

## **Interviewing Child Victims of Maltreatment Including Physical and Sexual Abuse**

The Children's Law Center designed this information packet for law enforcement officers and child abuse investigators involved in the investigation of child maltreatment including physical and sexual abuse. This information packet provides general information and resources on interviewing children who are suspected victims of physical or sexual abuse. This information packet is not designed to be a comprehensive guide for investigating child maltreatment as such guides are readily available (and listed in the references section of this information packet). Because this information packet is designed to provide information and resources for interviewing children, it does not address investigation of fatal child maltreatment. This information packet was prepared by the Children's Law Center in collaboration with the Children's Justice Act Task Force.

### **Reports of Child Maltreatment**

Reports of child maltreatment may be made to the Department of Social Services (DSS) or to law enforcement. Reports of child maltreatment may be made by designated professionals who are required to report child abuse and neglect by South Carolina's mandated reporter law. A detailed discussion of the mandated reporter law is beyond the scope of this packet but the Children's Law Center has an information packet and online training for mandated reporters available on the center's web site, <http://childlaw.sc.edu>. Reports of child maltreatment may also be made by family members, friends or anyone else who may observe or be aware of the maltreatment. Finally, reports may be generated through investigations which may not have been initiated as investigations of child maltreatment. For example, a law enforcement investigation into an alleged methamphetamine laboratory located in a home may develop information indicating the need for investigation into child maltreatment.

Once a report of child maltreatment is made to either DSS or law enforcement based on the mandated reported law, South Carolina law requires coordination between the responsible DSS office and the responsible law enforcement agency. When a report of child maltreatment required by the mandated reporter law is made to a law enforcement agency, the law enforcement agency must notify the appropriate county DSS office of the law enforcement agency's response at the earliest possible time.

South Carolina law requires DSS to cooperate with law enforcement agencies within the areas served by DSS and requires DSS to establish procedures necessary to facilitate referral of child protection cases to DSS.

Should DSS have a case of child maltreatment which appears to indicate a violation of criminal law, DSS must notify the appropriate law enforcement agency of the facts within 24 hours of the DSS determination that the case appears to indicate a violation of criminal law. The law enforcement agency must file an incident report at the time DSS notifies the law enforcement agency.

Should DSS have a report of alleged sexual abuse, DSS must notify the appropriate law enforcement agency within 24 hours of receiving the report of alleged sexual abuse to determine if a joint investigation is necessary. The law enforcement agency must file an incident report at the time it is notified of the alleged sexual abuse.

Law enforcement agencies must provide DSS copies of the incident reports mentioned above. When the law enforcement officer responsible for a case knows DSS is also involved with the family or child, the law enforcement officer must make reasonable efforts to keep DSS informed of significant developments in the case, including but not limited to, disposition in summary court, referral of a juvenile to the Department of Juvenile Justice, arrest, detention, trial date and disposition of charges.

DSS must include in its records copies of law enforcement incident reports and must record disposition of charges.

A law enforcement officer who receives a report of child maltreatment involving a violation of criminal law including but not limited to alleged physical or sexual abuse may decide to take a child into emergency protective custody. While a detailed discussion of emergency protective custody procedures is beyond the scope of this information paper, the Children's Law Center has an information packet on emergency protective custody available on the center's web site, <http://childlaw.sc.edu>.

### **Requirement for Coordinated Investigations of Child Maltreatment**

As explained above, reports of child maltreatment may be reported to DSS, law enforcement or both. As noted above, South Carolina law requires coordinated investigation of reports of child maltreatment. In addition, South Carolina Code Ann. § 63-7-920( C )(2008) provides:

(C) The department or law enforcement, or both, may interview the child alleged to have been abused or neglected and any other child in the household during the investigation. The interviews may be conducted on school premises, at childcare facilities, at the child's home or at other suitable locations and in the discretion of the department or law enforcement, or both, may be conducted outside the presence of the parents. To the extent reasonably possible, the needs and interests of the child must be accommodated in making arrangements for interviews, including time, place, method of obtaining the child's presence, and conduct of the interview. The department or law enforcement, or both, shall provide notification of the interview to the parents as soon as reasonably possible during the investigation if notice will not jeopardize the safety of the child or the course of the investigation. **All state, law enforcement, and community agencies providing child welfare intervention into a child's life should coordinate their services to minimize the number of interviews of the child to reduce potential emotional trauma to the child.** (emphasis added)

By Order dated April 29, 2009, the South Carolina Supreme Court approved a model coordination protocol for use in child abuse and neglect cases. The model protocol

recognizes that a report of child maltreatment may result in a family court child protection case and in a criminal case. The protocol seeks to coordinate the efforts of DSS investigators and law enforcement investigators and of the DSS attorney and the solicitor. The protocol also includes procedures for informing courts of other related actions and potential joint settlement offers. Adoption of the model protocol by South Carolina's judicial circuits will assist the adopting circuits in meeting the coordination mandates of South Carolina law.

