, have CAIU representation on the Major Investigation Team. Senior Investigating Officers should also seek information from other partner agencies to establish whether there have been previously recorded concerns about that child, or related children, or current child safeguarding concerns.

Outcome of Initial Assessment under Joint Protocol

4.29 If a decision is made that the case will not proceed under Protocol for Joint Investigation one of the following decisions must be made and rationale recorded: -

- A single agency intervention or investigation by Social Services for child protection or family support;
- A single-agency Criminal Investigation will be undertaken by the Police;
- No further action.

If it is decided NOT to pursue a joint investigation – the nominated CRU person must record the agreed decision and the rationale for it, at this stage, on Form PJI 1.

Potential Case Management Reviews

4.30 There will be circumstances where agencies must escalate cases to line management in order to consider if the matter warrants notification to the Safeguarding Board for Northern Ireland for the purposes of potentially undertaking a Case Management Review.

The cases to which this applies are where: -

A child has died or has been significantly harmed **and** when any of the following apply: -

- i. Abuse or neglect of the child is known or suspected;
- ii. The child or a sibling of the child is, or has been, placed on the Child Protection Register; or
- iii. The child, or a sibling of the child, is or has been 'looked after'.

Joint Investigation

4.31 If it is decided that a Joint Investigation should be conducted then, in addition to forwarding Form PJI 1 to the relevant social worker, as above, the nominated police person at the CRU will notify the relevant CAIU and forward to them a copy of Form PJI 1.

4.32 A joint investigation can begin where there is an allegation or reasonable suspicion that a child has suffered abuse in one of the following sets of circumstances: -

- Any sexual offence committed against a child;
- Neglect or ill-treatment which is actionable under Section 20 Children and Young Person's (NI) Act 1968;
- Physical harm to/assault of a child;
- When children are reported to be displaying sexualised behaviour or harmful sexual behaviour. If this relates to children aged 10 or over a joint investigation will commence. (This should also be recognised as a possible indicator that they are, or have been, a victim of child abuse. In addition to Joint Protocol working, in such cases it is important to ensure that the information is communicated to the local-Statutory and Voluntary agencies for support services);

- Children who are subject to trafficking.

See also Appendix A 'Harm in Specific Circumstances'.

4.33 It is important to note that the likelihood or otherwise, of a prosecution is NOT the criterion for a joint investigation. Children who have been the victim of 'abuse' will not always support an investigation or want to proceed through the criminal justice system. This does not remove the responsibility of Police and Social Services to conduct a thorough, effective and timely investigation.

NB - Where it is decided that a joint investigation should be conducted every effort should be made from the outset to determine if the alleged perpetrator is in paid or voluntary employment with children by checking if they have been ACCESS NI checked; DBS (Disclosure Barring Service) checked; or subject of a European Arrest Warrant.

Single Agency Investigations

Social Services

4.34 Where a case falls within the following criteria, Social Services may conduct a single agency investigation following consultation with the Police.

- Those involving purely emotional abuse (where there is no evidence or indication of sexual/physical abuse or neglect): -
- Cases involving children under the age of criminal responsibility (i.e. under the age of 10 years). Police will proactively assist Social Services, in these cases where appropriate to do so (In cases of suspected sexual assault, dealt with as 'single agency' within this section, consideration should be given to utilising the service of The Rowan, despite the ages of the parties involved);
- Those cases involving concerns regarding sexualised behaviour of the child. Where Social Services conduct a single agency investigation in such circumstances it is important to ensure that the information is communicated to relevant Statutory and Voluntary agencies for support services;
- Where a person who is, or has been, subject to risk management under Public Protection Arrangements Northern Ireland (Criminal Justice (NI) Order 2008) moves into the household.

4.35 If during the course of a Social Services single agency investigation, into any case as outlined above, additional information comes to light that leads one to suspect that a child has been abused, contact should be made with the Police Central Referral Unit and a discussion will be commenced which may result in Joint Investigation.

The Police

4.36 Where a case falls within the following criteria, Police will conduct a single agency investigation following consultation with Social Services: -

- Where the alleged offender is not known to the child or child's family, (i.e. stranger abuse) and where there are no child protection concerns, after consultation with Social Services, about that child or in regard to other children or parental supervision;

- Where an allegation has been made by an adult of abuse having occurred in childhood.

Note - Where it has been identified that the alleged/suspected abuser in such cases currently has contact with children in a family or community setting Social Services should be notified to enable a risk assessment to be conducted under Article 66 of the Children (Northern Ireland) 1995 to establish the likelihood of significant harm to an identifiable child.

Strategy Discussion/Meeting

4.37 When a decision has been made that a joint investigation should be undertaken by Police and Social Services and/or NSPCC, an initial Strategy Discussion under Joint Protocol must take place within 24 hours from referral. Normally it will be appropriate for the Strategy Discussion to take place by telephone, but in other instances depending on the complexity of the issues a Strategy Meeting may be required. The Strategy Meeting, if required, must take place as soon as it is practicable.

Note – if the child’s allocated social worker has not completed Module 1 Joint Protocol Training it is important that wherever possible where the case is ‘complex’ and it is agreed that a meeting is necessary they are present at the ‘Strategy Meeting’ in addition to a suitably qualified social worker who is Module 1 trained.

4.38 This strategy discussion will be conducted between a nominated police officer within the CAIU and the nominated investigating Social Worker/NSPCC member of staff. In order to investigate cases of alleged or suspected child abuse, and conduct strategy discussions, the relevant persons from each agency must have successfully completed Module 1 Joint Protocol Training.

4.39 The purpose of the initial Strategy Discussion, or Strategy Meeting, is to plan the ‘Joint Investigation’ and clarify what action needs to be taken jointly or separately in the investigation. This discussion should be action-orientated with the purpose of planning the investigative steps.

4.40 All strategy discussions/meetings including key information/points considered, its context and the relevant outcomes (including ‘Rationale’) MUST be recorded on the form PJI 2 (this includes both the initial strategy discussion/meeting and **ALL** other strategy discussions/meetings). **Appendix C**

4.41 Form PJI 2 is an electronic document and should be completed by persons from either agency agreeing the strategy at the time of the Strategy Discussion/Meeting or as soon as practicable thereafter. Once completed, the form should be sent electronically (via secure CJSM network) to the relevant nominated person from the partner agency for them to review and endorse what has been recorded and store with the relevant case file.

4.42 The initial strategy discussion will only include the relevant Police officer and Social Worker/NSPCC member of staff. Relevant information provided by other professionals or persons will be shared to assist in the assessment and decision-making process.

4.43 The initial Strategy Discussion/Meeting should address the following points (although this is not an exhaustive list): -

- Whether urgent action is needed to protect the child, children in the family or any other child and who will be responsible for such action?
- What other information is needed to further the investigation and who will seek it?
- What issues of ethnicity race, religion, culture, gender or disability are raised in the case, how and by whom they are to be addressed and what advice needs to be sought?

- How information will be shared, when, and by whom, with those with parental responsibility in respect of each child, and the child themselves.
- Who will be interviewed, by whom, and the order in which the interviews will take place?
- Investigators will need to consider if a forensic medical examination is required and, if so, by whom? In reaching this decision specialist advice e.g. from medical staff at The Rowan may be required.
- Investigators will also need to consider the need for a medical examination in cases of child sexual abuse, where a forensic medical examination has not taken place. This decision will be reached through consultation the Rowan Sexual Assault Referral Centre.
- What specialist advice might be needed and who will obtain it? (e.g., Registered Intermediary, Paediatrician, FMO, etc.)
- What other roles need to be performed and by whom?
- Investigators will need to consider arrangements for reporting back to the other agency - all persons responsible for any part of the investigation must be clear about the arrangements for reporting both orally and in writing.
- Investigators will need to consider what pro-active steps can be taken, by both agencies, either individually or jointly, that might disrupt any alleged criminal activities by suspects. This might include an Emergency Protection Order, Police Protection in accordance with Article 65 of the Children (NI) Order 1995, Risk of Sexual Harm Order, Harbourers Warning Notice or Sexual Offences Preventative Order or Article 67, 68 and 69 of the Children (Northern Ireland) Order 1995. Family Homes and Domestic Violence (Northern Ireland) Order 1998.

4.44 Where more than one Strategy Discussion/Meeting occurs, these **must also** be recorded on the form PJI 2. The detail recorded should include any new information and any agreed additional or alternative strategy outcome. This should be completed at the time of the subsequent Strategy Discussion(s)/Meeting(s) or as soon as practicable thereafter. Once completed, the form should be sent electronically (via secure CJSM network) to the relevant nominated person from the partner agency for them to review, and agree what has been recorded, and store with the relevant case file.

4.45 Any subsequent Strategy Discussion/Meeting will always include Police and Social Services but may also require the attendance of other involved professionals depending on the individual case. Relevant Information submitted by other professionals will form part of these Strategy Discussions/Meetings. They may include a Forensic Medical Officer, GP, and Paediatrician, other professionals and/or a person with special knowledge in dealing with children who have disabilities.

4.46 At any Strategy Discussion/Meeting where a decision is made to end the 'Joint Investigation' both the Police and Social Services should not lose sight of the fact that they have a continuing responsibility to investigate fully any allegation of child abuse about which they have been made aware. (Article 32) Police Act 2000 and Social Services – (Article 66) Children Order. **A 'Joint Protocol' investigation is only concluded when it is agreed that one or both of the PSNI/Social Services no longer have a role or the case is concluded by the PPS or at court. If the joint decision is made to end the 'Joint Investigation' then a Form PJI 5 should be completed (Appendix C).**

NB - Where practitioners encounter disagreements that cannot be negotiated and agreed upon, the matter will be brought to the attention of line management who will immediately liaise directly with their counterpart in the other agency to resolve the disagreement.

4.47 During the initial strategy discussions it is important to recognise that a pre-interview assessment (PIA) may not be the first task undertaken. For example, it may be more appropriate to interview other witnesses or the referrer or secure other forms of potential evidence e.g. CCTV. The practice of going straight to PIA may not be the best option for the child or the family and other options may be explored first especially where a child is traumatised and needs time - physically and mentally. There have been times when, during the PIA it's become clear that the referral information was not correct and/or that 'abuse' had not occurred and that a PIA was not, therefore, required. Furthermore, there may be cases where a Registered Intermediary assessment is required. This should ideally occur before a PIA, not after as this could cast doubt on the child's ability to understand the process if there are significant communication difficulties.

Medical Examinations

4.48 Consent must always be obtained for a medical examination.

4.49 Conducting a medical examination without having obtained informed consent may constitute an assault. If a medical examination is considered appropriate, at the Strategy Meeting, it is the responsibility of the examining Doctor to obtain relevant consents.

4.50 A paediatric forensic medical examination may only be carried out with the consent of a child (if the child has the capacity to give consent) or with the consent from a person with parental responsibility.

4.51 If there is no one with parental responsibility available, or they refuse consent and are not believed to be acting in the child's best interest, then the relevant Social Worker should seek legal advice to consider an appropriate way forward, including an application to Court.

4.52 A child aged under 16 years of age can give consent if they have 'sufficient understanding and intelligence to enable him or her to understand what is fully proposed' (Gillick v West Norfolk and Wisbech AHA, 1985 & Fraser Guidelines). This includes consideration of whether they can: -

- Understand the information relevant to the decision;
- Retain that information;
- Use and weigh up the information as part of the process of making the decision; and
- Communicate their decision whether by talking, using sign language or any other means.

4.53 The issue of consent should be considered at an early stage of this 'Protocol for Joint Investigation' particularly where the parent or carer is a suspect. In such circumstances a contingency plan for parental non-consent should be agreed.

4.54 In any case, where a court order has been issued, a police officer or social worker arranging a medical examination should ask to see a copy of the order which contains all the relevant detail, for example the date, time and place of the examination, before the examination is conducted.

NB: Separate consent is required for the medical examination and any photographic documentation.

Role of Forensic Medical Officer/Paediatrician

4.55 In the case of children who are under the age of 13, or young people over that age, but who have additional vulnerability factors, a joint FMO/Paediatric Medical Examination should where possible be conducted. A joint medical should also be considered in cases of children aged 13, 14 and 15, as per the 'Royal College of Paediatrics and Child Health and the Faculty of Forensic and Legal Medicine (2007): Guidelines on Paediatric Forensic Examinations'. If, in exceptional circumstances, a joint examination is not possible, or after consultation it is decided that a single examination is more appropriate, then an FMO may carry out the examination, if appropriately trained and the rationale documented.

4.56 The type of case will determine when the forensic examination should take place. A comprehensive briefing will be supplied to the FMO and, if relevant the Paediatrician, by the Investigating Police Officer or Rowan member of staff. Where a suspected offender has been interviewed, the FMO/Paediatrician will also be provided with details of the interview, by the police officer, and, where relevant, the account of any witnesses, if deemed necessary and appropriate.

4.57 There may be circumstances where a child or parents refuses, or may not have the capacity to engage in the Joint Protocol process. Cases such as these must be brought to the attention of a supervisor when considering what course of action to take. Consideration should be given to the following (this list is not exhaustive): -

- Has every effort been made to secure an interview with the child?
- Has every effort been made to secure reasons why the child is reluctant to pursue the matter, including consideration of the possibility of the child being under the influence of others? (e.g., the possibility of threat, coercion or victim of Human Trafficking)
- What judgement can be made as to the reliability of any verbal information the child has made?
- What arrangements have been made to ensure that the child's health needs are being met? This will include liaison with staff at the Rowan Sexual Assault Referral Centre in the case of sexual abuse or the local Paediatric service for other forms of abuse.
- Has the child/young person changed the detail of their account at any time as they have related it to others? (Consider the fact that the child may have been confused regarding the events or may have been briefed/coached by their abuser/trafficker or been unduly influenced by family views/comments etc.)
- Are there any other suspected victims directly referred to by the child and have arrangements been made to meet with them?
- If there any other information or evidence that could progress the investigation?
- In cases where English is not the first language of the family, consideration should **always** be given to the necessity to engage accredited interpreters (and not use family members/others to interpret and/or communicate with the child/parent(s)/family members)

4.58 Consideration of the following proactive steps can be taken to progress the investigation, and any safeguarding requirements (where the child is not supporting an investigation or the criminal justice process): -

- Has consideration been given to any other methods of gathering evidence, including mobile phones and text messaging (social media), computer systems, covert policing techniques etc.?
- What intelligence can be gathered regarding the suspected offender, e.g. occupation, family structure, affiliation with children/youth groups/organisations, previous criminal history/ vehicles owned and driven, records held by other agencies etc.?

