

Appendix 10

Protocol for Joint Child Protection Enquiries/Investigations

1 Introduction

This Protocol has been developed to help all agencies involved with the investigation of allegations of abuse of children to work together for the best interests of the child and criminal justice. It offers an agreed way of working which should ensure:

- the development of strong and effective professional partnerships that will enhance the investigative process for all children and young people
- an opportunity for professionals to make informed assessments and plan appropriate action
- that the process of investigation causes minimum distress to the child and allows them to receive the best protection and support through the criminal and civil channels, and
- South Yorkshire/Rotherham Child Protection Procedures are followed

This Protocol should be read in conjunction with Section 5 of these procedures: Referring Concerns to Children's Social Care Services or the Police'. They are informed by guidance contained in 'Working Together to Safeguard Children' (2006) and the principles within the 1999 Youth Justice and Criminal Evidence Act. Much of the Protocol is also taken from 'Achieving Best Evidence in Criminal Proceedings' (2002)²³

2 Initial Concerns

Whenever Children's Social Care or the Police encounter or have a case referred which constitutes, or may constitute, a criminal offence against a child, **they should always inform their partner agency at the earliest opportunity**. All Child Protection referrals to South Yorkshire Police by Social Care should be made to the Central Referral Unit (CRU).

Early consultation should facilitate efficient collection of possible evidence; sharing of other information concerning the child, family and/or the alleged perpetrator and a discussion on the most appropriate way to progress the needs of the child using the skills and expertise of all agencies. Children's Social Care and the Police should always record the date of this conversation, and all subsequent conversations, with their counterpart, the name of the person spoken to and the outcome of the discussion.

The decision to undertake a joint investigation by Police and Children's Social Care should be taken jointly and be based on the child's best interests. A manager from each agency should always be involved at the referral stage and in any further strategy discussion. These managers

should take an active role in ensuring that the investigation is carried out in a proper manner throughout. Where there is any disagreement about the advisability of a course of action, this should be discussed at a management level between the two agencies. It is suggested that this should be conducted between Team Manager and Sergeant, or, if not resolved, between Safeguarding management and the Inspector.

There may be exceptional circumstances when it is considered essential for the Police to act immediately, but not possible to discuss the matter with Children's Social Care if, for example, the Out of Hours Service is unavailable. In most cases, such decisions should be made in consultation with officers based within the respective District Public Protection Unit Child Abuse Investigation Teams (formerly the Child Abuse Investigation Unit).

If, for any reason, the investigation is instigated by district Police officers, they should liaise with officers from the Public Protection Unit Child Abuse Investigation Team or the Central Referral Unit at the earliest opportunity. Where emergency action has been taken to protect a child, Police should inform Children's Social Care Out of Hours Service in the first instance. If this is not immediately possible, Children's Social Care should be informed at the start of the next working day.

3 Purpose of Joint Investigations

The purpose of joint investigations is to utilise the respective skills and information held by Police officers and Social Workers in the investigation of allegations or suspicions of child abuse, whilst safeguarding the child.

Joint investigation should:

- aim to achieve a consistent approach to child abuse investigations
- improve lines of communication and co-operation between the agencies concerned and
- increase public confidence in the effectiveness of those agencies to deal with child abuse in a positive, properly co-ordinated and sensitive manner

4 Criteria for Joint or Single Agency Investigation

4.1 Joint Enquiries/Investigations between Police and Social Care

Joint enquiries/investigations should **always** take place when the concern is regarding:

- a) Allegation, or medical evidence, of sexual abuse or serious physical injury where:
 - there is a definite link between the victim and the alleged perpetrator eg daughter, son, parents,

grandparents, other family members, mother's/father's partner or cohabitee, close family friend

- an alleged perpetrator works, in paid or volunteer capacity, with children eg Teacher, Police Officer, Youth Worker, local authority children's homes employee, volunteer etc. Please refer to Section 8 of these Procedures
- an alleged perpetrator continues to pose a risk to the child or to other children by virtue of their contact with them
- concerns are expressed about other factors in the family eg failure to protect, possible collusion in the abuse etc

- b) unexplained injuries on very young children
- c) serious cruelty, ill treatment, neglect, abandonment or exposure to moral danger
- d) organised or multiple abuse
- e) suspicion of fabricated or induced illness
- f) sexual exploitation
- g) the suspicious or unexplained death of a child

Joint enquiries should take account of:

- the wishes of the victim/non-abusing family members where this is consistent with the child's welfare, and
- any circumstances that do not fit the above when, after discussion between agencies, it is considered that a joint investigation would be beneficial in protecting the child and his/her needs.