The order and protocol may be viewed at the South Carolina judicial web site:  
<http://www.judicial.state.sc.us/courtOrders/displayOrder.cfm?orderNo=2009-04-29-06>.

### **Interviewing Children Who are Victims of Child Maltreatment**

It is widely recognized that child victims should not be subjected to numerous investigative interviews during the course of a child maltreatment investigation. As stated in the American Prosecution Research Institute's *Investigation and Prosecution of Child Abuse* manual: "The number of investigative interviews should be limited to one whenever possible. Multiple sessions are stressful for the child, are often unnecessary, and can lead to seemingly inconsistent statements."<sup>1</sup> South Carolina statutory law is consistent with that recognition in requiring coordination of services to reduce the number of interviews of a maltreated child.

In order to limit the number of child interviews and to allow DSS and law enforcement investigators to obtain necessary information, investigative effort might involve two phases. The first phase is an initial, basic fact-finding interview. The second phase is a forensic interview should a forensic interview be deemed necessary. The determination of whether a forensic interview is necessary is best made by the multidisciplinary team conducting the investigation.

### **Minimum Facts Interview**

An initial, basic fact-finding interview may be conducted by a professional required by the mandated reporter law to report child maltreatment or may be conducted by a first responder. First responders may be DSS investigators or law enforcement officers. An initial, basic fact-finding interview should be a minimum facts interview. The purposes of a minimum facts interview are to allow the mandated reporter or the first responder to provide for the child's safety and to obtain the very basic facts concerning the child's maltreatment. A minimum facts interview may include the following questions:

1. What happened?
2. Where did it happen?
3. When did it happen?
4. Who is the alleged perpetrator?
5. Are there other perpetrators?

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<sup>1</sup> American Prosecutors Research Institute, *Investigation and Prosecution of Child Abuse* 39 (3d ed. Sage Publications 2004).

6. Who are the witnesses?
7. Are there other victims?

Detailed follow-up questions, especially facts related to the details of the abuse, should not be asked during the minimum facts interview. There are cases when a child may volunteer detailed information to a trained DSS investigator or to a trained law enforcement officer. Those investigators and law enforcement officers may exercise professional judgment in seeking additional information from a child.

Should the child's responses to a mandated reporter lead the mandated reporter to believe that further questioning is necessary, the mandated reporter should communicate that belief to the DSS investigator or to the law enforcement officer who has responded to the report made by the mandated reporter. The investigator or officer may then take the steps necessary to request a forensic interview.

Should the child's response during the minimum facts interview or additional investigation conducted by the DSS investigator or law enforcement officer indicate to the investigator or to the officer that a forensic interview is necessary, the DSS investigator or law enforcement officer should seek to have a forensic interview conducted by a trained forensic interviewer. Requesting a forensic interview is discussed below.

In a case of physical abuse or a case of sexual abuse, an investigator conducting a minimum facts interview may determine that immediate medical attention is necessary. Upon making that determination, the investigator should take action to ensure that the child receives the necessary medical attention. A person conducting a minimum facts interview should also act so that the child's needs for safety are met. Reporting safety concerns to a DSS investigator or to a law enforcement officer may allow the law enforcement officer to take the child into emergency protective custody if necessary for the child's safety.

### **Multidisciplinary Team (MDT)**

In "The Benefits of Working as a Multidisciplinary Team" section of the Investigation and Prosecution of Child Abuse manual, the authors note that developing a shared investigative approach has a number of benefits including:

1. reducing the number of interviews a child undergoes;
2. minimizing the number of people involved in a case;
3. enhancing the quality of evidence discovered in the investigation;
4. making more efficient use of limited resources;
5. educating each agency concerning the needs and interests of the other agencies involved; and
6. minimizing the conflicts among agencies.<sup>2</sup>

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<sup>2</sup> Id. at xxix.

An investigative MDT such as one established for child maltreatment investigations should consist of a member from each of the following agencies: circuit solicitor's office; law enforcement agencies operating in the circuit; county DSS; and local children's advocacy center. Other agencies may well participate in MDT activities to support the MDT's investigative efforts. Examples of other agencies include mental health agencies, hospitals, and coroners.