4.59 Persons completing any PJI forms should bear in mind the fact that the record contained on these forms may be subject to the scrutiny of criminal and civil courts or accessed by Case Management Review Panels, inspectorate, regulatory bodies or others. These documents should be completed in a timely fashion (contemporaneously, as appropriate, and as soon as practicable in all other cases). The decisions made should be recorded clearly, concisely, factually and should include the context of the allegation.

The flowchart in Appendix D illustrates the key stages which may lead to a Joint Investigation.

5. Interviewing Children

Strategy Considerations - Interviewing

THESE GUIDELINES MUST BE READ IN CONJUNCTION WITH ACHIEVING BEST EVIDENCE IN CRIMINAL PROCEEDINGS: GUIDANCE ON INTERVIEWING VICTIMS AND WITNESSES, THE USE OF SPECIAL MEASURES, AND THE PROVISION OF PRE-TRIAL THERAPY

(Achieving Best Evidence document can be accessed – via the Department of Justice website: <http://www.dojni.gov.uk/a-guide-to-achieving-best-evidence-practitioner-guidance>)

In this section 'Video Recorded Interviews' means recordings made on DVD Video Discs or Digitally Interview Recordings.

5.1 Where it is decided, following a Strategy Discussion/Meeting, that it is in the best interest of a child to proceed with a criminal investigation, that investigation is the full responsibility of the police. Whilst a social worker has a role to play within that investigation for example, in the evidential interview of a child victim, or child witness, or when attempting to identify other potential witnesses, the police officer ultimately will be held to account for the overall quality of that criminal investigation.

5.2 As part of the initial strategy for the interview, consideration should be given to those who may need to be interviewed and those who may need to be informed of the Joint Investigation (those with parental responsibility). It is important to recognise that these interviews are wider than solely 'criminal investigative interviews' and, the objectives will range from evidential interviews within the criminal justice process to child protection safeguarding interviews.

5.3 The presenting circumstances will determine the person most appropriate to carry out investigative interviews.

5.4 Depending on the agreed strategy interviews will normally be conducted jointly by trained Police and Social Services or by Police only, or by Social Services/NSPCC only.

5.5 As the core purpose of investigative interviews is the gathering of criminal evidence, it will be the responsibility of Police, in virtually all situations where a **criminal investigative interview** is required to conduct such interviews and to record in the most appropriate format the relevant evidence. Where criminal investigative interviews are required of children then these interviews will be conducted jointly by suitably trained Police Officer and Social Worker **See 2.4 and 2.5 of the above Achieving Best Evidence Guidance.** <http://www.dojni.gov.uk/a-guide-to-achieving-best-evidence-practitioner-guidance>

5.6 Following initial assessment, where it is agreed that an interview(s) is/are required the following procedures will apply. Those planning the investigation, at the Strategy Discussion/Meeting, will make decisions on the following: -

- Who needs to be interviewed;
- Whose 'informed consent' is required to enable the interview to proceed;
- Sequence of interviews;
- By whom interviews are to be conducted;

- The method of interview; (see 5.8)
- Where interviews should be conducted;
- Who should be present and who should be excluded and why;
- Timing of any forensic medical examination in relation to the interview.

See Appendix E – ‘Aide Memoire – Witness Assessment & Interviews’ planning aide.

5.7 The following will need interviewed as part of the Investigative interviewing process: -

- Person who made the referral;
- Those with Parental Responsibility the Parent (s) or other Carers;
- Other Family Member or Significant Others;
- The Child;
- Siblings and/or Other Children in the Household;
- The Alleged Abuser.

NB - This list is not exhaustive and is provided to highlight some of the more obvious persons who should be considered at an early stage of the Joint Investigation

Child Witness

5.8 The Northern Ireland Victim Charter and Northern Ireland Witness Charter provide that all child victims are entitled to a timely individual assessment of their needs within the criminal justice process including interviewing support and special measures.

5.9 Two alternative methods of interview and recording of evidence are available:-

- Video Recorded Interview, as per Criminal Evidence (NI) Order 1999 Article 4;
- Interview and making of a written statement, as per Magistrates Court Rules (NI) 1984, and Section 1 Criminal Justice (Miscellaneous Provisions) Act (NI) 1968 - PSNI Form 38/36;
- If a child ‘opts out’ of conducting a ‘Video Recorded Interview’ any interview conducted for the purpose of making a written statement should be conducted under Joint Protocol by both a Police Officer and a Social Worker.

5.10 Child witnesses will be interviewed in accordance with the guidance ‘Achieving Best Evidence, following assessment of the child’s suitability and willingness to participate in a video recorded interview. A video recorded interview should be regarded as the preferred method of interview. Where a child is unwilling to participate in a video recorded interview or it is considered that a video interview is inappropriate or unsuitable, an accurate record of the reason for such decisions must be recorded on the Form PJI 3 (see Appendix C).

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5.11 Where a child is unwilling or not capable of making a statement or engaging in a video recorded interview, consideration should be given to having the child's evidence recorded in the form of questions and answers. The record of such an interview should be included in a statement made by the interviewer.

5.12 Where there are siblings or other children in the household or were involved in the incident, it is the responsibility of the investigative team to establish, if appropriate: -

- If any other child has been abused themselves; and
- If any other child can provide corroborative evidence of the alleged or suspected abuse.

If it is established that there is: -

- Alleged or Suspected abuse or,
- Evidence to corroborate alleged or suspected abuse of another child.

The investigative team should conduct a pre interview assessment (See Chapter 6) with the child, with a view to conducting a forensic Interview.

5.13 All victims of serious sexual crime should be interviewed, at the appropriate time, at The Rowan. While ABE interviewing facilities will continue to be available within certain police service establishments, The Rowan is recognised as a much more appropriate environment to interview victims given there is immediate practical support and assistance, if required. If the child is not taken to the Rowan to be interviewed and has not been previously medically examined by a Forensic Medical Examiner at the Rowan, then a separate strategy should be agreed between the Police Officer and Social Worker that the child be taken to the Rowan for secondary sexual health care. In any event, any decision, and the rationale not to do so must be recorded on the Form PJI 2.

6. Pre-Interview Assessment

6.1 The needs of the child and the needs of the criminal justice system are best served by an assessment of the child prior to any interview taking place. Such a Pre-Interview Assessment should only be conducted jointly by staff that have completed Module 1 training (Initial Consultation and Interview Assessment Training). If possible the interviewers who will conduct any subsequent interview should normally have undertaken this Pre-Interview Assessment. The notes made during the Pre-Interview Assessment must be recorded contemporaneously and must be available, in advance, to the interviewers conducting subsequent interviews.

6.2 When considering the needs of child witnesses, persons conducting any assessment for interview should: -

- Consider each child as an individual;
- Assess their individual needs regardless of the offence;
- Take account of the following characteristics of the child: -
 - Age
 - Gender
 - Culture
 - Religion
 - Physical and/or learning disability
 - Confidence and developmental level;
- Consider the views of the child and their carer;
- The child's preferred name / form of address;
- The child's ability and willingness to talk within a formal interview setting to a police officer and social worker;
- Any known factors that may have an influence on the child/young person during the interview process (e.g. threat, potential victim of human trafficking);
- The child's use of language and understanding of relevant concepts such as time and age;
- Any special requirements the child may have including medication requirements or access / communication difficulties and/or communication requirements as a result of any physical or learning impairment;
- Likely impact on child of recalling traumatic event during ABE interview;
- Who may provide support and reassurance to the child, parent, carer?

6.3 The Pre-Interview Assessment should also include: -

- An explanation to the child of the reason for an interview;
- When required, the use of a Registered Intermediary;

- An assessment of the child's competency to give consent to interview and medical examination;
- The seeking of the child's consent to interview and medical examination;
- Making arrangements for the Investigative Interview;
- Explanation of Special Measures if appropriate (ABE Para 1.25 – 1.32 & Chapter 6) and court;
- Considerations of the most appropriate method of interviewing the child.

6.4 The Pre-Interview Assessment is not to ascertain whether or not the child has a disclosure to make. Where a spontaneous disclosure is made this should be recorded verbatim. It is incumbent upon the Police and Social Work staff to ensure that the child understands the limitations of the Pre-interview Assessment at the outset. Although it is likely to be counterproductive to stop a spontaneous disclosure, it is the skill of both interviewers to ensure the child/young person is aware that a discussion about what happened to them is to occur at a later stage and not during the Pre-Interview Assessment stage.

NB - Neither the Police Officer nor the Social Worker should interview the child by asking any questions relating to the allegation as part of this assessment process (see ABE Para 2.4-2.6).

6.5 Prior to the Pre-Interview Assessment, where there is information available to indicate that the child suffers from a communication difficulty, consideration should be given for a Registered Intermediately to be consulted and, where appropriate, engaged in the Pre-Interview Assessment process.

6.6 A video recorded interview becomes the child witness's evidence-in-chief and therefore the witness can be legally compelled to attend court, give evidence and be available for cross-examination. It is important that a full age-appropriate explanation is provided to the child and their agreement to Investigative Interview sought.

6.7 Those conducting the Pre-Interview Assessment must be careful to balance the need to ensure that the child is ready and informed about the interview process against the possibility of any suggestion of coaching or collusion.

6.8 A full written record of any Pre-Interview Assessments must be recorded on Form PJI 3 and in the written statement of evidence of the person conducting the assessment.

6.9 Those conducting the assessment should begin by explaining the objectives of the assessment to the child.

6.10 If the child appears willing to engage in the proposed process then those conducting the assessment should explain the process accordingly.

6.11 If the child appears unwilling to engage in the proposed process then those conducting the Pre-Interview Assessment should seek to establish why not, and ask the child what reason they have for not wanting to talk to them about what they understand happened. In order for children and young people to make an informed choice about whether or not to engage in the ABE interview, an overview of the special measures that may be available to them should be discussed. However a proper balance must be struck by the interviewing team to ensure that sufficient information is provided relative to the child's age and level of understanding to help them make a decision. In some cases, it may not be appropriate or indeed may be counterproductive to provide too much information (for example a detailed explanation regarding the 'opt out' may confuse a very young child and/or too much emphasis on the experience of cross-examination may immobilise a timid witness). The right to a fair trial applies equally to victims and witnesses and their decision to engage with the process may be influenced by the level and quality of the information provided at the pre-interview assessment stage.

The persons conducting the assessment should have a clear understanding of Special Measures (ABE 1.25 -1.32 & Chapter 6).

6.12 The persons conducting the Pre-Interview Assessment should avoid discussing the nature of the allegation and must not lead the child. However, they should never stop a child who is freely and spontaneously recalling significant events. Instead, a full written record of the information provided must be made making a note of the timing and personnel present as well as what was said and in what order. If the child does disclose information relating to the allegation, then the child should NOT be asked any questions whatsoever, but the information disclosed should be recorded on Form PJI 3. **Those conducting the Pre-Interview Assessment should also use the opportunity to answer any questions the child may have about the conduct of the interview and explain the role of the Investigative Interviewer.**

6.13 Conducting a Pre-Interview Assessment is part of an on-going process and the needs of the child may require that this should take place over a number of sessions.

6.14 As a reminder, the task of those who will be conducting the Pre-Interview Assessment is to explain if a proposed ABE interview is to take place and to assess if the child is ready, willing and able to make a statement of complaint (either video recorded or written in statement format).

The Child Witness who might become a suspect

6.15 So far as is practicable, consideration should be given in the planning stage as to how the interviewer will deal with any confessions to criminal offences made by the child in the course of the interview. Any decision on an appropriate course of action will involve taking into account the seriousness of the crime admitted and weighing it against the seriousness of the crime under investigation.

6.16 It is preferable to anticipate and plan for such an eventuality while recognising that any decisions on a particular course of action are likely to depend upon what has been disclosed by the child during the course of the interview.

6.17 Interviewers have a duty to consider the rights and welfare needs of all children in such circumstances. Where the priority is to obtain evidence from the child, as a victim or a witness, the interview can proceed and should follow the guidance provided by Achieving Best Evidence in Criminal Proceedings.

6.18 Any admission by a child in the course of an investigative interview may not be admissible as evidence in criminal procedures.

6.19 Normally, a further interview would need to be carried out in accordance with the relevant provisions of the Code for the Detention, Treatment and Questioning of Persons by Police Officers (Police and Criminal Evidence (NI) Order 1989, Code C). If the child is to be interviewed as a suspect in accordance with Code C of the Police and Criminal Evidence (NI) Order 1989, they will be cautioned and the purpose of the interview made clear. It should also be made clear that the child or young person has the right to legal representation.

Video Recorded Interviews

In this section 'Video Recorded Interviews' means recordings made on DVD Video Discs or Digitally Recorded Interviews.

6.20 Any video recorded interview serves two primary purposes. These are: -

- The examination in chief of the child witness; and
- Evidence gathering for use in criminal proceedings.

6.21 In addition, any relevant information gained during the interview can also be used to inform child protection enquires under Article 66 of the Children Order, any subsequent actions to safeguard and promote the child's welfare and, where relevant, the welfare of other children. If the child's social worker is not a part of the interviewing team, it is important that they are present for the forensic interview, in order to take forward any safeguarding information or concerns that arise. If this is not possible, it is crucial that after the forensic interview is completed, that the allocated social worker and social work forensic interviewer discuss the detail of the interview and any potential safeguarding issues highlighted. Alternatively, the allocated social worker can make arrangements to view the forensic interview as soon as possible after the interview (see 6.39).

Criteria for Video Recording an Interview

6.22 Video recorded interviews should be the preferred option in all cases, unless the child 'opts out' and/or there are insurmountable difficulties which prevent the recording taking place. (This may include that the child has been involved in abuse involving video recording or photography).