4.2 Criteria for Single Agency Investigation: South Yorkshire Police

In most cases the investigation of alleged offences against children should be conducted by Police Officers at the South Yorkshire Police Public Protection Child Abuse Unit, located in each authority area.

A strategy discussion may agree that a single agency investigation may be undertaken by Police where:

- a) there are concerns or suspicions of offences of child abuse where the concern is regarding children who may be victims of 'stranger' abuse, where the child, or other children, are not at continuing risk of abuse having regard to Section 3.2 a) above
- b) in exceptional situations the Police need to take immediate action to protect a child and Children's Social Care is unavailable eg weekends and out of hours (limited assistance may only be available from out of hours duty teams). As soon as Children's Social Care is available, the investigation should be conducted on a joint basis.

Where the Police have undertaken a single agency investigation and they consider a child particularly vulnerable or distressed, they should consider making a referral to Children's Social Care, or other appropriate agency. If Children's Social Care receive such a referral, they should conduct an initial assessment of the child's circumstances in the normal way, that will consider whether there are grounds to undertake enquires under Section 47 of the Children Act.

In all cases, enquiries should also be made to the list/register of children who have a Child Protection Plan.

4.3 Criteria for Single Agency Enquiries: Children's Social Care

A strategy discussion between Children's Social Care and South Yorkshire Police may agree, in the following circumstances, that Children's Social Care may undertake a single agency investigation:

- a) allegations of minor physical assault within a family setting, where the concern is of poor parenting rather than intent, and where there are no other significant concerns identified by the initial assessment. A medical examination should be agreed with a Paediatrician. Decisions as to whether the investigation remains on a single agency basis and how the child is best protected, should only be taken after the nature and implications of the injury and child's general wellbeing have been explored with the Paediatrician, and the Paediatrician's views have been taken into account
- b) situations where both the victim and offender are under the age of criminal responsibility, depending on the nature or severity of the assault. This would not apply to serious injuries to pre-verbal children where parents may allege those injuries have been caused by another child
- c) incidents that could be viewed as sexual experimentation between consenting children of a similar young age

5 Planning the Investigation

5.1 Strategy Discussion/Meeting

Whenever the Police or Children's Social Care have reasonable cause to suspect that a child is suffering, or is likely to suffer, significant harm, there should be a strategy discussion involving managers between them and other agencies as appropriate. The Paediatrician on-call for Child Protection work should also be involved in a discussion if a medical examination is required as part of the acute assessment.

The Strategy discussion/meeting should be held in line with Section 6.11 of these procedures but, in particular, should consider:

- a) the welfare and safety of the child
- b) whether the investigation should be undertaken on a joint or single agency basis at this point. **However, this may change throughout the course of the investigation**
- c) the nature of any initial visit to the child and family (see Section 5.2 below of this Protocol)
- d) the necessity for any medical assessment and its nature and timing (see below Section 5.3 of this Protocol), after discussion with a Paediatrician from the relevant local service

It is essential for the smooth conduct of any investigation that all relevant agencies have contributed to a clear and detailed plan.

It is vital that the strategy discussion/meeting is seen as an **ongoing process involving managers** and that throughout the course of the investigation there is clear dialogue between agencies regarding the planning of each stage and development.

5.2 The Initial Visit

Initial joint Police/Children's Social Care visits should be considered if:

- a) there is a need to preserve evidence eg clothing, bedding, photographs, implements etc. Social Workers should be alert to the existence of relevant evidence and advise the Police of this
- b) there is a risk of violence or breach of the peace
- c) there is a need for emergency Police powers to be invoked
- d) there is a need to arrest a suspect
- e) it is considered to be in the best interests of the child and family

If it is agreed that a Section 47 investigation should take place, a visit by a Social Worker or Police Officer may be sufficient to establish whether there is a need for further enquiries/investigation.

The decision to undertake a joint investigation does not require every contact with the child or family to be undertaken jointly. However, the rationale behind all such decisions about visits to the child and family should be fully discussed and recorded.