An MDT works best when it operates consistent with a written protocol. A written protocol should contain the following elements as a minimum:

1. Signatures of agency representatives for any agency working under the protocol.
2. The purpose or mission of the MDT.
3. A list of agencies working under the protocol.
4. Specific protocol provisions which address:
  - a. Notification procedures among the agencies.
  - b. Designation of what office within an agency will handle the investigation of child maltreatment.
  - c. Procedures for minimum facts interview.
  - d. Procedures for forensic interviews.
  - e. Qualifications for forensic interviewers.
  - f. Forensic interview format and protocol.
  - g. Location of forensic interview.
  - h. Provisions for medical response.
  - i. Provisions for removal of child from home and emergency protective custody procedures.
  - j. Procedures for arrest and removal of perpetrator.
  - k. Procedures for interviewing other witnesses.
  - l. Procedures for evidence collection and maintenance.
  - m. Procedures for involvement of solicitor and county DSS attorney.
  - n. Procedures for victim advocate involvement.
  - o. Procedures for MDT meetings and case reviews.
  - p. Procedures for mental health and follow-up medical care as appropriate.
  - q. Procedures for periodic review and update of protocol.

Agencies within counties and judicial circuits may differ in the approaches they take in drafting and implementing a protocol. A protocol should be tailored to the specific needs of the MDT. A sample interagency MDT is attached as an appendix to this information packet and demonstrates one way to draft and implement an MDT protocol.

South Carolina law provides for the establishment of MDT's on a statewide basis. The children's advocacy centers (CACs) must coordinate a multidisciplinary response to child maltreatment, must assist the investigation and assessment of child abuse, and must provide the following:

1. A neutral, child-friendly facility for forensic interviews.

2. Coordination of services for children reported to have been abused.
3. Services, including but not limited to, forensic interviews, forensic medical exams, and case reviews by MDT's to determine whether maltreatment has occurred.
4. Therapeutic counseling services, support services for the child and nonoffending family members, court advocacy, and consultation and training for professionals who work in the area of child maltreatment to reduce the negative impact of the abuse on the child.

South Carolina's network of children's advocacy centers has member centers which perform all the statutory functions for coordinated investigation of child maltreatment and are the foundations for the multidisciplinary investigation of child maltreatment in many circuits and jurisdictions.

### **Child Forensic Interview**

A child forensic interview is a fact-finding interview in which a child who is alleged to be a victim of maltreatment is questioned in a developmentally appropriate, non-suggestive and forensically defensible manner. In the context of child maltreatment, the purpose of a forensic interview is to obtain information for investigation and prosecution.

It is important to understand the difference between a forensic interview which seeks to obtain information and a therapeutic interview in which the therapist seeks to diagnose and plan interventions. Nancy E. Walker notes that a therapist seeks to help the interviewee and must acknowledge "that there are multiple depictions in their clients' reality that need to be weighed before deciding which approach will be most therapeutic."<sup>3</sup>

As set forth above, a mandated reporter, DSS investigator or law enforcement officer may conduct a minimum facts interview of a child and may conclude that a forensic interview of a child is appropriate.

### **Requesting a Child Forensic Interview**

In most cases, the DSS investigator or law enforcement officer will be investigating as a member of a multidisciplinary team (MDT), and the information the investigator or officer has will be shared with the team which can then decide whether to request a forensic interview. As explained above, a written MDT protocol will set forth the coordination procedures for the MDT. When a DSS investigator or a law enforcement officer is not working under a written MDT protocol, the investigator or officer may request that a forensic interview be conducted by a children's advocacy center (CAC) which serves the jurisdiction. Should the DSS investigator or law enforcement officer not know which CAC serves their jurisdiction, they may seek information from South Carolina's network of CACs. The network's web site is <http://www.cac-sc.org>.

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<sup>3</sup> Nancy E. Walker, *Forensic Interviews of Children: The Components of Scientific Validity and Legal Admissibility*, 65 Law and Contemp. Probs. 149, 152 (Winter 2002).

DSS investigators and law enforcement officers must understand that a CAC requested to conduct a forensic interview may have procedures for requesting a forensic interview. Those procedures may be set forth in a written MDT protocol and investigators and officers working on the MDT will be aware of those procedures. When there is not a written MDT protocol, investigators and officers must be informed of a CAC's procedures for requesting a forensic interview and must comply with those procedures in making a request for a forensic interview.

Prior to a forensic interview, a CAC will routinely request information and may identify documents that must be provided before the forensic interview is conducted. Necessary information and documents may include but are not limited to: incident reports; names, addresses and phone numbers of victims, witnesses, caretakers and alleged perpetrators; and communication challenges for the child to be interviewed including inability to speak English or conditions which interfere with the ability to understand and respond to verbal questions (examples include a child victim who is hearing-impaired or who is developmentally delayed). Additional information a CAC may need before interviewing a child is information on medications a child may be taking. For example, a child may have a diagnosis of attention deficit disorder for which the child is taking medication.

