FORENSIC INTERVIEWS OF CHILDREN

CORE STANDARD

Forensic Interviews of children (i.e., an individual under 18 years of age) are conducted in a manner that is legally sound, of a neutral, fact finding nature, and are coordinated to avoid duplicative interviewing. This standard is applicable to Associate CAC’s only. Accredited CAC’s abide by the National Children’s Alliance (NCA) Forensic Interview Standard.

PROGRAM REQUIREMENTS

1. Forensic interviews are provided by MDT (Multi-disciplinary Team)/CAC (Child Advocacy Center) staff with specialized training in conducting forensic interviews.

CAC must demonstrate that all forensic interviewer(s) have successfully completed training that includes a minimum of 32 hours instruction and practice, and at a minimum includes the following elements:
   a. Evidence supported interview protocol,
   b. Pre- and post- testing reflecting understanding of the principles of legally sound interviewing,
   c. Content includes at a minimum: Child development, question design, implementation of the protocol, dynamics of abuse, disclosure process, cultural competency, suggestibility,
   d. Practice component with a standardized review process,
   e. Required reading of current articles specific to the practice of forensic interviewing.

Curriculum must be included on NCA’s approved list of nationally or state recognized forensic interview trainings or submitted with the accreditation application.

2. Individuals with forensic interviewing responsibilities must demonstrate participation in ongoing education in the field of child maltreatment and/or forensic interviewing consisting of a minimum of 10 hours of CEU/CME credits every year.

3. The CAC/MDT’s protocols must reflect the following items:
   a. Case acceptance criteria,
   b. Criteria for choosing an appropriately trained interviewer (for a specific case),
   c. Personnel expected to attend/observe the interview,
   d. Preparation/information sharing & communication between the MDT and the forensic interviewer,
   e. Use of interview aids,
   f. Use of interpreters,
   g. Recording and/or documentation of the interview,
   h. Interview methodology (i.e., state or nationally recognized forensic interview training model(s)),
   i. Introduction of evidence in the forensic interviewing process,
j. Sharing of information among MDT members,
k. A mechanism for collaborative case coordination,
l. Determining criteria and process by which a child has a multi-session or subsequent interview, which can include extended forensic interviews.

4. MDT members with investigative responsibilities on a case must observe the forensic interview(s) to ensure necessary preparation, information sharing, and MDT/interviewer coordination throughout the interview and post-interview process. The same person may perform the duties of both Forensic Interviewer and Victim Advocate at a CAC, but never both roles with the same child/family. However, efforts shall be made through collaboration between CACs and other local Victim Services Programs to avoid situations where it is necessary for the same person to perform in both roles, even if it is for a different child/family.

5. Individuals who conduct forensic interviews at the CAC must participate in a structured peer review process for forensic interviewers a minimum of 2 times per year, as a matter of quality assurance. Peer review serves to reinforce the methodologies utilized as well as provide support and problem-solving regarding shared challenges. Peer review includes participants and facilitators who are trained to conduct child forensic interviews. Structured peer review includes:

   a. Ongoing opportunities to network with, and share learning and challenges with peers,
   b. Review and performance feedback of actual interviews in a professional and confidential setting,
   c. Discussion of current relevant research articles and materials,
   d. Training opportunities specific to forensic interviewing of children and the CAC-specific methodologies.

6. The CAC/MDT coordinates information gathering including history taking, assessments and forensic interview(s) to avoid duplication.

**STRIVING FOR EXCELLENCE**

- Establish a system to provide initial training on forensic interviewing for anyone conducting a forensic interview at the CAC. Many CACs use a combination of MDT members and CAC staff to conduct forensic interviews. While many of the members of the MDT may have received general interview training, forensic interviewing of alleged victims of child abuse, and in the context of an MDT response, is considered specialized and thus requires additional specialized training prior to conducting forensic interviews.

- Provide initial and ongoing opportunities for professionals who conduct forensic interviews to receive specialized training. It is vitally important that forensic interviewers remain current on developments in the fields relevant to their delivery of services to children and families and continue to develop their expertise. All advanced FI training curriculum, including Extended Forensic Interviews, must be based on curriculum from NCA’s approved list of national or state recognized forensic interview trainings.

- Describe the general forensic interview process in the agency’s written guidelines or agreements. These guidelines help to ensure consistency and quality of interviews and
subsequent MDT discussions and decision-making. Based upon the case acceptance criteria of the CAC, FI's may include child victims of sexual abuse, child victims of physical abuse, child witnesses to violence, adult victims with special needs, or other special populations.

- Ensure MDT members, as defined by the needs of the case, are present for the forensic interview. This practice provides MDT member access to the information necessary to fulfill their respective professional roles. MDT members present include local, state, federal or tribal child protective services, law enforcement and prosecution; others may vary based on case assignments and the unique needs of the case.

- Participation in peer review is vitally important to assure that forensic interviewers remain current and further develop and strengthen their skills based on new research and developments in the field that impact the quality of their interviews. Peer review is a complement, not a substitute, for supervision, case review and case planning. Peer review opportunities are also available from the PA Chapter of CACs and MDTs.

- All members of the MDT need information to complete their respective assessments and evaluations. Whether it is the initial information gathered prior to the forensic interview, the history taken by the medical provider prior to the medical evaluation, or the intake by the mental health or victim services provider, every effort should be made to avoid duplication of information gathering from the child and family members and ensure information sharing among MDT members.

The Forensic Interview Standard as a whole reflects the NCA Forensic Interview Standard for CAC accreditation and the policies of the PA Chapter of CACs and MDTs. For more information contact:

PA Chapter of CACs and MDTs: www.penncac.org

National Children’s Alliance: www.nationalchildrensalliance.org