When Social Workers require the assistance of Police Officers at any time, purely for protection or prevention of a breach of the peace, they should contact the Police at the relevant district and make arrangements for appropriate support.

The initial visit should involve the child being seen and spoken to alone, where he/she is of a suitable age or ability, in order to

establish whether there is reasonable cause to suspect that the child has suffered significant harm and therefore whether an offence has been committed. If it is intended to interview the child formally, this may only need to be very brief if the child has already given a clear account to another reliable adult.

If the initial visit leads to an assessment that the child is at immediate risk of significant harm, action should be taken to secure their safety in accordance with the Child Protection Procedures. If it is established that concerns regarding significant harm are unfounded, consideration should still be given to a Child in Need assessment being undertaken.

An assessment should be made as to whether or not the child should be interviewed on video, using criteria outlined in Section 6 below of this Protocol, and in the 'Achieving Best Evidence' guidance.

The visit should contribute to the initial and core assessments of the child and family circumstances being co-ordinated by Children's Social Care, in accordance with the 'Framework for the Assessment of Children in Need and their Families'²⁴.

Assessments should pay particular attention to any needs the child may have regarding any disability or cultural issues, which would need to be taken into account were the child interviewed on video, and application made for additional Special Measures (see Section 6 of this Protocol).

Those undertaking initial visits should have the level of skill and experience to assess the situation, both from the civil and criminal perspectives. They should speak to the child in such a way that is not likely to detract from any subsequent witness statement, in line with guidance on questioning contained in 'Achieving Best Evidence'. **It is important at this stage that the child should not be subject to a full interview.**

All relevant information given by the child and family should be accurately recorded. The worker should note questions and answers, and time and date of the visit including times of arrival and departure. The record of the conversation should be made either contemporaneously, or **within 24 hours**. This information may be evidential and will be disclosable to the Crown Prosecution Service.

The wishes and feelings of the child and the (or his/her) family should be assessed and all concerned given as much information as agreed by the agencies during the course of the investigation. Please refer to

²⁴ Department of Health et al 2000

Section 6.14.4 of these procedures for circumstances in which parents will not be consulted.

Information sought at this stage should be proportionate to the need to inform further planning of the investigation and whether a video interview should be undertaken. **The child should not be subjected to detailed questioning, as this is not only stressful for the child, but may impair the quality of any subsequent evidential interview.**

5.3 Medical Assessment

Medical examination should be considered by Children's Social Care and the Police, after discussion with the local Paediatrician on-call according to the local service.

Decisions need to be made on:

- a) the need for a medical examination
- b) its purpose and therefore who should conduct it, eg Paediatrician and/or forensic medical examiner ('Guidance on Paediatric Forensic Examination in relation to Possible Child Sexual Abuse')²⁵
- c) timing, taking into account any need for urgent forensic examination to find evidence of recent injury or to secure other forensic evidence. Please see Section 6.18 of these procedures

The purpose of any medical examination is to:

- a) establish the need for and provide any medical treatment required
- b) provide a medical assessment of possible causes of injuries, illness or suspected abuse
- c) provide a record of any injuries, illness or evidence of abuse together with a medical assessment of whether these are consistent with any account of their cause
- d) establish the need for, and arrange, any further investigation
- e) consider the need to obtain forensic samples
- f) assess and record levels of development, functioning and general condition of the child
- g) give an opinion on whether the findings are consistent with any history
- h) assess the need for treatment, counselling or monitoring
- i) provide reassurance to the child and parent, if they are concerned that abuse may have physically damaged the child

²⁵ Royal College of Paediatrics and Child Health and Association of Police Surgeons, April 2002

- j) enable the Paediatrician to take a proper role in Child Protection Conferences
- k) provide paediatric reports and opinions which should be made available as appropriate to those conducting Child Protection enquires, including the Police, to any subsequent Child Protection Conference and to any Court hearing. A brief interim report should be provided to inform the Police investigation, outlining the findings and provisional medical opinion as to the possible cause of the findings. Should the Court request a report, this should provide a fuller and more considered opinion.

Depending on the nature of the case the medical examination may precede or follow the Police investigative interview. To minimize the information the Doctor requires directly from the child, the Police and Social Worker and caregiver involved in the case should share as much information with the Doctor as possible prior to the consultation with the child.