### **Characteristics of a Forensic Interview**

Forensic interviews may be conducted under a number of recognized procedures and practices. DSS investigators and law enforcement officers should be generally familiar with forensic interview procedures and practices. The procedures and practices are usually set forth in a protocol which guides the conduct of a forensic interview. There are a number of recognized protocols for conducting forensic interviews. In South Carolina, for example, forensic interviewers may be trained by the ChildFirst South Carolina forensic interviewer training which uses the RATAAC® protocol developed by the CornerHouse children's advocacy center in Minnesota. ChildFirst South Carolina training is conducted in coordination with the National Child Protection Training Center in Winona, Minnesota.

While forensic interview protocols differ and while particular procedures and practices differ, forensic interviews have commonly recognized characteristics including:

1. Forensic interviews are conducted using an interview protocol.
2. Interview protocols are based on research.
3. Forensic interviewers are formally trained in the use of the protocol and in specific subject matter related to interviewing children. Examples of subject matter include how children disclose abuse, memory and suggestibility in children, child development, age appropriate questioning, and use of interview aids such as anatomical dolls and anatomical diagrams.
4. Interviews are conducted in child-friendly surroundings. For example, CACs have interview rooms specially designed for conducting forensic interviews.
5. Interviews are conducted by a trained interviewer questioning the child with no one else present in the interview room. In an interview requiring an interpreter, an interpreter

may be present in the interview room. Parents and caretakers are not present in the interview room.

5. Interviews are video taped and recorded.
6. Interviews are conducted where they may be observed by other members of the MDT. As an example, the interview may be observed by MDT members located in another room and watching the interview by way of television or computer monitor.

The importance of observing the forensic interview as it is taking place is explained in *Working with Child Advocacy Centers*<sup>4</sup>:

By attending the forensic interview, you bring your knowledge of the case, the family, and the alleged crime scene with you to the interview. The forensic interviewer will not have this information. Additionally, you know the requirements for criminal charges or for child protective services involvement in the case. If clarification of what a child discloses during the interview is needed, you can ask for it during the interview which prevents someone having to reinterview the child or miss an important part of the case. The interview may reveal information that leads to additional, unexpected charges or areas of concern. Sometimes during the forensic interview a child reveals the existence of evidence. By being present at the forensic interview you will be able to respond immediately to avoid the loss of evidence that may be critical to the protection of a child or to holding an offender accountable.

In addition to general familiarity with forensic interview procedures and practices, DSS investigators and law enforcement officers and other members of an MDT may be trained in forensic interviewing. For example, ChildFirst South Carolina has trained assistant solicitors, DSS county attorneys, law enforcement officers, DSS child protection investigators, and CAC forensic interviewers who work on MDT's in their jurisdictions. The reason for training all professionals working on a MDT is to make sure MDT members know how to conduct a forensic interview and know the role of a forensic interview in an investigation of child maltreatment.

An MDT for a particular jurisdiction will have a recognized practice determining who conducts the forensic interview absent exigent circumstances. For most MDTs, the designated forensic interviewer will be the CAC forensic interviewer. In an exigent circumstance, another MDT member such as a DSS investigator or a law enforcement officer may conduct the forensic interview. One situation which should be avoided is the situation where a DSS investigator or a law enforcement officer conducts a forensic interview absent coordination with the MDT. Such situations may lead to lack of coordinated investigative effort, a need for an additional forensic interview(s), and creation of seemingly inconsistent statements of a child.

### **Corroboration of Forensic Interview**

A child's disclosures of maltreatment during a forensic interview are frequently the cornerstones to successful investigation and disposition of a case. There may be cases

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<sup>4</sup> Charlotte Ehney, *Working With Child Advocacy Centers*, 5 (Children's Law Center 2007).

when the child's disclosures are the only evidence in a case. More frequently, however, there is evidence which corroborates a child's statement. DSS investigators and law enforcement officers should always seek corroboration for a child's disclosures in a forensic interview.

DSS investigators and law enforcement officers should take the following actions in seeking to corroborate a child's disclosures in a forensic interview.