6.23 The law presumes that child witnesses under 18 will normally give their evidence outside the courtroom by playing a video-recorded interview as evidence-in-chief and cross-examination via live link, subject to court direction on special measures, unless this will not improve the quality of their evidence. It is essential that a child's views, their carer's views, and the rationale for all decisions relating to how interviews with a child witness are to be recorded, are fully documented.

6.24 It is important to remember that children have a choice. Subject to the agreement of the court, **children may opt out of giving their evidence by either a video-recorded interview as evidence-in-chief and/or by means of live link or both.** If they do wish to opt out then the alternative special measure of giving evidence in the court room behind a screen should be considered and should they not wish to use a screen, then consideration should be given to alternative special measures.

6.25 Only those staff who have received 'Joint Investigative Training Module 1 (Initial Consultation and Interview Assessment Training) and Module 2 (Forensic Interview Training) training will be

eligible to undertake the roles of FIRST INTERVIEWER and SECOND INTERVIEWER in 'Video Recorded' interviews, in compliance with this section.

Planning and Conducting Interviews with Children

6.26 Forensic Interviews which are video recorded should be planned and carried out in accordance with Achieving Best Evidence Chapter 2. <http://www.dojni.gov.uk/a-guide-to-achieving-best-evidence-practitioner-guidance>

6.27 Interviewers must be given sufficient time to carry out this planning process, prior to a Video Interview. The Aide Memoire (Appendix E) can be used to assist with the planning process.

Consent in Joint Protocol Interviews of Children

6.28 At all times those involved in the assessment of the child's readiness, willingness and ability to engage in an investigative interview should take steps to explain the purpose of any proposed video recorded interview to the child at a level appropriate to the child's age and understanding. Such an explanation should include the following: -

- The benefits / disadvantages for the child of having or not having the interview video recorded;
- Who may see the video recorded interview (including the alleged offender both before the trial and at court); and
- The different purposes to which a video recorded interview may be put (e.g. if it appears that the video may be useful in disciplinary proceedings against a member of staff who is suspected of abusing or neglecting a child in their care);
- Information in relation to the NSPCC Young Witness Service.

6.29 The child should be advised that, should the case proceed, whether a video recording is made or not, they may be required to attend court to answer further questions directly (e.g. cross-examination). A live link facility will normally be available to enable the witness to give best evidence at court. There is a presumption that this special measure will normally be required by the child (Achieving Best Evidence Chapter 6).

6.30 It is unlikely to be practicable or desirable to video record an interview with a reluctant or hostile child. Those persons conducting the interview are responsible for ensuring that, as far as possible, the child is freely participating in the interview and not merely complying with a request from adult authority.

6.31 The investigating team may need to interview a suspected child victim without the knowledge of the parent or carer in certain situations. Relevant circumstances would include the possibility that a child would be threatened or otherwise coerced into silence; a strong likelihood that important evidence would be destroyed; or that the child in question did not wish the parent to be involved at that stage and is competent to take that decision.

6.32 In such situations Social Services should obtain legal advice and consider legal options to secure the child's continued protection.

6.33 Proceeding with the interview in the absence of the knowledge of those with Parental Responsibility, in respect of the child/young person, will need to be carefully managed in interventions with the family by the Children's Services of the local HSC Trust. In addition staff from

PSNI, Social Services and the NSPCC may need to consider seeking appropriate legal advice before proceeding.

6.34 The child's agreement to participate in the video recorded interview will have been established at the Pre-Interview Assessment stage of the investigative process. However, interviewers are responsible for ensuring that, as far as possible, the child is freely participating in the interview and not merely complying with a request from adult authority figures. The child's agreement to participate in the video recorded interview should therefore be checked again at the beginning of the interview process, at the rapport stage, and included within the video recording. Written consent to a video recorded interview is not required.

Attendance of Parent or Other Supportive Adult during the Investigative Interview with a Child

6.35 The planning of the interview should include consideration of the inclusion of a support person in the interview, (a Witness Supporter) and this should be discussed with the child prior to the interview (Achieving Best Evidence Chapter 2).

6.36 Both interviewers must be satisfied as to the efficacy of the support person (e.g., a child may ask to have their mother/father as the support person but it may be known to the investigating staff that the mother/father was compliant or suspected to be actively involved in the suspected abuse), or their actions would suggest that they are not supportive of the investigative process. However, it is normally not advised that parents/carers are in the interview room but they can be in close proximity.

Conducting a Video Recorded Investigative Interview

6.37 Those conducting Video Recorded Interviews should have a working knowledge of Achieving Best Evidence guidance. https://www.google.co.uk/?gws_rd=ssl#q=Achieving+Best+Evidence

Records of Investigative Interviews with Children and their Maintenance

6.38 Statements of Evidence (PSNI Form 38/36) recorded from child witnesses in written format will be retained by the Police for evidential purposes. A copy may be provided to Social Services, provided that the child and/or parent or guardian agrees even if the latter is a suspect. Where the child and/or parent do not agree and child protection concerns exist, police have a positive obligation to share the relevant context contained within the written statement with Social Services. The same applies to information gleaned in interviews of suspected offenders, if relevant to safeguarding.

6.39 Where an interview has been video recorded, the interview will be secured for court purposes by Police in accordance with the relevant policy and guidance. This interview (or a copy of it) will be available for viewing by Social Services by prior arrangement with the police officer in charge of the case. A log will be completed on each occasion that the video record is viewed by anyone and detail the reasons for viewing. This will be retained with the working copy of the video recording.

6.40 Arrangements for viewing the video record by persons other than Social Services, e.g. Defence or at any subsequent court hearing, will be the responsibility of the Police.

6.41 The police officer in charge of the case will be responsible as the prime keeper of all exhibits from the interview process, including any drawings, notes, etc. made.

6.42 The disclosure of third party material which may be relevant to an investigation must be complied with in relation to the Criminal Procedures Investigation Act 1996.

6.43 When a Protocol for Joint Investigation Interview is conducted with a child witness, the Police will retain the recording and provide, where appropriate to do so, a copy of the typed transcript from the DVD/audio for Social Services records, which must be retained in the Restricted Section of the file. Social Services can decide when a transcript is required following consultation with the Police.

When to Consult Specialists

6.44 Children can have a variety of issues such as race, gender, cultural, ethnic background, disability and other life experiences. Due consideration should be given to consulting with, and involving specialists in order to ensure that the interview is tailored to meet the particular needs and circumstances of the child.

7. Children with Disabilities

7.1 The term 'children with disabilities' encompass a wide range of impairments of varying severity. There is rarely any reason in principle why children with disabilities should not take part in a video recorded investigative interview provided the interview is carefully tailored to the particular needs and circumstances of the child.

Referral

7.2 When a referral concerning a child with disabilities is received, particular care must be taken to consult with a specialist worker. Specialist workers are those with particular areas of expertise in working with children with disabilities and will include some social workers, speech and language therapists, occupational therapists, psychologists and psychiatrists and registered intermediaries. The specialist worker can assist the investigative process in a number of ways: -

- Identifying who may have appropriate information;
- Gathering appropriate information;
- Deciding whether or not a particular child should be involved in an interview and what type of interview is appropriate;
- Advising on the level of disability;
- Assessing indicators of abuse;
- Facilitating communication with the child; and
- Facilitating the participation of those caring for the child.

Strategy Discussion/Meeting

7.3 When the decision is taken to proceed to a joint investigation it is vital that the specialist worker is actively involved. In addition to the considerations to be taken into account in respect of all children the specialist worker can give important advice on communicating with the child.

Communicative Competency of Child and Interviewer

7.4 It is necessary to establish that a child has a reliable method of communication, that they can use intentionally, and that the interviewer can understand either directly or through a Registered Intermediately. This will require assessment if the child has specific difficulties with comprehension or use of language (vocabulary, ideas and grammar) associated with impairment or learning disability. Registered Intermediaries, speech and language therapists, sign language interpreters or facilitators in augmentative communication may be required. The competency of the interviewing adult in communicating will be the single greatest factor in determining whether a child achieves their potential in an interview situation. The interviewer will also require information about the child's knowledge and understanding about themselves, about objects, about places and events about how these things may be affected by an impairment or learning disability.

7.5 Interviewers who interview people who require sign language should consult with the National Register of Communications Professionals working with Deaf and Deaf Blind People (NRCPD) www.nrcpd.org.uk or Action on Hearing Loss www.actiononhearingloss.org.uk

Interpreters / Intermediaries

7.6 Achieving Best Evidence provides guidance on the use of interpreters and Registered Intermediaries. <http://www.dojni.gov.uk/a-guide-to-achieving-best-evidence-practitioner-guidance>

7.7 Further guidance can be obtained from the “Young Witness Pack” published by NSPCC www.nspcc.org.uk

8. The Investigation of Complex, Organised or Multiple Child Abuse

8.1 It is not always obvious when a referral is made that a single allegation or suspicion of physical, emotional, sexual abuse or neglect may become part of major investigation. Whether complex or otherwise this is still child abuse.

8.2 Complex, organised or multiple abuse, whether sexual, physical, emotional or by neglect occurs as part of a network of abuse across a family or community, within residential homes or schools and within an 'on or off line' networked groups of sexual offenders. Such abuse is sometimes reported a long time after the offending took place. Complex abuse is abuse involving one or more abusers and a number of related or non-related abused children or young people. The abusers concerned may be acting together to abuse children, sometimes acting in isolation, or may be using an institutional framework or position of authority to recruit children. Children living away from home, including foster care, residential care, private fostering, healthcare settings, residential schools, prisons, young offender institutions and secure units may be particularly vulnerable to child abuse.

8.3 One of the key factors in responding to complex, organised or multiple abuse situations is the scale or potential scale of the investigation. Investigations can be demanding and time consuming and may have considerable resource implications. It is crucial to determine the size and complexity of the enquiry as soon as possible in order to consider the options that are available. The need to assess the short, medium and long term impact of the enquiry and its potential 'mushroom' effect is essential. It also requires thorough planning, good inter-agency working and attention to the welfare need of the child victims or adult survivors involved.

8.4 In determining whether a complex, organised or multiple abuse enquiry is necessary the following elements will be beneficial in determining the nature of the enquiry. This is not an exhaustive, or prescriptive, list and is not a substitute for professional judgement: -

- Multiple alleged victims;
- Multiple alleged offenders;
- Volume of alleged offences;
- Alleged institutional abuse;
- Duration of alleged abuse;
- Significant cross-boundary or other geographical considerations;
- Public interest issues.

Where it is agreed, between the Social Services Manager and CAIU Detective Inspector, that the case meets the criteria, they will liaise with the HSC Trust Director of Children's Services and Public Protection Branch Detective Chief Inspector who together will determine the best way to proceed. Likewise, where there is any disagreement or uncertainty on the scale of the investigation required, the matter will be escalated via line management.

8.5 The Principles for the investigation of complex, organised or multiple abuse cases are: -

- Both the police, social services and, where relevant, the NSPCC will need to work for a planned, co-ordinated and properly resourced response to enquiries and recognise that this commitment will be significant and on a scale much greater than usual;
- In all complex, organised or multiple abuse enquiries the safety and well-being of the child or children will be the paramount consideration, when their identity is known or can be identified;

- All parties are alert to the possibility of adults at risk in the abusive network and respond accordingly. For further information, go to the 'Protocol for Joint Investigation of Alleged and Suspected Cases of Abuse of Vulnerable Adults'
http://www.northerntrust.hscni.net/pdf/Joint_Protocol_Investigation.pdf
- All parties, in pursuit of their 'positive obligations', ensure the protection of individual children, the need to protect other children, the need to gather evidence and the effects of the investigation on other individuals and the community;
- The need for strict confidentiality will be assessed at the outset of the enquiry and reviewed in order to prevent the alerting of suspected offenders;
- Parties agree to consult and openly share information subject to legal and agency restrictions at all stages of the enquiry;
- Parties agree to contribute to the legal process which may be criminal or civil or both;
- Parties agree to keep accurate written records of the entire enquiry process;
- Information management arrangements should be agreed at the outset of the process and continually reviewed throughout by the Social Services Manager and Detective Inspector with responsibility for the management of the investigation.

8.6 All parties acknowledge that some incidents, even if managed properly, can have a significant impact on the confidence of the victim, their family and the community, i.e. a 'Critical Incident', and should be declared as such.

8.7 Parties agree to a formal review at the conclusion of the enquiry to identify lessons learned and good working practices.

Referral

8.8 In cases of alleged and suspected cases of child abuse where there is a suspicion it is complex, organised or multiple, a referral must be made without unnecessary delay, and the appropriate PJI forms completed.

8.9 On receipt of this information both the Detective Inspector of the Child Abuse Investigation Unit and the Social Services Manager (8A grade or above) will meet or confer to analyse the nature of the referral and determine whether there is a need to follow the procedure for investigating complex, organised or multiple child abuse. If so, this will be brought to the attention of the HSC Trust Director of Children's Services and Public Protection Branch Detective Chief Inspector who together will determine the best way to proceed.

8.10 Cognisance should initially be taken of: -

- The number of referrals currently highlighted;
- The seriousness and type of the allegations;
- The potential for the investigation to transcend HSC Trust and Police Service boundaries;
- Whether the referral may be indicative of human trafficking;

- The number and type of homes or institutions referred to;
- The number of residents in such establishments;
- The potential time parameters;
- The number of potential suspects;
- The potential for growth;
- The need for strict confidentiality to prevent the alerting of suspected offenders.

If it has been identified that the case is one of a complex, organised or multiple in nature, a Senior Management Group meeting must be convened within **3 days**.

Senior Management Group

8.11 This group must be chaired by a Public Protection Branch (PPB) D/Superintendent, Crime Operations, or above.

The Senior Management Group will consist of the following: -

- PPB Detective Chief Inspector(s);
- Detective Inspector(s) Child Abuse Investigation Unit;
- Police and Social Service's Investigating Officers;
- Police District(s) representative;
- Trust Assistant Director for Safeguarding (and/or Trust Director for Social Work);
- Senior Health Representatives;
- Health and Social Care Board representative;
- Consideration may also be given to Assistant Chief Constable's involvement if the scale of the inquiry is deemed to be significant or has a regional dimension crossing several policing districts;
- Representative from Education authorities if school(s) involved/potentially involved;
- Other individuals or agencies as appropriate to the case.