5.3.1 Consent for Examination

Those conducting the investigation should always secure consent from the child if of an age to do so and usually from a parent or other with parental responsibility, for the child to be medically examined. However, a parent's refusal to allow medical examination **should not** be allowed to cause unnecessary delay. In such circumstances, consideration should be given to seeking urgent legal advice. The local authority may be able to obtain a Court Order to facilitate a medical examination in the rare circumstances where consent is refused.

5.3.2 Who should Conduct the Examination

The examination should be conducted by either a Paediatrician or a forensic medical examiner, or both. The decision as to the most appropriate professional, after discussion with the Paediatrician in a Strategy discussion/meeting, should be based on the age of the child, the need for collection of forensic evidence and the experience of the professional. It is usually appropriate for Paediatricians to examine younger children (pre-adolescent). If a forensic medical examiner conducts the examination, it will still be good practice for a Paediatrician to be involved, in order to assess the need for ongoing treatment or assessment.

It is important that consideration is given to the gender of the Doctor undertaking the medical examination, taking into account the child's wishes and feelings. Doctors undertaking such medical examinations should have the appropriate core

and case dependent skills outlined in the 'Guidance on Paediatric Forensic Examination in Relation to Possible Child Sexual Abuse'. Doctors should be familiar with the contents of this document.

5.3.3 The Examination

All medical examinations should be undertaken in as sensitive a way as possible, giving appropriate information to the child, and their parent/caregiver, as to the nature and purpose of such examinations. When examining children, and when taking the history, Doctors should take care to avoid asking leading questions or anticipating the investigative interview, if this has yet to take place. For further guidance see Section 6.18 of these procedures. They should, however, make contemporaneous notes of any spontaneous comments by the child concerning the origins and circumstances giving rise to the examination. Where there are no reasonable grounds to believe that the alleged abuse has involved penetration or injury, the examination should not be unnecessarily intrusive or intimate.

It is essential that all notes and records concerning medical examinations and decisions made in the course of investigations are preserved, as they may be required for disclosure as part of any subsequent criminal or Civil Court proceedings.

Reports of the findings of medical examinations should be made available, as soon as possible to those undertaking the enquiry, including the Police.

5.3.4 Further Health Assessment

The role of specialist staff, such as developmental assessment specialists and child and adolescent mental health workers, should also be considered. This will generally be for the purposes of assessment, eg mental health assessment or assessment of cognitive ability.

6 Interviewing Child Witnesses

6.1 Purpose of a Video Interview

Any video interview serves several purposes. These include:

- a) evidence gathering for use in criminal proceedings
- b) the examination in chief of the child witness

- c) using any relevant information gained to inform Child Protection enquiries and any subsequent actions to safeguard and promote the child's welfare,
- d) safeguarding other children
- e) using any relevant information to inform any subsequent civil or internal disciplinary proceedings

The potential value of the video interview in every one of these circumstances should not be overlooked.

6.2 Special Measures available to Vulnerable and Intimidated Witnesses

It is recognised that people who are the victims of, or witness to crimes may find the investigation process and any subsequent criminal proceedings stressful and intimidating. The 1999 Youth Justice and Criminal Evidence Act introduced a range of measures which can be used to facilitate the gathering and giving of evidence by vulnerable and intimidated witnesses. All these measures are subject to the discretion of the Court.

Special Measures available to vulnerable and intimidated witnesses include:

- **screens** may be made available to shield the witness from the defendant
- **the live link** enables the witness to give evidence during the trial from outside the Court via a televised link to the courtroom. The witness may be either accommodated within the Court building or in a suitable location outside the Court
- **evidence given in private:** exclusion from the Court of members of the public and the press (except for one named person to represent the press) will be considered in cases involving sexual offences or intimidation
- **removal of wigs and gowns** by judges and barristers
- **a video recorded interview** with the vulnerable witness before the trial may be admitted by the Court, as the witness's evidence in chief
- **video recorded cross-examinations** should also be considered admissible if the witness has already given their evidence in chief on video prior to the court case *
- **examination of the witness through an intermediary**, who may be appointed by the Court to assist the witness to give their evidence in Court. This measure is available only to witnesses who are eligible for Special Measures on grounds of age or incapacity *
- **aids to communication** will be permitted to enable the witness to give best evidence whether through a communicator or interpreter, or through a communication aid or technique

- **mandatory protection of witness from cross-examination by the accused in person.** An exception has been created which prohibits the unrepresented defendant from cross-examining vulnerable child and adult victims in certain classes of cases involving sexual offences
- **discretionary protection of witness from cross-examination by the accused in person.** In other types of offence, the Court has discretion to prohibit an unrepresented defendant from cross-examining the victim in person
- **restrictions on evidence and questions about complainant's sexual behaviour.** The Act restricts the circumstances in which the defence can bring evidence about the sexual behaviour of a complainant in cases of rape and other sexual offences.