1. Carefully study the child's disclosure line by line and seek evidence which corroborates the details of the disclosure. If a child described the room in which the abuse occurred, get pictures or a video of the room to corroborate the child's description (room color, décor, carpeting, presence of telephone, television or stereo). If a child discloses that lubricant and/or wipes were used in the assault, get the lubricant and/or wipes. If a child discloses that the perpetrator drinks a particular brand of beer when drinking before assaults on the child, get the beer of that brand from the perpetrator's house. In seeking corroboration, don't ignore seemingly improbable details in a child's disclosure. A child may disclose that the perpetrator "had a devil on his pee pee". An investigator pursuing that detail may discover that the perpetrator has a tattoo of Satan on his penis.
2. Photograph physical injuries and crime scenes. With respect to physical injuries to a child's genitalia resulting from sexual assault, photographs should be taken by a medical professional as part of a complete forensic medical exam. Consider videotaping the crime scene from the perspective of the child and in the sequence described in the child's disclosure.
3. In cases of physical abuse and sexual abuse where a forensic medical exam is deemed appropriate, obtain a forensic medical examination of the child. CAC's usually know the medical doctors qualified to conduct forensic medical examinations of children and investigators and officers should contact the CAC serving the jurisdiction should the investigator or officer need a referral to a qualified medical doctor. DSS investigators and law enforcement officers must interview the examining doctor as the doctor may have received additional information about the maltreatment in taking the child's history or in talking to the child.
4. In searching a child's home or a perpetrator's home, look for letters, cards, and gifts which the child has made for or given to the perpetrator. As Victor Vieth notes, a prosecutor may use such evidence to show the child's love for the perpetrator and may argue that children do not lie to get those they love in trouble.<sup>5</sup>
5. In cases where a child discloses use of pornography during abuse, search the perpetrator's home for pornography, including pornography located in the perpetrator's

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<sup>5</sup> Victor I. Vieth, *Working as a Multidisciplinary Team to Obtain Corroborating Evidence in Cases of Child Abuse*, 9 (ChildFirst training manual, National Association to Prevent Sexual Abuse of Children 2008).

computer. Ask other witnesses if they have knowledge of the perpetrator's use of pornography.

5. Interview other witnesses. In cases of child maltreatment, it is particularly important to interview siblings of the abused child. In cases of sexual abuse, it is important to interview older siblings even if the older siblings are adults at the time of the investigation. Parents and caregivers may provide descriptions of a child's behavior which demonstrates knowledge of sexual activity not appropriate for the child's age or which is consistent with the behavior of an abused child. Interviewing other witnesses is particularly important when the witness has observed the child close in time to the abusive event. Such witnesses may remember the child's words which may be admissible in court as the excited utterance of a child.

7. Interrogate the suspected perpetrator. Where practicable, a law enforcement interrogator trained in interrogating suspects should interrogate the suspected perpetrator. Some law enforcement offices require such training before allowing an officer to interrogate a suspect. Some law enforcement offices select and train a few officers to conduct interrogations of suspects in child maltreatment cases and require that interrogations of such suspects be conducted by the specially trained officers.

The forensic interview corroboration chart set forth in the appendix provides a sample corroboration list to assist the corroboration efforts of DSS investigators and law enforcement officers investigating child maltreatment.

## **Resources**

The following resources provide detailed information and training resources on investigating child maltreatment.

American Prosecutors Research Institute, *Investigation and Prosecution of Child Abuse* (3d ed. Sage Publications 2004)

Office of Juvenile Justice and Delinquency Prevention portable guides to investigating child abuse. For list of guides go to <http://www.usdoj.gov/ojjdp> and click on publications

Office for Victims of Crime, *Victims with Disabilities: Collaborative, Multidisciplinary First Response*. This packet consists of a DVD and trainer's guide for first responders called to assist crime victims who have disabilities. Additional information concerning the packet may be found at <http://www.ovc.gov>.

National Child Protection Training Center, *Center Piece* newsletters available at <http://www.ncptc.org> and click on publications

Children's Law Center, *Prosecution of Child Abuse in South Carolina: A Manual for Solicitors and Investigators* (2d. ed. 2005)(most recent version is 2009 and it is available on the Children's Law Center web site, <http://childlaw.sc.edu>)

## **Reference to Selected South Carolina Code Sections**

S.C. Code Ann. § 17-23-175. Allows for admission of child videotaped forensic interview in criminal court.

S.C. Code Ann. § 19-1-180. Identifies circumstances when child hearsay may be admitted in family court.

S.C. Code Ann. § 63-7-310. Mandated reporter statute.

S.C. Code Ann. § 63-7-320. Notification by law enforcement to DSS.

S.C. Code Ann. § 63-7-620. Emergency protective custody.

S.C. Code Ann. § 63-7-630. Law enforcement notification to DSS of emergency protective custody.

S.C. Code Ann. § 63-7-760. Requirement for DSS and law enforcement to develop written protocols for emergency protective custody.

S.C. Code Ann. § 63-7-920. DSS investigation including interview of child.

S.C. Code Ann. § 63-7-980. Requirement for cooperation between DSS and law enforcement.

S.C. Code Ann. § 63-11-310. Children's advocacy centers.