Role of Senior Management Group

8.12 The role of the Senior Management Group will be to: -

- Manage the investigation in accordance with Joint Protocol;
- To ensure the welfare of the child, or children, remains of paramount consideration;

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- Determine, on the information, available whether a complex, organised or multiple abuse investigation is warranted under these procedures;
- Determine the terms of reference, scale of the enquiry, and processes for gathering evidence;
- Determine whether a dedicated Investigation Team should be established or whether the investigation can be conducted by local staff;
- Determine the constitution and membership of the Investigative Team;
- Agree all aspects of policy that the Operational Group will work to, but not exclusively;
- Agree the appropriate level of resources, including administrative support to investigate the allegations;
- Appoint a co-ordinator who will liaise between the Senior Management Group and the Operational Group. The co-ordinator will head the Investigative team;
- Consider employing a police analyst at an early stage;
- Ensure the application of the Police National Intelligence Model;
- Devise a media strategy and identify media representatives;
- Determine whether the incident should be managed on a police Home Office Large Major Enquiry System or whether a manual paper system should be used;
- Ensure that protocols are in place to ensure the safety of staff involved in the investigation; and the availability of appropriate support and counselling for staff;
- Where the abuse involves investigating agency staff, measures are put in place to ensure an essential degree of independence and objectivity to ensure an impartial investigation. Consideration may be given to using another HSC Trust or the NSPCC;
- Facilitate access to expert legal advice;
- Take immediate steps to secure, protect and store relevant records and information;
- Liaise with the SBNI and keep the SBNI informed of progress of the investigation;
- Facilitate contact, and involvement, of other organisations that may be involved, including voluntary organisations;
- To determine arrangements for providing information to children, parents and families involved;
- To ensure that relevant registering bodies are kept informed of the progress of the investigation and involved as appropriate;
- Agree a schedule of future meetings and arrangements for review.

Investigating Team

8.13 This team will be led and chaired by the police Senior Investigating Officer in consultation with the nominated HSS named Lead.

8.14 The Investigating Team will: -

- Investigate the allegations in accordance with this Protocol;
- Investigate the allegations in accordance with the parameters as defined by the Senior Management Group;
- Determine whether any children need active safeguarding and in particular when and how this should be done and being alert to the presence of adults potentially at risk of harm;
- Plan Investigative Interviews with victim and witnesses;
- Ensure that witness information is gathered in accordance with 'Achieving Best Evidence in Criminal Proceedings';
- Give consideration to medical assessments (and issues of consent);
- Determine action to gather other evidence including forensic, witnesses, corroboration and SUSPECT interviews;
- Make a thorough assessment of the needs of the victims and provide or arrange the provision of services to meet those needs;
- Consider Child Protection Conferences: timing, chairing, purpose and attendance;
- Keep accurate records and minutes of meetings and strategy discussions;
- Consider the need to provide confidential and independent counselling for victims and families;
- Keep the Senior Management Group informed of resource issues;
- Ensure information is gathered and appropriately shared between agency members.

Senior Investigating Officer

8.15 The Senior Investigating Officer, in consultation with the nominated HSS named Lead, will: -

- Determine the appropriate staff selection in response to the nature of the abuse in order to form a trusted and vetted team from the police and social services who have expertise in conducting investigations, child protection processes and children's welfare;
- Ensure that staff involved are fully briefed on such issues as evidence gathering, data protection, information sharing and risk management;
- Identify suitable accommodation and other resources for the Investigation Team;

Problem Resolution

8.16 All agencies agree that where practitioners encounter disagreements that cannot be negotiated and agreed upon the matter will be progressed to the Senior Management Group.

Supplementary Advice

8.17 For further advice go to <https://www.app.college.police.uk>

Additional Considerations in the Investigation of Complex, Organised or Multiple Abuse

8.18 When dealing with abuse in any institution, including any residential facility, additional thought needs to be given to the management of the investigation to ensure: -

- The continuing safety of the child; and other children;
- Clarity about the roles of the placing Trust and the host Trust in relation to the investigation;
- Appropriate sharing of information; and
- Lack of contamination of evidence;
- Consideration of whether any abuse may have occurred historically within the institution under investigation prior to the allegations currently being investigated.

8.19 In cases involving the investigation of abuse in institutional settings consideration should be given to “Co-operating to Safeguard Children”. <https://www.dhsspsni.gov.uk/publications/co-operating-safeguard-children>

8.20 The Senior Management Group should take active steps to be kept informed of all developments, as they arise, and give due cognisance to the potential difficulties for staff. The Senior Management Group will ensure that lines of communication are established between the investigative team and the institution.

Other Abuse

8.21 Other types of child abuse or neglect unconnected with the investigation may come to the attention of the investigating team, for example, alleged familial abuse. These should be the subject of a separate investigation and referred to the Central Referral Unit.

Conclusion of Joint Investigation

8.22 At the conclusion of the investigation, the Investigating Team Leads from both agencies should meet with the Senior Management Group to discuss the salient themes of the investigation and any learning emerging from it with a view to making recommendations for improvements either in operational policy or in practice. Recommendations should be communicated to the Chair of the SBNI.

9. The Young Witness Service

9.1 Following the commencement of the Criminal Evidence (Northern Ireland) Order 1999, and the introduction of the Achieving Best Evidence Guidance, a Witness Support Service has been established.

9.2 This service is provided by the NSPCC in respect of children (Young Witness Service) and by Victim Support in respect of adults.

9.3 All child witnesses, who are victims or witnesses to abuse, should be referred to the Young Witness Service who will provide preparation for and support at court. This will be the responsibility of the Victim and Witness Care Unit, in consultation with the Investigating Officer.

10. Training and Development

Training, Support and Supervision

10.1 The investigation of allegations or suspicions of child abuse involving the interviewing of children for evidential purposes has been promoted and accepted as a specialist, complex and emotionally demanding area of work. It requires high standards from staff directly involved. In order to build and maintain the necessary level of expertise, staff engaged in this area of work need to be provided with training, at different levels to equip them with the skills required to meet the standards.

10.2 The training outlined here applies only to staff interviewing children within the guidance of Joint Protocol. Staff involved in the interviewing of vulnerable adults undertake a separate joint protocol training programme.

10.3 The arrangements for training delivery is undertaken jointly by the agencies to whom this Protocol applies working collaboratively in the design, development and delivery of training having regard to training developments and responsibilities within respective agencies.

10.4 It is the responsibility of each agency to ensure that staff are appropriately identified and targeted to receive the necessary training and that they are adequately supervised and supported by their managers. A process for staff and managers to evaluate performance in this area of practice is available for this purpose.

10.5 Staff from agencies to which this Protocol applies are trained together and have updated special interview training on a regular basis.

Initial Consultation and Interview Assessment Training (Module 1)

10.6 Staff involved in the initial assessment and consultation process must be conversant with the requirements of this Protocol for Joint Investigation. To this end, all relevant staff undertaking initial assessment and consultation must complete Module 1 or Managers Training.

10.7 Social Workers should attend awareness training within the first two years of employment in Family and Child Care settings.

10.8 Staff who have undertaken Joint Protocol Awareness Training are not deemed to be trained to conduct investigations under the Protocol for Joint Investigation Policy and Procedures.

10.9 Module 1 Training will only qualify the practitioner to carry out enquiries - including making a referral (initial consultation and assessment) and conducting a joint Pre-Interview Assessment.

10.10 In order to investigate cases of alleged and suspected child abuse, persons are required to have completed Module 1 Joint Protocol Training. This includes initial consultation between agencies.

10.11 Module 1 training will qualify the practitioner to carry out strategy discussions/meetings as part of the investigation process. Practitioners must not carry out strategy discussions/meetings unless they have completed this training.

10.12 Agencies to which this Protocol applies should monitor the number and locations of staff trained in order to effectively manage this resource.

Forensic Interview Training (Module 2)

10.13 Investigative interviewing (including video interviewing) is very much a specialist role, therefore the experience required, and training provided must reflect the level of skills necessary. Interviewers must have the opportunity to practice in order to develop and maintain their skills.

10.14 Persons will be considered qualified to carry out video recorded investigative interviewing of children having successfully completed the following sessions of training Module 1 Protocol for Joint Investigation Training and Module 2 Joint Protocol Video Evidence Training.

10.15 Members of interviewing teams **must** complete a minimum of 2 video evidence interviews a year, one of which must be as a Lead Interviewer to ensure that the skill and competence levels are maintained. One of these must be self-assessed and separately assessed by a supervisor, with support if required from a qualified member of the relevant agencies training staff, to verify and quality assure on-going competence, using the training assessment form/managers assessment form. (Appendix F).

10.16 Module 2 trained staff will also be required to undertake skills development training within 12 months of initial training and every 2 years thereafter as part of their continuous professional development.

10.17 Forensic Interviewers must comply with the requirements of Module 2 training and development (10.15 above). This requires both individual and organisational responsibility, and management/supervision of the overall Forensic Interviewer resource within each organisation. Each Trust should monitor both the supply of interviewers and demand of practice, and arrangements should be in place to ensure interviewers have opportunities to meet these requirements.

10.18 Staff who have not met the requirements set out in Para 10.15 will be deemed 'inactive' and should be precluded from completing Forensic Interviews. Appropriate and timely measures should be made to address inactivity, for example, additional assessment of practice as detailed at 10.15 or completion of Skills Development training. Those staff meeting the minimum requirements will be deemed as 'active'.

10.19 HSC Trusts should monitor the number, locations and availability of staff trained in order to effectively facilitate and manage this resource.

Training for Managers

10.20 All managers who have supervisory experience for staff involved in joint investigative interviewing should be conversant with the Protocol for Joint Investigation, Regional Policy and Procedures, Achieving Best Evidence and be familiar with the content of the Module 1 and Module 2 training programmes. They also need to be equipped with an understanding of the operational arrangements in place for the joint working between both agencies.

10.21 In support of these arrangements, managers of Joint Protocol trained staff must attend training in Joint Protocol Awareness, and attend the Joint Protocol Managers Training Programme.

10.22 Managers from both investigative agencies are required to undertake joint training **together** to ensure the joint approach is consolidated at all levels of the process.

10.23 Supervision and assessment of the competence of staff conducting Joint Protocol interviews is integral to ensuring standards of practice are met and that staff are supported in developing competence.

GLOSSARY OF TERMS

ACHIEVING BEST EVIDENCE IN CRIMINAL PROCEEDINGS (NI) (ABE)

The guidance provided is advisory and does not constitute a legally enforceable code of conduct. Each witness is unique and the manner in which they are interviewed must be tailored to their particular need and circumstances. However, interviewers and other practitioners should bear in mind that significant departures from the guidance may have to be justified in court.

ARRAIGNMENT

The point in formal criminal proceedings at Crown Court where the defendant is required to plead guilty or not guilty. The result of the arraignment will determine whether a criminal trial, involving witnesses, is required.

ARTICLE 18

The Children Order requirement for Social Services, HSC Board and HSC Trusts to provide support to children identified as being “in need”.

ARTICLE 66

Social Services duty to investigate under the Children Order. The Article requires Social Services to investigate instances where a child in its area is the subject of an Emergency Protection Order, Police Protection or is believed to be suffering or is likely to suffer significant harm.

CHILD ABUSE INVESTIGATION UNIT

One element of the PSNI’s Public Protection Unit’s, one situated in each of the 5 Trust areas, staffed by Detectives to investigate alleged and suspected cases of child abuse.

CHILD PROTECTION CASE CONFERENCE

An inter-agency forum to consider risk to a child and decide whether or not a child’s name should be placed on or removed from the Child Protection Register and to agree a Child Protection Plan.

CHILD PROTECTION REGISTER

A register listing all children resident in each HSC Trust area who are subject to a Child Protection Plan.

CHILD WITNESS

There are several definitions of “child” for legal purposes. For the purposes of the Special Measures directions which may be made under the Criminal Evidence (NI) Order 1999 to assist eligible witnesses to give evidence, the child witness is a witness who is eligible because he/she is under 18 years of age when the direction is made.

Another relevant definition of a “child” for the purposes of the Criminal Evidence (NI) Order 1999 relates to the giving of unsworn evidence. The child under the age of 14 who is competent to give evidence does so without taking an oath or making an equivalent affirmation, i.e., unsworn.

CIVIL PROCEEDINGS

A case at civil law is normally one between private persons and/or private organisations. Typically it will be about defining the rights and relations between individuals. (For example, applications by HSC Trusts for Orders in respect of children)

COMPELLABILITY

The general rule is that if a witness is competent to give evidence they are also compellable. This means that the court can insist on them giving evidence.

COMPETENCE

In criminal proceedings a person who is not competent may not give evidence. Article 31 and 32 of the Criminal Evidence (NI) Order 1999 provides that all persons are (whatever their age) competent to give evidence, the exception applies where a person is not able to understand questions put to him/her as a witness, and give answers which can be understood. A person over 14 years of age who is competent but who does not appreciate the significance of an oath gives evidence unsworn, as do children under the age of 14.

CORROBORATIVE EVIDENCE

Any evidence which supports or confirms the substance of the allegation (for example, forensic or medical evidence).

CRIMINAL PROCEEDINGS

A criminal case normally involves the trial of a person(s) by a jury for the alleged commission of an offence created by law.

CRIMINAL RESPONSIBILITY

Children under the age of 10 years cannot be held criminally responsible (but their welfare needs to be considered).

CROSS-EXAMINATION

The secondary stage of evidence giving in court where the testimony that a witness had already given is examined by counsel for the defence.

CROWN COURT

The criminal court that tries those charged with serious offences, this includes offences which are subject to trial on indictments such as rape.

CRU

The PSNI's Central Referral Unit, a single point of contact for all agencies and partners in making referrals in cases of alleged and suspect child abuse.