* Yet to be introduced

6.3 Criteria for Video Recording an Interview

Section 21 of the 1999 Youth Justice and Criminal Evidence Act creates three categories of child witness:

- a) children giving evidence in sexual offence cases
- b) children giving evidence in cases involving an offence of violence, abduction or neglect
- c) children giving evidence in all other cases

It is proposed that a video recorded interview should take place in all category 1) and 2) child witness cases, unless the child objects, and/or there are insurmountable difficulties. This could include the child having been involved in abuse where video recording or photography has been used.

In all other cases the decision whether or not to video record an interview should take into account such issues as the needs and circumstances of the child; whether the measure is likely to maximise the quality of the evidence etc.

There are no 'hard and fast' rules or unequivocal criteria that apply to the video recording of an interview. Among the considerations to be taken into account are:

- a) the individual child's circumstances, current or previous contact with public services, previous concerns around parenting, neglect or abuse, and history of the current allegation
- b) the purpose and likely value of a video recorded interview on this occasion
- c) competency, compellability and availability of the child for cross examination

- d) the child's ability and willingness to talk in a formal interview setting
- e) preparation of the child before interview.

The decision to undertake a video interview should be taken **jointly** by Police and Children's Social Care. Social Workers should be encouraged to enter the discussion as equal partners. Should there be any disagreement, this should be taken up at a management level as outlined in Section 2 of this Protocol.

Investigating Police Officers may wish to consult with the Crown Prosecution Service for advice. When deciding whether a child witness needs special measures, the 'primary rule' directs a Court to start from the assumption that a child would normally benefit from the admission of a video recording as his or her evidence in chief. Courts do not have to first decide that these measures will improve the quality of the child's evidence, as that requirement is treated as being satisfied.

6.4 Planning the Interview

Thorough planning is essential to a successful investigation and interview. Even if concerns about the child's safety necessitate an early interview, an appropriate planning session is required which identifies key issues and objectives. Time invested in considering the key issues early in the criminal investigation will impact on the quality of the interview. All issues and key questions should be considered in advance, as there will not be an opportunity to revisit them once the interview(s) have been completed.

6.4.1 Those involved in Planning the Interview

As a minimum, the planning team should involve representatives from both Police and Children's Social Care. It may also be important to involve health care, educational or other professionals/agencies who either know the child or can offer specialist knowledge, advice or skills.

Where children have had past or current involvement with Children's Social Care, useful information may be available from previous CAF, initial or core assessments. Any existing assessment should be carefully considered before the interview, and used to inform planning.

The views of children and young people should be actively sought and considered in the planning stage. Research has shown that frequently their views are either ignored or marginalized.

The circumstances of each individual investigation should inform the timing, purpose and content of any medical examination, Paediatric evaluation, in relation to the video interview. For example, a medical examination should not be arranged automatically in every case: it may depend on what a child alleges during the video interview. It must be remembered that children often do not disclose the full extent of abuse at the video interview and therefore there should be a low threshold for requesting a medical examination.

6.4.2 Support for a Child during Interview

It is important to guard against undue influence on the child by another adult. However it may be helpful to the child, and to the process of securing an account, if someone is present to offer support, especially if the child is very young or upset.

Parent/caregiver(s) should not be automatically excluded from this role, but their involvement should depend on the circumstances and nature of the case, together with any allegations made by the child.

The supporter should be advised not to participate in the interview itself, whether by instructing or correcting the child, answering the interviewer's questions, head nodding or facial expressions. Interview supporters should never offer the child inducements, such as a toy or trip, in return for general co-operation or answering particular questions.

6.4.3 Other Issues Relating to Supporters, Interpreters and Intermediaries

The roles of supporter, interpreter and intermediary are distinct and separate and should not be performed by the same person.

The supporter, interpreter or intermediary should not be anyone who is likely to be called upon as a witness in any prosecution. This includes the person to whom the child has made the initial disclosure, who will be considered as a witness for the prosecution.