APPENDIX 1

**Team Investigative Protocol  
of the  
\_\_\_\_\_ County Multidisciplinary Child Abuse Response Team (MDT)**

**Mission<sup>i</sup>**

**The Mission of this MDT is to ensure coordinated investigations and collaborative action plans addressing suspected child abuse and neglect.**

**Child-First Doctrine**

This MDT recognizes and shall adhere to the Child-First Doctrine, which states that the child is our first priority, not the family, the courts, the case, or any other agenda.

**Member Agencies**

This MDT consists of the following agencies:

- \_\_\_\_\_ County Sheriff's Department
- \_\_\_\_\_ Police Department
- \_\_\_\_\_ Police Department
- \_\_\_\_\_ Judicial Circuit Solicitor's Office
- \_\_\_\_\_ County Department of Social Services
- Children's Advocacy Center

**Confidentiality**

This MDT and their representatives agree that information pertaining to children and families will be held in the strictest confidence. Information may be shared outside the team only insofar as it is needed to properly investigate a case, develop a case plan or carry out the treatment or dispositional recommendations of the team.

**Protocol**

1. Agency Notification

Upon receipt of a complaint of child abuse:

A. Law Enforcement (LE) shall notify Child Protective Services (CPS) in a timely manner, considering the safety of the child and the integrity of the investigation.

B. CPS shall notify LE within 24 hours of all reports alleging a violation of criminal law or if the safety of a child is in question, as required by law.

## 2. Investigation and Assessments

Each member Law Enforcement agency will assign all reports of criminal child abuse or neglect to its appropriate major crimes unit.

\_\_\_\_\_ County Department of Social Services (\_\_DSS) will assign an appropriately trained CPS worker to each case of suspected child maltreatment.

The assigned agents will establish and maintain communication with one another to coordinate their respective investigations.

## 3. Interviewing of Children

### A. The Minimal Facts Interview

The purpose of this section is to provide guidance to first responders regarding the preliminary questioning of children.

The first concern of any investigation must be the safety of the child. Some children will need to be questioned immediately in the field in order to assess the risk of imminent danger and comply with CPS mandates. In order to reduce the risks associated with repeated questioning, field interviewers will conduct only a “Minimal Facts Interview” (MFI).

Do not ask why the abuse occurred as it may convey a blaming tone to the child. As developmentally and otherwise appropriate, the MFI may include:

1. What happened?
2. Where did it happen? Check for multiple jurisdictions.
3. When did it happen?
4. Who is the alleged perpetrator?
5. Are there witnesses, other victims, or other perpetrators?

The first responder should also consider what steps are necessary to ensure the safety of the child and other potential victims to whom the perpetrator has access, and whether immediate medical attention is necessary.

The MFI may be modified, or even omitted according to the situation and the first responder's judgment.

The forensic interview will be conducted with any child under the age of 12 at a CAC, such as the \_\_\_\_\_ CAC. The forensic interview of a child 12 or older will be conducted by the most appropriate MDT member.

Since all investigations differ, the use of the MFI must be flexible, permitting the investigator to use professional judgment. For example, if the child volunteers detailed information, that information should be documented. The documentation should include the circumstances under which the child made the disclosure. If the child does not volunteer information, questioning should be avoided.

"Minimal Facts" should be obtained from other sources whenever possible.

#### B. Interviewer qualifications and interview format

All child forensic interviews will be conducted by specially trained child abuse forensic interviewers. In all cases, interviewers will conform to nationally accepted standards of best practice. Specifically, this MDT recognizes the APSAC Practice Guidelines and Code of Ethics, and guidelines set forth by the National Children's Alliance (NCA). In addition we adhere to the interview principles set forth in Child First South Carolina (CFSC). We further recognize the evolving nature of best practice and will continue to adapt to advances in the field.

#### C. Interview Setting

Children under 12 will be interviewed at the \_\_\_ CAC or another CAC. A verbal child of any age may be referred for interview at the \_\_\_ CAC or another CAC.

In all cases, interviews conducted at the \_\_\_ CAC will be video-recorded. The interviewing agency will notify the respective investigators in advance of the date, place, and time of said interview. Investigators will attend, observe and participate in the interview via closed circuit television whenever possible. Copies of the interview on DVD or VHS will be made available to LE, the solicitor or CPS as necessary.

### 4. Medical Response

Children with suspected child abuse or neglect will receive a medical assessment to be conducted at the \_\_\_ CAC or another CAC, unless deemed unnecessary by a specially trained medical professional. This medical assessment will include a child's medical history with a review of systems and a comprehensive and developmentally age appropriate physical examination, assessing the child as a whole. The \_\_\_ CAC medical provider will coordinate referrals for medical treatment of any conditions discovered during the \_\_\_ CAC evaluations, but will not provide continuity of care.