DEFENDANT

A person on trial in criminal proceedings.

EVIDENCE

The term evidence embraces all matters exclusive of mere argument which can be placed before a court to support the argument for the prosecution or the defence in criminal cases or the applicant or respondent in civil cases.

EXAMINATION IN CHIEF

The procedure in a trial where the lawyer representing the side who has called the witness takes that person through his/her evidence.

LEAD INTERVIEWER

The member of the interviewing team who has been deemed most suitable to conduct the video recorded interview with the child.

FORENSIC MEDICAL OFFICER

An independent medical practitioner, who provides a forensic medical examination service, to the Police, for the purpose of criminal investigation. The examination will include the collection of evidential samples for analysis.

HEARSAY/HEARSAY EVIDENCE

Anything which a person heard from another person other than the accused.

INTERVIEW

A person in authority seeking to obtain information from another party through questioning.

INTERVIEW SUITE

A facility which has equipment meeting the required standards for interviewing in accordance with Achieving Best Evidence and the Criminal Evidence (NI) Order 2011.

INTERVIEW SUPPORTER

A person included in an interview for the purpose of supporting a child witness, where considered necessary because of the child's age or their being distressed or upset. The interview supporter will have been instructed not to participate in the interview itself.

INVESTIGATIVE INTERVIEW

Any interview by Police Officers and/or Social Workers of victims, witnesses or suspects to obtain accurate and reliable accounts about matters being investigated as part of the Joint Protocol Investigation.

INVESTIGATIVE TEAM

Police officers and social workers responsible for the investigation, where it is decided to proceed with the investigation following a strategy meeting/discussion. The Police will be held to account for the overall quality of the investigation.

JOINT INVESTIGATION

A child abuse investigation undertaken jointly by Police and Social Services and/or NSPCC.

LIVE TELEVISION LINK

One of the Special Measures provided by the Criminal Evidence (NI) Order 1999 whereby certain witnesses can give evidence from a television monitor in a room separate from the main body of the court.

LOOKED AFTER CHILD

A child subject to a Care Order or accommodated by or on behalf of a Health and Social Care Trust.

NICHE

The name of a Canadian Company that has developed a management information system specifically for law enforcement organisations.

The Police Service of Northern Ireland computerised system for managing information relating to criminal activity, criminal records, persons and incidents.

PRE-INTERVIEW ASSESSMENT

A discussion to assess a child's readiness, willingness and ability to take part in an Investigative Interview.

PSNI POLICY & PSNI SERVICE PROCEDURE

Internal directions issued to the Police Service of Northern Ireland, in written form in response to legislative or procedural changes or to take cognisance of new policy.

PUBLIC PROSECUTION SERVICE

A body of legal staff who work independently from the Police and who are responsible for the prosecution of criminal offences.

REGISTERED INTERMEDIARY

One of the Special Measures which the Criminal Evidence (NI) Order 1999 that allows for certain eligible witnesses to give evidence, (both examination in chief and cross-examination), through an intermediary. The intermediary may explain the questions to or answers from the witness to the extent necessary to enable them to be understood.

SAFEGUARDING BOARD FOR NORTHERN IRELAND (SBNI)

A multi-agency forum to develop policies and procedures on safeguarding, and sets the strategic direction for Safeguarding Children in Northern Ireland.

SAFEGUARDING PANEL (SBNI)

A multi-disciplinary forum comprising representatives from key safeguarding agencies with the remit of developing inter-agency co-operation in child protection and safeguarding at an operational level.

SCHEDULE ONE OFFENCE

List of offences that indicate a definite risk to children which are detailed in Schedule One of the Children and Young Persons Act 1968.

SECOND INTERVIEWER

Member of the interviewing team who has responsibility for the video recording of the interview and who will assist the Lead Interviewer in identifying gaps in the child's account or points to prove.

SEPARATED CHILD

"Separated children" are children, as defined in article 1 of the United Nations Convention on the Rights of the Child, as children who have been separated from both parents, or from their previous legal or customary primary caregiver, but not necessarily from other relatives. These may, therefore, include children accompanied by other adult family members.

SINGLE AGENCY INVESTIGATION

An investigation carried out by the agency with specific statutory responsibility for the issues arising in each case i.e. Police Criminal Offences and Social Services/NSPCC, Child Welfare.

SPECIAL MEASURES

"Special Measures" is the term used in the Criminal Evidence (NI) Order 1999 and in Achieving Best Evidence to describe the range of new provisions aimed at facilitating the giving of best evidence by children and vulnerable witnesses, directed by the Court.

STATEMENT OF EVIDENCE

The formal written account of what a witness has perceived and certified as true and accurate by the witness. In child abuse investigations these statements will be taken by Police.

STATUTORY RESPONSIBILITY

The duties and responsibilities placed on agencies through legislation.

THIRD PARTY MATERIAL

Matters of potential relevance to a police investigation which is not in the possession of police.

UNACCOMPANIED CHILD

"Unaccompanied children" (also called unaccompanied minors) are children, as defined in article 1 of the of the United Nations Convention on the Rights of the Child as children who have been separated from both parents and other relatives and are not being cared for by an adult who, by law or custom, is responsible for doing so.

Harm in Specific Circumstances

Concerns for a child may arise from circumstances not explicitly reported as child abuse and from reports relating to other matters. The following outlines potential harm to children and young people in specific circumstances. This list is not exhaustive.

1. Child Sexual Exploitation

Child sexual exploitation is a form of child sexual abuse. It occurs where an individual or group takes advantage of an imbalance of power to coerce, manipulate or deceive a child or young person under the age of 18 into sexual activity (a) in exchange for something the victim needs or wants, and/ or (b) for the financial advantage or increased status of the perpetrator or facilitator. The victim may have been sexually exploited even if the sexual activity appears consensual. Child sexual exploitation does not always involve physical contact; it can also occur through the use of technology.

Sexual exploitation can range from opportunistic exploitation to more calculated, progressive and protracted exploitative behaviours. Abusers are often skilled in manipulating and exploiting young people, using affection, attention, treats, alcohol, drugs or just a place to 'hang out' or stay to gain and abuse a young person's trust; sometimes they may manipulate the young person into believing they are in an affectionate and consensual relationship. Frequently alcohol and drugs are provided to intoxicate and immobilise victims, making them more vulnerable to abuse. Alcohol and drugs are also used to create dependence and the perpetrators' control over victims. Frequently victims are subject to intimidation, threat and actual violence and/or threats or actual violence against their family or others they care about. Whatever the method of exploitation, the young person is being taken advantage of, exploited and abused through this controlling behaviour.

Child Sexual Exploitation can take a variety of different forms. It can take place in person, or on-line and involve both contact and non-contact sexual activities, including the production and distribution of sexual images or exposure to such images. Child Sexual Exploitation is not a specific criminal offence in itself; however it is the context within which a range of sexual offences and other forms of serious criminal misconduct take place against children and young people.

Any child or young person under the age of eighteen, male or female, can be a victim of child sexual exploitation regardless of their family background or other circumstances, including those who have reached the legal age of consent.

Sexual exploitation results in children and young people suffering harm and can also cause significant damage to their physical and mental health. It can also have profound and damaging consequences for the child's family. Parents and carers are often traumatised and under severe stress. Siblings can feel alienated and their self-esteem may be affected. Family members can themselves suffer serious threats of abuse, intimidation and assault at the hands of perpetrators.

The abuse most frequently, but not exclusively, impacts upon those of a post-primary age and can be perpetrated by adults or peers, on an individual or group basis.

Those who perpetrate sexual exploitation are often well organised and may use sophisticated tactics. UK research would indicate that they frequently may target areas where children and young people gather without much adult supervision, for example, party-houses, parks or shopping centres or sites on the Internet, hostels, food outlets, taxi ranks, outside schools. Child sexual exploitation can affect children and young people living at home and those living away from home. Going missing from their home or care can render a young person particularly vulnerable to child sexual exploitation.

For information on procedures to follow, go to SBNI's 'Child Protection/Safeguarding in Specific Circumstances – Child Sexual Exploitation'

NB - Where there are any concerns that a child is at risk of Child Sexual Exploitation then such cases should be referred immediately to the Central Referral Unit.

2. Grooming

Grooming is the process of reducing the resistance of a child, or their parent or carer, to the abuse of that child. This may be achieved through increasing a child's, or parents or carer's, fear of what might happen should they report the abuse as well as inducing them to believe that the abuse is acceptable. Grooming may be achieved through personal contact with the child, or the parent or carer, or through other means of communication such as the internet.

The following specific criminal offences may relate to the practice of "grooming" a child under 16 years of age –

- Article 22 Sexual Offences (NI) Order 2008, 'meeting a child following sexual grooming', and
- Article 22A, 'sexual communication with a child'.

Where grooming is alleged or suspected the matter should be referred by the receiving agency and an assessment should be undertaken to decide if a 'police only' or 'joint investigation' is to be commenced.

3. Children Engaged in Sexual Activity

'Sexual activity' (as per Article 20, The Sexual Offences (NI) Order 2008), involving a child who is capable of giving informed consent on the matter, **while illegal**, may not necessarily constitute sexual abuse. Abuse is predicated upon some imbalance in the relationship or the misuse of power, coercion threat etc. However, consenting sexual activity between equally capable peers – whilst illegal – may not necessarily be abusive. A claim by the child to be consenting to sexual activity does not affect the duties on agencies to consider the possibility that a child may be suffering harm and to take appropriate action to protect the child and any other children who may be at risk of harm.

Investigators should consider that there will be cases where the child does not realise they are being abused; resulting in the minimisation and denial of abuse and claims they are consenting.

In all cases where a referral has been made under this Protocol and where police officers or social workers have reasonable cause to suspect that a child of 13, 14 or 15 years of age has been engaging, or is engaging in sexual activity with a person under the age of 18, (but 13 years of age and over), the following will apply: -

- Whether or not a child supports an investigation within the criminal justice process, where it is suspected that the activity is non-consensual, or where it is suspected that the child was under the influence of drink or drugs, or any other coercion or inequality, a joint investigation will be commenced in accordance with this Protocol.
- Whether or not a child supports an investigation within the criminal justice process and the activity, as reported, appears consensual, Social Workers in consultation with police will consider all of the information available in assessing whether the child has suffered or is at risk of suffering significant harm. Factors in this assessment will include: -

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- (i) The nature of the sexual activity;
 - (ii) The age and degree of vulnerability of the child;
 - (iii) The difference in age between parties;
 - (iv) Any 'breach of trust' in the relationship of the parties (Article 28 The Sexual Offences Northern Ireland Order 2008);
 - (v) Any aggravating factors, e.g. covert use of drugs, alcohol, use or force, exploitation etc;
 - (vi) The child's thoughts and views on the matter;
 - (vii) Any other relevant available information.
- Consideration should also be given, at the time of the assessment, as to whether it is in the best interests and welfare of the children to inform the person with parental responsibility that they have been engaged in sexual activity. Any such decision should include consultation with medical and health colleagues, for example, the Forensic Medical Officer or General Practitioner i.e. any medical professional who can assist in the assessment of the child's ability to make decisions without parental consent.
 - It is important to remember that in some cases the effects of the abuse may mean that a child may not realise that they have been/are being abused, resulting in them minimising or denying the abuse. They may also claim they are 'consenting' to the activity.
 - Where it is agreed that the child's best interests would be better served by a social care led intervention rather than a criminal investigation then the following process must be followed: -
 - (i) The decision making process will be fully documented on Form PJI 1 and agreed by the CRU D/Inspector and Trust Senior Practitioner/Manager.
 - (ii) Where it is decided that no further police action would be the most appropriate course of action, a copy of Form PJI 1 will be submitted via a 'prosecutorial advice request' to the Public Prosecution Service (PPS) for endorsement. Where an occasion arises whereby the PPS do not endorse 'no further police action' a recommendation of a joint investigation will be commenced and a full file will be submitted.
 - (iii) Where social services have already initiated enquiries and have established there is no threat, fear or coercion etc. used, there are no other safeguarding issues, and where police are satisfied there are no further lines of enquiry which will progress the investigation then there will no requirement to conduct a formal interview with either the child (including PIA) or parents as the information provided by social services will be suffice.
 - (iv) In cases of 'no further action' neither party will be recorded as a suspected offender on police information systems.
 - (v) However, police and other agency information systems will be updated on information on all parties involved. This includes that the activity between both parties was deemed consensual, age appropriate and there were no aggravating

factors, as per the assessment. This may need to be considered in the context of the “right to be forgotten” in GDPR.

- (vi) Where it is determined that there is no coercion or inequality and that both young parties have neither suffered, nor are at risk of suffering, significant harm the PSNI Public Protection Branch policy will be that the best interests of the child/young person would be better served by a social care led intervention rather than a criminal investigation, and there will be no requirement for further police involvement.

NB - While all sexual offending is regarded as serious, where any one of the parties involved is under the age of 13 or alternatively over the age of 17 more serious offences have been committed, as per The Sexual Offences (NI) Order 2008, and a criminal investigation will commence. Furthermore, any person who holds a ‘position of trust’, as defined in the legislation, and engages in sexual activity with any child under 18 years of age, is also committing an offence.

4. Child Trafficking

Child Trafficking is the practice of transporting children into, out of, or within the UK for the purposes of exploitation. These include labour exploitation (e.g. restaurants), domestic servitude, criminal practices (e.g. petty street crime, illegal street trade), sexual exploitation, benefit fraud, illegal adoption, forced marriage and application of fraud.

Of note, this also includes the recruitment, harbouring and movement of children within Northern Ireland for the purposes of exploitation. **This can include child sexual exploitation.** For example, a child or young person taken from his or her place of residence to a house, hotel or some other place to be sexually exploited or abused is a victim of trafficking.