6.4.4 Factors to Consider at the Planning Stage

Consideration needs to be given to a number of factors pertaining to the child, their family and background in the planning of the investigation and interview.

Interviewers must plan appropriately for each interview, differentiating from the strategic planning of the overall investigation.

All relevant factors and decisions should be clearly recorded, either by Police or Social Workers. It should be noted that any records are disclosable as evidence.

Much of the necessary information may exist as a result of the inter-agency assessment led by Children's Social Care using the 'Working Together to Safeguard Children' and 'Framework for the Assessment of Children in Need and their Families' guidelines.

The following is a checklist of factors to be considered at the planning stage:

- a) child's age, gender and sexuality
- b) child's race, culture, ethnicity, first language and religion
- c) any physical and/or learning impairments
- d) any specialist health and/or mental ill health needs
- e) child's cognitive abilities
- f) child's linguistic abilities
- g) child's current emotional state and range of behaviours
- h) child's family members/caregivers and nature of relationships including foster or residential caregivers
- i) child's overall sexual education, knowledge and experience
- j) types of discipline used with the child
- k) bathing, toileting and bedtime routines
- l) sleeping arrangements
- m) any significant stress(es) recently experienced by the child and/ or family

Information on the above issues will inform decisions about the structure, style, duration, pace and timing of the interview.

In cases where the child is a suspected or known victim of previous abuse, the investigating team should address issues such as the nature and duration of the abuse, the parental reaction to disclosure/allegation and any previous intervention.

6.4.5 Assessment Prior to the Interview

Interviewers may decide that the needs of the child and the needs of criminal justice are best served by an assessment of the child prior to the interview taking place. This assessment should be focused on the child's understanding of the process and their ability to participate in the interview to the required standard.

The 'Framework for the Assessment of Children in Need and their Families' may be helpful in compiling the assessment. A record of any such assessment(s) must be kept and referred to in the body of the witness statement that records the interview. This record should be disclosed to the Crown Prosecution Service under the requirements of the Criminal Procedure and Investigations Act 1996.

It is the responsibility of the officer in the case to advise the Crown Prosecution Service of any sensitive information that should not be disclosed.

Interviewers should have clear objectives for assessment(s) prior to interview and should apply the guidance contained in 'Achieving Best Evidence' when talking to children during such an assessment. Interviewers should avoid discussing substantive issues (in detail) and must not lead the child on substantive matters (see Section 5.2 of this Protocol in relation to the initial visit).

The needs of the child may require that the assessment takes place over a number of sessions. No inducements should be offered for complying with the investigative process.

For some children, assessment(s) will indicate that their needs are not best met by proceeding with a full formal interview.

6.4.6 Preparing the Child and Family

Steps should be taken to prepare the child for the interview itself. This should include explaining to the child, in a manner appropriate to his/her age and understanding:

- a) what the interview is
- b) who will be present
- c) when/where it will happen
- d) approximately how long it will last

This preparation should be undertaken by a member of the investigating team, who has the level of skill and experience to be able to speak to the child in such a way that is not likely to detract from any subsequent witness statement.

Consideration should be given to providing non-abusing/current caregiver(s) with information at this stage, as appropriate. For example they should:

- a) be discouraged from initiating a discussion about the details of their allegation with the child. However,

- caregivers should be able to reassure the child who wishes to talk or express anxieties
- b) also be discouraged from discussing details of the investigation with any other individuals
 - c) be instructed to carefully document any responses from the child regarding the allegation or investigation
 - d) be advised that the child should never be offered inducements for complying with the investigative process.

6.4.7 Planning for Immediately After the Interview

Although interviewers cannot predict the course of an interview, planning should cover the range of possible outcomes and implications for the child and family, taking into account information gained from the earlier assessment. A professional should be identified to whom the child and/or parent/caregiver can subsequently direct any queries. This may include the conduct of the Police investigation, any criminal proceedings and likely actions by Children's Social Care.

6.4.8 Misleading Statements

Children can, on occasion, provide misleading accounts of events, but these are often the result of misunderstandings or errors in recall, rather than deliberate fabrication. Children should never be challenged directly over an inconsistency; rather such differences should be presented as the interviewer needing to be clear about what the child has said.

It is important that all such questions should be reserved for the end of the formal questioning in order not to disrupt the child's narrative.