In situations of acute sexual assault, defined as the last suspected incident occurring less than or equal to 72 hours, patients will be evaluated at the Emergency Department of [HOSPITAL]. ER medical providers are encouraged to seek consultation from \_\_\_ CAC medical provider.

Any MDT member can seek consultation with the \_\_\_ CAC medical provider in any case.

#### 5. Interviews of others

A. LE investigators will conduct all interrogations of suspected perpetrators. The CPS investigator may be present at the discretion of LE. All interrogators will have received specialized training in suspect interrogation.

B. The LE investigator will be responsible for explaining criminal implications of the investigation, including any possible charges and Miranda warnings, if necessary.

C. Interviews of other adults (e.g., witnesses, collateral contacts) will be conducted as deemed appropriate by the MDT.

#### 6. Removal of Child

A. Only a LE officer may remove a child without a court order. The officer may consult and should consider the recommendations of the CPS worker.

B. Removal of the child should occur only if the alleged perpetrator cannot be removed from the child's home or if the removal of the child, rather than the perpetrator, is in the child's best interest.

C. \_\_\_DSS will determine the appropriate placement of the child based on statutory requirements.

D. Any MDT member may recommend removal of a child as an option in a particular case. Discussion regarding such decisions can be handled at MDT case review staffing or through other communications.

#### 7. Arrest and / or Removal of Alleged Perpetrator

LE investigators are responsible for making decisions regarding arrests. If an arrest is made, the investigator will advise the MDT.

#### 8. Evidence Collection and Maintenance

LE will be responsible for the collection, preservation and storage of all physical evidence collected by LE. CPS may also collect and maintain evidence, such as photographs, to support their agency's determinations. The \_\_\_ CAC will maintain the original video-recording of each forensic interview conducted there, as well as any documentation associated with the interview. For every child who receives a

medical examination at the ARC, a chart will be maintained in accordance with the standards set forth by USC School of Medicine, Department of Pediatrics and [Hospital]. The colposcopic photos of the ano-genital region will be maintained at the \_\_\_ CAC, and will only be released to other medical professionals for medical consultation when needed, or to the SO upon receipt of a court order or properly executed subpoena that specifies release of colposcopic photographs.

All \_\_\_ CAC records, photographs and video-recordings will be preserved for a minimum of ten years. Any member of the MDT can request that a record be maintained for a longer period if necessary.

#### 9. Prosecutor Involvement

A. CPS and LE may contact the Solicitor's Office (SO) whenever a legal or procedural question arises in an investigation.

B. Decisions to prosecute or not will be shared by the SO with members of the MDT. The SO may receive questions, requests or other information from any member of the MDT and will respond to these issues as deemed appropriate and necessary.

C. The SO is responsible for preparing children to render court testimony. The SO is further responsible for recognizing the developmental and emotional needs of the child abuse victim, and preparing these witnesses appropriately to reduce the risk of secondary trauma. To this end, the SO shall coordinate whenever necessary with the Solicitor's Victim Advocate, the \_\_\_CAC Victim Advocate and other helping professionals in the best interest of the child abuse victim.

#### 10. Victim Advocate Involvement

##### A. LEVA

From the time a child abuse investigation begins, the LE agency is responsible for providing the child and family with the services of a Law Enforcement Victim Advocate (LEVA). It is the role of the LEVA to explain the Crime Victims Bill of Rights, Crime Victims Compensation Fund, and ensure understanding of the criminal justice process. The LEVA may be called upon to provide crisis intervention and logistical support as needed.

##### B. SVA

Once criminal charges are filed, the SO will assign a Solicitor's Victim Advocate (SVA), whose primary role is maintaining communication with the family and notification of upcoming court procedures. The SVA may be involved at the SO's discretion in the preparation of the child witness for court testimony. During trial, the SVA is responsible for the care and comfort of the child victim / witness, and any involved siblings or non-offending caregivers.

Victim advocates are welcome members of the MDT and may elect to attend any case review meetings where they feel their input is warranted, or where they need to make inquiries to fulfill their duties for the child.

11. MDT Meetings/ Case Review

A. The purpose of the MDT meeting is to discuss cases under active investigation. Through this process, all members of the MDT will have the opportunity to share vital information, discuss issues, identify problems and maintain case tracking. MDT members will remain mindful of the laws of confidentiality which govern the release of medical or mental health information. This information can and will be shared as provided for by federal and state law which requires mandated reporting of information relevant to suspected child abuse. Clinical information which need not be shared to further a child abuse investigation will be treated as confidential and protected, and not be shared without the expressed consent to release by the child's guardian.