Staff from all organisations who work with children who are (or potentially are) victims of human trafficking **must** do so in compliance with the HSCB guidance **Working Arrangement for the Welfare and Safeguarding of Unaccompanied Children and Young People** and the HSCB and PSNI guidance **Working Arrangements for the Welfare and Safeguarding of Child Victims and Potential Child Victims of Human Trafficking and Modern Slavery.**

Children and young people who present as Separated/Unaccompanied Children are also particularly vulnerable to child abuse and consideration should always be given to the possibility that they may be victims of Human Trafficking (and consequently victims of organised abuse). Any suspicions of child trafficking should be referred to the PSNI’s Central Referral Unit or Social Services Gateway Team for consideration in accordance with this Protocol.

If a victim states they are a child they should be viewed as such until their age can be verified by identification or an independent age assessment is carried out by relevant HSC Trust. Child trafficking offences are committed at varying levels of organisation, from informal familial offending to highly sophisticated organised crime and are often accompanied by various types of control such as violence, threat of violence, sexual abuse, alcohol and drug abuse, manipulation of cultural practices and imprisonment to suppress victims and ensure their compliance. For that reason all investigators should be alert to the possibility that victims may not fully cooperate with an investigation for fear of reprisals. Those suspected of Child Trafficking may also attempt to abduct or coerce the child while an investigation is on-going and while the child is being cared for by the local HSC Trust. There are many indicators which may help identify if a child is a victim of trafficking

<https://www.unodc.org/unodc/en/human-trafficking/publications.htm>

5. Indecent Images of Children (including 'sexting')

The key piece of legislation relating to Indecent Images of Children is contained in 'Article 3 of The Protection of Children (Northern Ireland) Order 1978' which states that any person who:

- (a) Takes, or permits to be taken or makes, any indecent photograph or pseudo-photograph of a child; or
- (b) Distributes or shows such indecent photographs or pseudo-photographs; or
- (c) Has in his possession such indecent photographs or pseudo-photographs, with a view to their being distributed or shown by himself or others; or
- (d) publishes or causes to be published any advertisement likely to be understood as conveying that the advertiser distributes or shows such indecent photographs or pseudo-photographs or intends to do so, shall be guilty of an offence

The production or dissemination of indecent images of children under 18 years of age can involve a range of offences. Indecent images of children may be either still or moving images and deemed to be indecent. They may be created by any means including hand drawings, photographs/images, films or pseudo-photographs. A pseudo-photograph can be produced by combining various parts of other images, for example, the head from one image and the body of another. The term "indecent" is not defined in legislation and will be a matter for a court to decide. While these images are often used and/or distributed for sexual gratification, critically investigations relating to indecent images of children also provide the opportunity to identify, locate and safeguard victims who appear as actual or potential victims within the offender's network. Assistance or advice may also be sought from those who specialise in the investigation of indecent images of children such as the PSNI's Child Internet Protection Team or the National Crime Agency's Child Exploitation and Online Protection (CEOP) Centre.

The following specific offences may also relate to both 'Indecent Images of Children' and 'Sexting': -

- Article 22 Sexual Offences (NI) Order 2008, 'meeting a child following sexual grooming';
- Article 22A, Sexual Offences (NI) Order 2008 'sexual communication with a child'; and
- making, possession and distribution of an indecent image under s3 of the Protection of Children (NI) Order 1978.

The practice of self-generation of indecent imagery by children and young people raises the issue of criminal offending by children. As highlighted above, it is a criminal offence to take, make, permit to take, distribute, show, possess, possess with intent to distribute, or to advertise indecent photographs or pseudo-photographs of any person below the age of 18. Therefore, a child who takes a sexual image of themselves is committing an offence.

'Sexting' – 'Sexting' is when someone sends or receives a sexually explicit text, image or video on their mobile phone, computer or tablet. It can include 'sexual chat' and requests for pictures/images of a sexual nature.

Indecent images of children must be referred to the police Central Referral Unit for assessment between the relevant agencies.

Where one of the parties involved is aged 18 years or over then this will be subject to a Joint Investigation under this protocol.

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When both parties are under 18 years of age, as part of the assessment, in deciding on the most appropriate outcome, the following information is essential and should, where known by the referring agency, be included in Form PJI 1 when a referral is made: -

1. The images are self-generated and have been taken voluntarily;
2. There has been no threat, coercion or inducement;
3. The parties are age appropriate;
4. There has been no wider distribution of the image/s without consent;
5. There is no previous history of this behavior by either party;
6. There is no risk of significant harm to that child as a result;
7. There are no other children who have been subject of an indecent image;
8. There are no child safeguarding concerns.

NB - In circumstances where **all** of the above criteria are met then, in the interests of the child welfare, the matter can be dealt with by Social Services for appropriate intervention/education/advice. There will be no requirement for further police involvement.

If any of the above conditions **are not** met and there are no child protection concerns, this will be a police only investigation.

If any of the above conditions **are not** met and, **in addition**, there is a Social Services child protection investigation there will be a **Joint Investigation by CAIU with Social Services**.

General Considerations relating to 'Indecent Images of Children' and 'Sexting'

Technology such as mobile phones or social networking sites can play a part in child sexual exploitation, for example, through recording abuse and sharing it with other like-minded individuals or as a medium to access children and young people in order to groom and exercise power over them.

In general, children often may not consider the 'on-line' world in the same way as they would in a 'real' situation. Thus, children may not perceive the risk they face to be as 'real' as that which they may face in normal life. Children may be more exposed to the risk of abuse through their 'on-line' activity in the following ways: -

- Posting sexualised profile pictures on social networking sites;
- Sending sexualised images (sexting);
- Having relaxed security settings on on-line profiles;
- Pretending to be older than they are, for example, early teens pretending to be in their mid-teens;
- Accepting friend requests from people that they do not know in real life.

Methods used by those perpetrating the 'on-line' abuse of children has evolved in recent years and such conduct can result in a number of offences. These can take the form of deceiving children into producing indecent images of themselves or engaging in 'sexual chat' or sexual activity over a webcam, or can lead, for example, to the child or young person being blackmailed by individuals or as part of organised crime, with the threat of circulating these images on-line for some form of gain. 'On-line' child abuse can also lead to 'off-line' offending such as meetings between an alleged perpetrator and a child for sexual purposes.

In terms of young people engaged in 'sexting', every report must be considered and investigated on a case by case basis, as there are cases where, even though it is a criminal offence, the activity is not abusive. , and prosecuting the child/children involved would be damaging to them in terms of their emotional health and well-being, and would be highly unlikely to be in the public interest. However, there are also cases where there is an imbalance of power, evidence of grooming, or where the image has been distributed to others.

This Protocol does not support the criminalising of children unnecessarily.

It is imperative that in all such cases consideration be given to the content and context of the allegation or communication, the circumstances and vulnerability of the child and the activities, circumstance and actions of the suspect (s)offender. **In such circumstances, these considerations will be included in the rationale of all decisions made in accordance with the Protocol.**

NB - NICHE, other police information systems, and social services records will be updated on information on all parties involved. This includes those cases where the activity between both parties was deemed consensual, age appropriate and there were no aggravating factors (as agreed between both agencies). In these cases the details of any of the parties involved will not be recorded as suspects in any agency information systems and there will be no requirement for further police involvement.

6. Forced Marriages

A forced marriage is a marriage conducted without the full and free consent of both parties. It should not be confused with an arranged marriage, which has the consent of both parties. Forced marriage is not condoned by any major world religious or cultural traditions. Children (female and male) can be subject to forced marriages both in this country and abroad. In forced marriages, family members or spouses may perpetrate abuse, either by forcing the victim into the marriage or by abusing them after the marriage. The abuse may be committed by any family member and may not include the other party to the forced marriage. As well as various offences that may be considered, for example under the Sexual Offences (NI) Order 2008, the Forced Marriage (Civil Protection) Act 2007 allows a person to be protected. Such Orders, to afford protection, can have a power of arrest attached to them. Advice on forced marriage may be sought from The Foreign and Commonwealth Office and Home Office Forced Marriage Unit.

For further information go to - <http://www.dfpni.gov.uk/right-to-choose-forced-marriage.pdf>

7. Illegitimate Justifications for Violence and Abuse

Illegitimate justifications for violence and abuse, including murder are sometimes referred to as so-called 'honour-based violence' (HBV). There have also been examples of child abuse linked to a belief in witchcraft or other spiritual or religious belief. No cultural or religious heritage takes precedence over the standards to child care embodied in law and no religious or cultural belief justifies the abuse of children. These "justifications" can be described as a collection of practices which are used to control behaviour within families to protect perceived cultural and religious beliefs and/or honour. Abuse may occur when perpetrators perceive that a relative has shamed the family and/or community by breaking a perceived honour code. These "justifications" may be distinguished from other forms of violence as it is often committed with some degree of approval and/or collusion from family and/or community members. Examples may include domestic abuse, child abuse, rape, kidnapping, false imprisonment, threats to kill and fear of or actual forced marriage.

8. Female Genital Mutilation

Female Genital Mutilation (FGM) is the term used to refer to the removal of part or all of the female genitalia for stated “cultural” or other non-therapeutic reasons. This practice is extremely painful and traumatic for the victim and has serious consequences for physical, sexual and mental health. It also can result in death. FGM is usually practiced in the country of origin of the child's family and, as such, while FGM can be practiced in Northern Ireland, children may also be transported out of Northern Ireland to undergo such mutilation. It is typically performed on girls aged between 4 years and 13 years, but can also be performed on new-born infants or on young women prior to marriage or pregnancy. It is not a religious practice. Any such abuse on a female of any age is illegal under the Female Genital Mutilation Act 2003. It is also an offence under the Act for UK Nationals or permanent UK residents to be involved in any way in this being carried out in the UK or abroad. The Serious Crime Act 2015 makes provision for Female Genital Mutilation Protection Orders (FGMPO's). An FGMPO is an Order which can be made by the High Court or County Court in Northern Ireland for the purpose of protecting a girl against the commission of a genital mutilation offence or protecting a girl against such an offence. For further information on the Serious Crime Act 2015, and in particular paragraph 18(1) of the Schedule, https://www.google.co.uk/?gws_rd=ssl#q=Serious+Crime+Act

9. Parental Chastisement

The relevant legislation relating to reasonable chastisement is contained in Article 2 of the Law Reform (Miscellaneous Provisions) (NI) Order 2006.

This Order changed previous legislation where there was a presumption of entitlement to assault a child so long as it was within the realms of reasonable punishment. **Following the commencement of the 2006 Order there is no longer this presumption of entitlement. However, a parent can use reasonable chastisement, as a legal defence (that the chastisement administered was reasonable in the circumstances).**

This should not be interpreted as ‘permission’ to physically chastise children and the defence only applies in a narrow set of circumstances.

A proportionate response focused on education and parenting guidance may in some cases be in a child and families’ best interests. In such cases rather than instigating a criminal investigation particularly in cases where lack of understanding or parenting skill are key factors. If during any initial assessment of the circumstances the view is taken by either Police or Social Services, that such an outcome, would be in the best interests of the child and the child’s family, it must still be referred between the partner agencies

The importance of taking a holistic approach to assault cases in these circumstances cannot be overstated. This is to ensure we are not missing one of on-going neglect or ill treatment which might constitute cruelty. The history of the child, siblings, and parents and their interaction with statutory or voluntary agencies together with all available information being sought and considered is critically important in the assessment process. This includes circumstances of previous assaults against the child or siblings which left no injuries and/or there were no aggravating factors.

NB - Any injury to a child or aggravating factor would not be considered ‘reasonable punishment’. ‘Reasonable’ would not be considered appropriate where, for example, there is reddening of the skin that is not transient or trifling, or where injury is not readily apparent but the chastisement may not be considered reasonable e.g. shaking a baby or hitting a child across the head or pulling/dragging by the hair.

Where a social worker has assessed that a child neither has suffered, nor is at risk of suffering, significant harm’ and has referred the case to the Central Referral Unit, and it is agreed that their best interests would be better served by a social care led intervention rather than a criminal investigation

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then the matter can be closed by the Central Referral Unit on the Form PJI 1 with the relevant rationale detailing why the matter was not further jointly investigated. This means where social services have already initiated enquiries and have established there is no injury, no aggravating factors or no other safeguarding issues and where police are satisfied there are no further lines of enquiry which will progress the investigation then there will no requirement to conduct a formal interview with either the child (including PIA) or parents as the information provided by social services will be suffice. In cases such as these, to ensure proportionately and fairness, the parent concerned will not be recorded as a suspect on police information systems and there will be no requirement for further police involvement. Where the referring agency considers that the case would be best resolved through a social care led intervention they should include the following information which is essential to the decision making assessment and should, where known by the referring agency, be included in Form PJI 1 when a referral is made: -

1. The nature and context of the incident;
2. The duration of that behaviour;
3. The age and personal characteristics of the child;
4. The reasons given by the alleged offender for administering the punishment;
5. Confirmation that the child has been seen and spoken to;
6. Where other family members have been present during the incident – accounts obtained of the circumstances of the incident; and are they consistent;
7. Any previous concerns of child protection nature;
8. Detail of any wider child protection concerns (relating to siblings or medical conditions etc);
9. Demeanour of the suspect – whether they are cooperative / compliant with Social Services intervention/family support.

NB - In circumstances where **the above information is assessed and the outcome is agreed by both Police and Social Services that a single agency Social Services intervention is** in the best interests and welfare of the child, then the matter can be dealt with by Social Services for appropriate intervention/education/advice. There will be no requirement for further police involvement. Where both agencies cannot agree on a social care led intervention as the outcome then the case should be discussed between the relevant line managers.

10. Unexpected Death of a Child Under 18 Years of Age

Despite the huge reduction in child deaths, particularly infant deaths, seen in recent years, many children will die before they reach the age of 18. The majority of these deaths occur as a result of natural causes or by accident. It is recognised that the vast majority of parents would never harm their children. However, some do, whether by deliberate violence, neglect, ill treatment, by maliciously administered substances or by the careless use of drugs.