6.4.9 Further Interviews

One of the key aims of an early video recording within the investigation is to reduce the number of occasions children are asked to repeat their account. Good pre-interview planning will often ensure that all the salient points are covered within a single interview. However, even with an experienced interviewer and good planning, an additional interview may sometimes be necessary.

Supplementary interviews for evidential purposes should only be conducted by members of the joint investigation team when they are fully satisfied (after consultation with the Crown Prosecution Service) that such an interview is required. The

reasons for the decision should be fully recorded in writing. More than one supplementary interview is unlikely to be appropriate. Exceptions to this include when interviewing very young, psychologically disturbed children or children with a learning disability or when a case is exceptionally complex or involves multiple allegations. Once again, the reasons for such decisions should be fully recorded in writing and, if necessary, the Crown Prosecution Service should be consulted.

6.4.10 Interviewing Children with Disabilities

There is rarely any reason in principle why such children should not take part in a video interview, provided the interview is tailored to the particular needs and circumstances of the child.

6.4.11 Interviewing Very Young Children

There are occasions where very young children are video interviewed. The planning phase and the interview itself should be undertaken with great care.

6.4.12 The Child Who Becomes Suspect

Occasionally a child who is being interviewed comes under suspicion of involvement in a criminal offence. Although this is not a frequent occurrence, it is preferable to anticipate and plan for such an eventuality, while recognising that any decisions on a course of action are likely to depend upon the content of the video interview.

6.4.13 De-briefing

Following the completion of the interview, the joint investigation team should review the information gathered and consider the most appropriate steps to ensure the continuing safety and welfare of the child. Such considerations should include:

- legal action
- arrest of the accused
- bail conditions taking into consideration potential further risk to the child
- further work indicated

7 Witness Support

Support during the criminal proceedings is provided by the Crown Court Witness Service. Referral to this service is usually made by the Crown Prosecution Service after the Plea and Directions Hearing. Professionals

supporting the child should ensure they are aware of the Court timetable in relation to a particular case.

Children's Social Care should carry out pre-Court planning to ensure there is a support structure in place following the completion of any criminal proceedings.

8 Provision of Therapy Prior to a Criminal Trial

There is concern that some witnesses are denied therapy pending the outcome of a criminal trial for fear that their evidence could be considered tainted and the prosecution lost. This may conflict with ensuring that a witness is able to have immediate and effective treatment to assist recovery. **Witnesses should not be denied access to any therapeutic help prior to any criminal trial, particularly if they have a mental illness.**

Pre-trial therapy for child witnesses is the subject of guidance contained in 'Provision of Therapy to Child Witnesses Prior to a Criminal Trial: Practice Guidance'²⁶

Pre-trial therapy should be kept separate from preparation and support. The guidance emphasises that the best interests of the child are paramount when deciding whether, and in what form, therapeutic help is given.

Whether the child should receive therapy before the criminal trial is not only a decision for the Police and/or the Crown Prosecution Service, but should involve relevant professionals from the agencies responsible for the welfare of the child. This may include the Paediatrician involved with the child. This decision should also be made in consultation with the caregivers of the child, and the child if s/he is of sufficient age and understanding. However, it is essential that the Police and Crown Prosecution Service be informed of all arrangements and details of any therapeutic intervention.

While some forms of therapy may undermine the evidence given by the witness, this will not automatically be the case. The Crown Prosecution Service will offer advice on the likely impact on the evidence of any therapeutic intervention.

Records of therapy and other contacts with the witness must be maintained so that they can be disclosed to the Court, if required. At the outset of therapy the child and caregivers should be informed of the circumstances when information obtained during therapy might be disclosed.

If there is a demonstrable need for therapeutic intervention that is likely to prejudice the criminal proceedings, consideration should be given to abandon them in the interests of the child's wellbeing.

²⁶ Home Office, CPS and Department of Health, 2001

9 Post-Court: Dealing with the Outcome

Experience has shown that the child, their parents/caregivers and other witnesses, appreciate support given after the close of proceedings, a time when they may otherwise feel isolated and may have difficulty in coming to terms with the Court verdict. Whether or not a witness gave evidence, they may still need support and should be informed of the outcome as quickly as possible and offered the opportunity for debriefing.

Any discussion after the hearing also provides a useful opportunity for those involved to identify and make arrangements for continuing support, counselling and treatment in the light of the child's needs.