B. The MDT will meet every third Tuesday at 2:30 p.m. Location will rotate among the agencies. Cases which are particularly complex or require urgent discussion may be staffed at any time as needed.

C. Meetings will be held if any two of the following agencies are represented:

1. LE
2. CPS / DSS
3. SO
4. CAC

Responsible individuals involved in case investigations and evaluations will attend the initial review of a case. In the event that the investigator can not attend he/she will send an informed representative in their place. It is the responsibility of the case investigators themselves to keep the MDT informed and updated.

There will be occasion when another professional – e.g., therapist from another agency, school personnel – will have relevant information or concerns to share with the MDT. When MDT representatives with specific case responsibilities wish to include such professionals, they may extend the invitation and inform the MDT coordinator. Such parties will only be admitted into discussion for the specific case in question, and after signing the MDT confidentiality agreement. Caution must be exercised in the releasing of information under such circumstances, while recognizing that receipt of information and cooperation in the child's best interest are important goals.

D. The \_\_\_ CAC will be responsible for appointing an appropriate MDT coordinator. The MDT Coordinator will be responsible for setting the agenda and facilitating the meeting. Any MDT member may ask for a particular case to be placed on the agenda for discussion. The MDT Coordinator requests case names a week prior to each meeting. The coordinator will document discussion and action

plans. Through e-mail or telephonic communication the coordinator will issue specific tasks to the appropriate team members. Agreed upon tasks will be completed and progress updates will be provided by the next scheduled MDT meeting.

E. Cases under review will remain active on the agenda until CPS and LE have made their disposition. SO will update the MDT on prosecution outcomes.

## 12. Mental Health Treatment of Child Victims

A. Under ordinary circumstances, abuse-related therapy shall not commence until the child's forensic interviewing has been completed. It is the express view of this team that caution must be exercised to avoid labeling a child a "victim" without adequate basis.

B. Suspected child abuse victims may require crisis intervention or other mental health response prior to the completion of forensic interviews. Under such circumstances, the role of the mental health therapist must not be confused with the role of a forensic evaluator. A forensic interviewer of a child cannot also serve the same child as a therapist.

C. To minimize trauma associated with multiple disclosures and to enhance coordination of the investigation, the \_\_\_ CAC is the preferred mental health provider for child victims of abuse and neglect. When the \_\_\_ CAC is not available, or treatment at the \_\_\_ CAC is contraindicated, members of this MDT will make appropriate referrals.

## 13. Grievances

Any conflicts arising pursuant to the process outlined in this protocol shall be dealt with in the following manner:

1. Conflicting professionals shall meet and discuss the conflict in an effort to resolve it.
2. If the conflict cannot be resolved in this manner, the professionals' immediate superiors will become involved and the matter will be discussed at a meeting with those team members present.

## 14. Protocol Revisions

A formal review of this protocol will be conducted at minimum every three years. All core agencies must meet to discuss any proposed changes. At this meeting, a vote by the agency representatives will be taken to determine the implementation. This protocol may be modified to: a) conform to existing or new statutes, rules, regulations or departmental policies which may conflict with any provisions of this protocol; b) better meet the needs of children and the provision of child abuse

related services; c) improve the procedures set forth in this protocol; d) add or delete agencies as parties to this protocol; or e) such other purpose as the parties may agree.

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<sup>i</sup> This protocol was adopted from the Team Investigative Protocol of the Richland County Multidisciplinary Child Abuse Response Team (MDT) drafted by the Assessment and Resource Center for Richland County in coordination with the members of the Richland County, South Carolina, Child Abuse Response Team.

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**APPENDIX 2**

**CHILD FORENSIC INTERVIEW CORROBORATION CHART<sup>1</sup>**

County \_\_\_\_\_

Case Number \_\_\_\_\_

Name of Victim \_\_\_\_\_

Date of Incident \_\_\_\_\_

<b>Checklist</b>	<b>Forensic Interview</b>	<b>Corroboration</b>	<b>Consent/Warrant/Other</b>
Perpetrator description clothing identifying marks			
Location home location in home furnishings decor television stereo computer			
When date time of day season holiday/birthday			
Child clothing toys			
Abuse details			

Documents diary cards letters photographs address books calendars			
Books magazines catalogs			
Computer discs thumb drives zip drives camera			
Camera video still/digital cell phone video tapes photographs digital frames			
Gifts perpetrator victim			
Vehicle(s)			
Weapon(s)			
School records attendance guidance school nurse			
Job(s) work records timesheets			
Records phone bills credit card bills bank records receipts			

Pornography child adult child erotica sex aids			
Lures			
Drugs/alcohol			
Crime Lab stains prints drugs			
Medical exam result doctor's history			
Witnesses eye witnesses collateral siblings excited utterance			