In cases such as these, a referral should be made by the Central Referral Unit as soon as possible to Social Services Gateway Team or Regional Emergency Social Work Service in accordance with this Protocol, in the following cases:

- Sudden Unexpected Death in Infancy (for the purposes of this Protocol, under the age of 2)
- Suicide, where abuse is suspected or there has been extensive agency involvement in that child's life

- Death of child who is on, or was on (if known) the Child Protection Register or a sibling is or was on the Child Protection Register (if known) or was previously a looked after child or
- Any other death of a child where abuse is suspected

11. 'Looked After' Children

Particular consideration should be given to the need for a joint investigation when either a child whose name is already on the child protection register, or a 'Looked After Child' (Article 25 Children (NI) Order 1995) alleges abuse or is suspected to have been the victim of abuse. . A child is 'looked after' when he/she is in the care of an HSC Trust or is being provided with accommodation by an HSC Trust.

12. Peer on Peer Abuse

When children are reported to be abusing others, this should be recognised as a possible indicator that they are, or have been, a victim of child abuse. In addition to Joint Protocol working, See also Appendix A - 3, 5 and 11 above.

13 Children subject to threat from Paramilitary Groups

Children subject to threat of harm from paramilitary groups are at risk of abuse and significant harm or may have suffered significant harm. Where children are subject to a threat of violence or actual violence from Paramilitary Groups, regardless of which agency is initially notified where a child / young person is subject to a beating / shooting an referral must be made to the Central Referral Unit as soon as practicable in accordance with this Protocol. In all circumstances a PJI1 Form must be completed and forwarded to CRU who will assess the information, and pass to the relevant District Inspector who will ascertain the risk level and undertake immediate mitigating actions.

This will ensure information is shared at the earliest opportunity and that the relevant agency policies and procedures are adhered to. The threat or actual violence will be managed by the PSNI in accordance with the PSNI Case Allocation Policy, however it should be recognised that staff within the Public Protection Units and other departments within the PSNI who are trained to conduct 'Joint Investigations of alleged or suspected Child Abuse' have the necessary skills to assist those conducting the investigation, specifically in the context of the victim and other potential child witnesses.

CRU Referral Information Checklist

Guidance

An investigation begins with a report of child abuse and at the point of referral as much detail as possible to safeguard children and support a thorough investigation should be obtained. Police officers need to ask relevant questions and clearly identify reports as child abuse. Where such referrals are being made to the PSNI then every effort should be made to establish information fundamental to both safeguarding and any subsequent criminal investigation.

To assist with this process an 'Information Checklist' is available to assist both the PSNI and Social Workers making the referral in establishing this important information. Staff should attempt, where possible, to obtain as much of the information as listed within the 'Information Checklist' as possible and then share this when making the referral (it is recognised that there will be cases where this information is not available or it is not possible and/or appropriate to obtain it).

The PSNI CRU staff receiving the referral will also assess this 'Information Checklist' against the referral and if not included or there is no explanation why the information is not included then the PSNI CRU member of staff will try and ascertain the relevant information.

Note – this 'Information Checklist' is in addition to and in support of the sharing of any other information either agency chooses is relevant in the context of safeguarding children, any criminal investigation or both.

Questioning

- Initial questioning should at a minimum determine what happened, where and when.
- Not all the information in the information gathering checklist will be available to the person making the initial referral. If it is not available or the referrer has been unable to obtain the information then this should be noted on the checklist.
- Not all the information in the information gathering checklist is necessary on every occasion. Where the information is not relevant then this should be noted on the checklist.
- Issues relating to safety and risk should be the priority at all times in order to ensure the correct decision is made about deployment.
- Details of electronic communications do not only relate to online investigations. They can also provide critical evidence for other investigations.
- When an individual wishes to remain anonymous, report takers should attempt to establish the capacity in which they are calling (eg, neighbour, acquaintance or health professional), ask why they wish to remain anonymous and record the reason(s).

Considerations for ALL Child Abuse referrals	
CONTEXT of referral (nature of the incident or concern)	
first account or what the caller says has occurred (recording it verbatim if possible)	
location of the incident	
location of the suspect and victim (and any other children in the same household, eg, siblings)	
Aggravating factors	
whether anyone is/was injured, nature and severity of injuries and whether medical assistance is/was required	
whether any weapons were used	
whether any weapons were/are available to the suspect	
location and identity of the person making the report and the capacity in which they are doing so, eg, neighbour or family member, Police officer	
identity and details of the victim, including names (correctly spelt) sex, dates of birth, home addresses, telephone numbers and whether they are safe	
identity and details of any children, including names (correctly spelt) sex, dates of birth, home addresses, telephone numbers and whether they are safe	
identity of other parties involved, including the suspect, their names (correctly spelt) sex, dates of birth, home addresses, telephone numbers	
whether communication or language issues exist and whether officers will require an interpreter or a registered intermediary	
whether there are any particular requirements, for example, relating to disability and/or mental ill health	
description of the suspect	
whether any court orders apply/applied	
If relevant details of children's school and GP, if known	
whether there is any history of involvement of children's social care	
details of attempts made to trace anonymous callers, eg, telephone tracing	
whether the victim, other children or suspect has a computer	
Internet service provider, email address and user names if known	

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Specific previous partner agency records of previous allegations – not just confirmed physical/sexual/cruelty or emotional abuse cases (including cases reported to police or not)	
Whether or not the victim supports an investigation within the criminal justice process, where it is suspected that the activity is either consensual or non-consensual	
Partner Agency views of what is in the best interests of the victim and relevant rationale	

CC

(please use this number on all future

CONFIRMATION OF REFERRAL

Referral on Date: _____ Time: _____

To: _____ Designation: _____

From: _____ Designation: _____

Referrer's Telephone
Number: _____

Referrer's Address: _____

Referrer's Email Address: _____

Child's Name: _____ DOB: _____

Home Address: _____

Present Location: _____

Person with parental
responsibility: _____ DOB: _____

Address: _____

Telephone
Number: _____

Alleged
Perpetrator: _____ DOB: _____

Telephone
Number: _____

Address: _____

Address where alleged incident(s) has taken place, if known/suspected:

Nature of Referral – Comment

(include background of involvement with Social Services or Police)

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Joint Assessment

(Considerations, concerning child/sibling, might include assessment of current placement; the CP Register; child protection concern/referral/investigation; missing episodes; attempted suicide/self-harm; misuse of drugs/alcohol; CSE indicators; or if significant person(s) in the child/young person's life is a suspected domestic /sexual abuser, misuses drugs/alcohol etc.)

HAVING REVIEWED THE AVAILABLE MATERIAL/EVIDENCE/HISTORY THE AGREED OUTCOME OF INITIAL JOINT ASSESSMENT IS:

JOINT INVESTIGATION: **YES** **NO**

If 'NO' note outcome decided, as below:

- No Further Action
- Social Services only
- Police Only Investigation

Rationale:

Agreed by: _____ (Social Worker) and _____ (Police Officer)

Completed by: _____ Date: _____

**Referrer to complete Pages 1 and 2, PO to complete Pages 2 and 3.
Completed form to be emailed asap via CJSM to HSCT/CRU.**

JOINT STRATEGY FOR INVESTIGATION

Child's Name: _____ DOB: _____

Police Occurrence _____

Initial strategy/actions decided upon:

(Considerations might include court orders/police protection; medical examinations; Registered Intermediary/other specialist assessment; the use of disruptive tactics eg RoSHO, CAWN etc.)

•	
•	
•	
•	
•	
•	

Is an Initial Child Protection Case Conference to be convened? Yes

Agreed by _____ (Social Worker and Police Officer)

Date: _____

Having reviewed the available material/evidence/history to date the following amendment(s) to the strategy was agreed:

•	
•	
•	
•	
•	
•	

Agreed by _____ (Social Worker) and _____ (Police Officer)

Date: _____

Having reviewed the available material/evidence/history to date the following amendment(s) to the strategy was agreed:

•	
•	
•	
•	
•	
•	

Agreed by _____ (Social Worker) and _____ (Police Officer)

Date:

Completed online by PO and emailed to SW via CJSM Network ASAP

CHILD WITNESS PRE-INTERVIEW ASSESSMENT

Name of Child: _____ DOB: _____

Police Occurrence Number _____

Date: _____ Time: _____

Any other persons present	Designation/Relationship
_____	_____
_____	_____

Interpreter Required? Yes

The purpose of this PIA is to assess the child's willingness and ability to participate in an investigative interview and not to obtain a disclosure from the child.

Record of Discussion

(If, during the discussion, the child spontaneously discloses evidence of abuse, a contemporaneous verbatim record must be made):

Please provide an assessment of the child's willingness and ability to engage in an investigative interview:

Comment:

Has the child witness opt out procedures been explained to the young Yes

If 'No', explanation:

Based on the assessment which is the most suitable format for the interview for this child?

Digitally Recorded Interview

Written Statement

Record any particular considerations/planning the interview team should take account of:

Authors Signature: _____

Print Name: _____ Designation: _____

Author to scan and email SW/PO via 'CJSM network', as soon as practicable

INDEX TO RECORDED INTERVIEW

Child's Name: _____ DOB: _____ / _____ / _____

Police Occurrence Number: _____

Date of Interview: _____ / _____ / _____ Place of Interview: _____

Time Commenced: _____ Time Ended: _____

First Interviewer: _____ Second Interviewer: _____

Please note: Details recorded should be, where relevant, in the child's own words.

Recording Time/Person Speaking	Text

NOT PROTECTIVELY MARKED

Original Retained by Police

Child's Name: _____ DOB: ____/____/____

Recording Time/Person Speaking	Text

Form PJ14/
PB 4/15

NOT PROTECTIVELY MARKED

Original Retained by Police

JOINT DECISION TO END JOINT INVESTIGATION

Child's Name: _____ DOB: _____

Police Occurrence Number: _____

Having reviewed the available material/evidence/history it has been agreed at this time to end the joint investigation (a single agency intervention/investigation may continue outside of this process),

- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____

Agreed by:

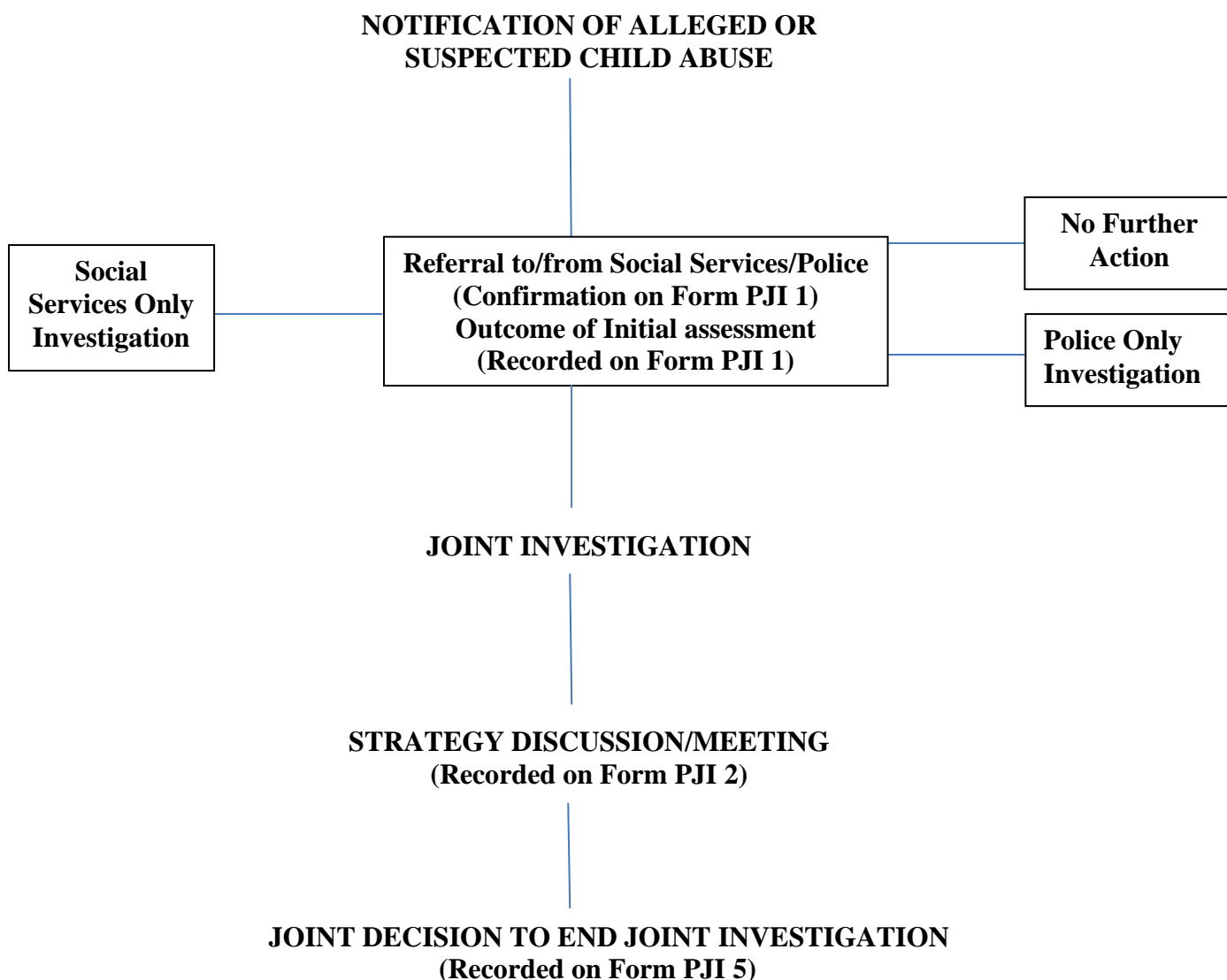
(APSW or
SSW Social
Worker) and

(Inspector) Date:

Please ensure that the Child/Young person (and parents/carers) is informed of this decision (unless there are justifiable reasons not to).

Completed by PO and emailed to SW via 'CJSM network', ASAP

CONSULTATION, INITIAL ASSESSMENT, PLANNING AND JOINT INVESTIGATION



NB - If at any stage the Joint Protocol process/investigation ends each agency should agree and the decision must be recorded on the Form PJI15.

**AIDE MEMOIRE
WITNESS ASSESSMENT & INTERVIEWS**

Consideration 1 - Assessment of witness

What offence are we dealing with	
<p><input type="checkbox"/> Witness's age: (Do not assume that older child will necessarily be more confident than a younger one) -</p> <p><input type="checkbox"/> Witness's race, culture, ethnicity and first language:</p> <p><input type="checkbox"/> Witness's religion;</p> <p><input type="checkbox"/> Preferred Name :</p> <p><input type="checkbox"/> Implications of any physical, learning disability or mental disorder for the interview process:</p> <p><input type="checkbox"/> Any specialist health needs:</p> <p><input type="checkbox"/> Domestic circumstances (including whether the child is currently in a safe environment)</p> <p><input type="checkbox"/> Witness's linguistic abilities (eg how well do they understand spoken language and how well do they use it?):</p> <p><input type="checkbox"/> Witness's current emotional state ie: trauma, distress, fears of intimidation, recrimination, any recent significant stressful event and range of behaviours:</p>	<p><input type="checkbox"/> Is the witness on any medication? (If so what effect does this have on the witness?)</p> <p><input type="checkbox"/> Witness's family members/carers/advocates and nature of relationships:</p> <p><input type="checkbox"/> Any significant stresses recently experienced by witness and or family (ie: bereavement: divorce)</p> <p><input type="checkbox"/> Likely impact on recalling traumatic events on the behaviour of the witness</p> <p><input type="checkbox"/> Current or previous contact with public services (including police, social care, health)</p> <p><input type="checkbox"/> Requirement for support during ABE interview: (if relevant)</p>

Consideration 2: Categories of witness

Vulnerable Witness

Art 4 Criminal Evidence (NI) Order 1999

Child under 18

Quality of evidence given by witness likely to be diminished by reason of ;

Mental Disorder

Mental Disorder defined by Mental Health (NI) Order 1986

Learning Disability

Learning Disability includes the presence of:

- A significantly reduced ability to understand new or complex information, to learn new skills (impaired intelligence), with;
- A reduced ability to cope independently (impaired social functioning); which started before adulthood.

Physical Disability : A person is vulnerable under this section only if their disability has an adverse impact on persons communication.

Intimidated Witnesses

Art 5 Criminal Evidence (NI) Order 1999

Taking into account the following;

Sexual Assault Domestic Violence Racially Motivated Crime Hate Crime (other)

Repeat Victim Self Neglect/Self Harm Elderly/Frail

Significant Witnesses

Significant witnesses, sometimes referred to as 'key' witnesses, are those who:

- Have or claim to have witnessed, visually or otherwise, an indictable offence, part of such an offence or events closely connected with it (including any incriminating comments made by the suspected offender either before or after the offence); and/or
- Have a particular relationship to the victim or have a central position in an investigation into an indictable offence.

ACPO Murder Investigation Manual 2006

Special measures definitions:

Special Measures

Screens

The live link

Evidence given in private
(Sexual offences & those involving intimidation)

Removal of wigs and gowns.

Video recorded interview as evidence in chief.

Video recorded cross-examination
(not yet implemented)

Examination of the witness through an intermediary.
(Vulnerable witnesses only)

Aids to communication. (Vulnerable witnesses only)

Other Measures

Mandatory protection of witness
from cross-examination by the accused in person.(cases
involving sexual offences)

Discretionary protection of witness from cross-
examination by the accused in person (other
types of offence)

Restrictions on evidence and questions
about complainant's sexual behaviour.

Reporting restrictions

Child victim/witness

There is a presumption that all children under the age of 18 years will give their evidence in chief by visually-recorded interview and any further evidence by live TV link unless the court is satisfied that this will not improve the quality of the child's evidence.

All children have the right to "opt out" of giving their evidence by visually recorded interview. The officer attending must explain the process as per below to child /carer.

Child Witness 'Opt out' 5 step process

Step one

Explain what video-recorded evidence-in-chief is (V.R.I.), stress that whether the video is actually played is ultimately a matter for the court.

Step two

Explain that children usually give their evidence-in-chief by means of pre-recorded VRI but they can 'opt out' if they wish.

NB if you can justify why a VRI is not the best way for presenting their evidence in this case explain your reasons to the child / carer. *RECORD your rationale.*

If the child or carer disagrees and still requests a VRI AND if PPS cannot be contacted for an early special measures discussion continue with a VRI interview.

Step three

Explain that if they 'opt out' of a VRI a written statement will be taken from them. This will mean that it will be assumed that they will give their evidence via live TV link when at court. BUT with the permission of the court they can 'opt out' of using the live TV link.

Step four

Explain that if they 'opt out' of giving evidence via live TV Link it will be assumed that they will give live evidence from behind screens. BUT with the permission of the court they can 'opt out' of using screens.

Step five

Explain that if they 'opt out' of all the above they will give evidence live in court.

Remember:

Document rationale: Remember rapport building starts at the pre interview assessment.

The record should be as comprehensive as possible, any comments made by the witness of apparent evidential or investigative significance should as far as practical be recorded verbatim together with any follow up questions that need to be asked to clarify them

Consider the below when documenting rationale.

1. How will capturing the evidence on visually recorded interview enhance the quality of the evidence
2. Has special measures been explained
3. Has the "opt out" been explained (if child witness)
4. Are there any issues of intimidation/fear/coercion/recrimination or trauma
5. Important to make clear, relationship, with suspect, communication difficulties, mental health/learning difficulties
6. What support the witness receives from other agencies.

Remember :

Consent

- a) You need consent to interview
- b) If child parental consent required unless they fit Fraser/Gillick competency.

AIDE MEMORIE

INTERVIEW PLANNING

Aim of interview : To establish -----
Interview objectives : (think “plaits”: people, locations, actions, items, time, speech)
Points to prove (considerations)
Interview Model : Free recall/Four phase
Interview Technique : Conversation management /cognitive / enhanced cognitive
Event Information : relevant topic areas (think advocate, any other witnesses present, anything said by third party)
Investigative information: (dependant on witness and their position in investigation some examples would be: relevant lifestyle information, history of certain relationships, routines, routes usually taken, places frequented, mobiles, computer

INTERVIEW (4 PHASE) AIDE MEMORIE

Introduction musts

- Date
- Time
- Persons present (include monitoring and support)
- Location
- Equipment
- Rapport (note: length and relevance)
- Truth and Lies (if appropriate)

Reason for interview

Ground Rules

- Use of words (i.e., do not use police jargon, and age appropriate).
- “If you don’t know the answer to a question or do not understand let me know.
- If you are not sure about an answer its ok to say I don’t know please do not guess.
- “I wasn’t there so tell me everything even if you think I already know tell me as much detail as possible, even the smallest detail, do not leave anything out.”
- “If I misunderstand something you say please tell me I want to get it right”
- “Even if you think I know something please tell me anyway
- “I will not get angry upset or embarrassed by anything you say.
- Breaks
- Rapport using neutral topics and landmarks (eases witness into interview and shows memory recall, and cognitive ability).

Free Narrative

- Do you know why we are here today? (hopefully they will give you a brief one line response about the crime).
- Encourage the witness to give a full and comprehensive account as possible in their own words by saying something like:
 - If using cognitive then remind witness of the process: (put yourself back to the same place when you saw think of where you were how you were feeling at the time, what you could hear, what you could smell, people present, objects there (i.e., lost keys)
 - Tell (explain, describe) to me everything about

Identify event topic areas

Identify the topics from their account and probe each topic area through questioning

- Identify relevant event topic areas from free narrative and probe each topic to get the detail.
- Hand over to second interviewer if appropriate before moving onto next topic area.
- Remember you can sub topic a topic area to set smaller parameters.
- Remember open questions TED, funnelling to 5wh and closed.

Identify case specific investigative information topic areas.

(background relationships places frequented routes usually taken, use of mobile, vehicles phones etc.

- **As above.**
- If your objectives not covered then topic area and probe.

Closure (helps to relax witness)

- Return to neutral topics.
- Do they have any questions?
- State time interview closed.
- Think VPS if relevant (can be done on new DVD if necessary).

Protocol for Joint Investigation Forensic Interview Assessment Form

Forensic Investigative Interviewing

Interviewing in accordance with Achieving Best Evidence Guidance.

Date:

Time:

1st Interviewer:

2nd Interviewer:

Completed by: _____
(name and signature)

Planning the interview:

	Yes	No/ Partial	N/A	Notes
Reviews the available material/evidence/history of witness to establish course of action.				
Assess current physical and emotional condition of witness to establish fitness for interview.				
Establish necessity for others to be present during interview.				
Review information and consult with relevant others to plan an interview strategy (Including forms PJI1 and PJI3).				
Establish the appropriate time, place and environmental conditions for the interview.				
Select and set up the necessary interview location and resources.				
Identify an appropriate interview strategy to gather information for the investigation.				
Prepare a written interview plan that is clear and meets the need of the witness and investigation (including points to prove).				
Supply information to the interviewee and appropriate others.				
Identify and take account of any issues regarding fear of testifying.				
Fully document all decisions, actions, options and rationale.				
Identify, take account of and record all Human Rights issues and considerations.				
Checks technical aspects of the interview: sound and picture quality, use of earpiece, suitable seating and correct view of witness on recording.				
Checks availability of appropriate resources for use during interview.				
Discusses neutral topics.				
Makes use of prior knowledge of witness' social, emotional and cognitive development.				
Makes use of open questions to ascertain witness' response/cognitive development.				

Conducting the interview:

	Yes	No/ Partial	N/A	Notes
Conducts assessment and introductions with witness prior to commencing recording, to ascertain witness response/cognitive development				
Deal with individuals in an ethical manner, recognising their needs with respect to race, diversity and human rights.				
Conduct the interview in accordance with the interview plan, whilst maintaining flexibility in response to the witness' behaviour and attitude.				
PHASE I (Introductions, Rapport and Ground Rules)				
Introduces all those present to the witness using the witness's preferred name.				
States date, time and location of interview. (2 nd interviewer)				
Points out the equipment in use, including cameras, microphones and use of earpiece.				
Check witness' consent re interview, interviewer selection and possible use in court.				
Discusses neutral topics (only if appropriate)				
Explanation of the format and structure of the interview process.				
Explains that witness is free to say that they don't understand terminology or questions being asked.				
Explains that witness is free to say that they don't know or can't remember when asked a question.				
Explains witness may take a break at any time.				
Explain the importance of telling everything and leaving nothing out.				
Explain the importance of telling the truth.				
Explore witness' understanding of truth and lies and provide an appropriate example.				
Appropriate amount of time spent at this phase in the specific circumstances.				
Check with 2 nd interviewer that all issues covered before moving on.				
Check that witness is ready to move on to next phase of the interview.				

	Yes	No/ Partial	N/A	Notes
PHASE II (Free Narrative)				
Makes use of open question or phrase to prompt/facilitate witness' initial account.				
Makes use of appropriate continuances to encourage free narrative.				
Displays active listening and appropriate verbal utterances.				
Does the interviewer interrupt the witness?				
Makes use of pauses and silence during the interview.				
Provides witness reassurance, if appropriate.				
Obtains as full a free narrative account from the witness as possible without questioning.				
Gives witness permission to correct any summary of account/free narrative provided.				
Summarises account when appropriate.				
Checks that summaries are accurate with witness and 2 nd interviewer.				
Moves on to Phase III at the appropriate time.				
PHASE III (Questioning)				
Explain to witness the move to Questioning and the structure of this Phase of the interview.				
Free Narrative account appropriately broken down into 'topic areas'				
Provide boundaries for the witness to focus on specific topic area.				
Make use of the questioning funnel, as appropriate.				
Makes use of specific questions.				
Makes use of closed questions.				
Makes use of appropriate leading questions.				
Uses inappropriate leading questions.				
Uses multiple questions.				
Obtains as full and clear account as possible before moving on.				

	Yes	No/ Partial	N/A	Notes
Specific topic area questioned and probed before moving on.				
Gives witness permission to correct any summary of information provided				
Summarises account when appropriate.				
Checks that summaries are accurate with witness and 2 nd interviewer.				
Displays active listening and appropriate verbal utterances.				
Makes appropriate link between topic areas.				
Clarifies any ambiguities, inconsistencies or terminology used.				
Covers points to prove in criminal proceedings.				
2nd INTERVIEWER CONSIDERATIONS				
States date, time and location.				
Keeps an accurate record of relevant points. (PJI 4)				
Identifies points to prove and ensures issues are covered in sufficient detail.				
Displays listening skills.				
Is alert to the needs of the witness.				
Is alert to the needs of the 1 st interviewer.				
Works to the agreed interview strategy whilst remaining flexible.				
Communicates appropriately with the 1 st interviewer and interrupts only when necessary.				
Maintains an awareness of time.				
Ensure inaccuracies, ambiguities, inconsistencies or misunderstandings are clarified.				
Corrects inaccuracies made by 1 st interviewer.				
Makes appropriate use of silence/pauses.				
Ensures sound and picture quality is appropriate and deals with technical issues.				
Maintains integrity of exhibits including DVD/Video/audio tapes.				

	Yes	No/ Partial	N/A	Notes
PHASE IV (Closure)				
Move to closure explained to witness.				
Check that witness has nothing more to add.				
Check with 2 nd interviewer, as appropriate.				
Summarise information, if appropriate.				
Invite questions from witness.				
Answer questions asked by witness.				
Thank witness for participation in interview.				
Explain what happens next.				
Check witness' welfare.				
Return to discussing neutral topics.				
State date and time at conclusion of interview.				
OTHER ISSUES TO CONSIDER.				
Reinforcement of Ground Rules throughout the interview.				
Use of resources incl. maps, charts, pens and paper during the interview where appropriate.				
Items appropriately exhibited and signed.				
Dealt with softly spoken/shy witness.				
Dealt with technical faults.				
Dealt with outside noise.				
Check witness welfare throughout, where appropriate.				
Provide witness with card/contact details.				
Use of age/cognitive appropriate language/terms.				
Conduct interview at suitable pace for witness.				
Interview lead by needs of the witness.				
Interview conducted in an informal yet confident and professional manner.				

Identify interviewer's strengths in the interview:

Signed: _____ Date: _____

Identify areas for development:

Signed: _____ Date: _____

Trainer notes on structure and conduct of interview.

[Empty box for notes]

Signed:

Date: