

Position Statement: Central Delivery of the National Joint Investigative Interviewing Training Programme

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Purpose

This paper sets out the rationale for maintaining a centrally coordinated and delivered model for the National Joint Investigative Interviewing Training Programme, the specialist training programme that equips social workers and police officers with the knowledge and skills required to undertake forensic interviews with children using the Scottish Child Interview Model.

Context

The development and implementation of the Scottish Child Interview Model has transformed joint investigative interviewing practice in Scotland.

Key to this change has been the identification, understanding, and integration of messages from international research, which highlights the range of measures required to support police officers and social workers to undertake this specialist work competently.

Interviewers must maintain high professional standards when conducting joint investigative interviews with children. They are required to apply evidence-based interviewing techniques and operationalise trauma-informed practice through their communication, planning and decision-making, ensuring that children can provide their best evidence while reducing the risk of re-traumatisation. This reflects the evidence base underpinning the NICHD Investigative Interview Protocol, which demonstrates that structured, child-centred interviewing approaches improve the quality of information obtained from children while reducing reliance on inappropriate questioning techniques (Sternberg et al., 2002; Lamb et al., 2008).

Since 2019, the National Joint Investigative Interviewing Team has incrementally replaced previous local delivery arrangements associated with the former five-day model for interviewing and has become the principal mechanism for training delivery across Scotland. As implementation of the Scottish Child Interview Model has matured, it has become increasingly clear that the specialist expertise, governance arrangements, quality assurance processes and training infrastructure required to support this work are most effectively maintained through a centrally coordinated approach.

Research, Best Practice and the Case for National Delivery

The case for central delivery is supported by a substantial body of international research demonstrating that child forensic interviewing is a highly specialised skill rather than a generic professional competency. Research underpinning the NICHD Investigative Interview Protocol found that interview quality improves when practitioners are trained within a structured and standardised framework and are supported to follow a recognised interviewing model (Sternberg et al., 2002; Lamb et al., 2008). The Scottish Child Interview Model reflects these principles by requiring a consistent methodology, specialist training and robust quality assurance arrangements.

In accordance with recognised standards, in particular Bairns' Hoose Standard 6, this approach aligns with international evidence demonstrating that fidelity to structured interviewing models is associated with higher-quality interviews and more consistent professional practice (La Rooy et al., 2015; Stewart and La Rooy, 2020).

Central delivery of joint investigative interviewing training supports these aims by providing a consistent, evidence-based approach to interviewer development across Scotland, strengthening fidelity to the model and promoting a shared understanding of best practice. As a result, centralised training acts as an important quality assurance mechanism, reducing variation in practice across Bairns' Hoose services and supporting the development of the advanced skills required to conduct trauma-informed, high-quality interviews that reduce the need for children to repeat their experiences (Healthcare Improvement Scotland and Care Inspectorate, 2023).

Research consistently demonstrates that initial training alone is insufficient to maintain interviewer competence. Lamb et al. (2002) found that interview quality deteriorated when ongoing feedback and supervision were removed, whilst Price and Roberts (2011) demonstrated measurable improvements in interviewer performance when training was combined with intensive feedback and structured review processes.

Interviewers require ongoing coaching, supervision, feedback and relevant continuing professional development opportunities to sustain and improve their skills over time. Similar conclusions are reflected in current practice guidance from the National Children's Advocacy Center, which identifies supervision, protocol adherence, peer review and performance feedback as core components of professional competence in forensic interviewing (NCAC, 2025; NCAC, 2026).

These findings reinforce the importance of a delivery model that extends beyond the provision of training courses and supports long-term professional development. Central delivery enables consistent governance, quality assurance and performance monitoring arrangements to be applied across Scotland. It provides a more sustainable framework

PROTECTION CHILD CENTRED JUSTICE

than multiple locally managed training arrangements that may vary in capacity, expertise and oversight.

The evidence also supports the concentration of specialist trainer expertise within dedicated training teams. Major international providers of forensic interview training, including APSAC, the National Children's Advocacy Center, FIRE and the ChildFirst® programme, deliver training through specialist faculties and dedicated training centres rather than relying on dispersed local delivery models (APSAC, 2026; FIRE; Zero Abuse Project).

International practice increasingly favours national or regional training centres rather than expecting individual local areas to maintain their own advanced interviewing faculty.

This recognises that trainer development, curriculum design, quality assurance and the translation of emerging research into practice require specialist knowledge and sustained investment. Steele et al. (2025) identify the development of interviewer expertise as an ongoing process requiring specialist coaching, mentoring and oversight, further supporting the concentration of expertise within dedicated national teams.

Maintaining this level of expertise across numerous local delivery sites would be both resource intensive and difficult to sustain. A central delivery model allows specialist trainers and assessors to develop and maintain advanced expertise, ensuring that participants benefit from current research, consistent training methods and high-quality assessment.

The Scottish Child Interview Model is founded on joint working between police and social work. This multidisciplinary approach is consistent with international forensic interviewing practice, where shared learning environments are recognised as an important mechanism for promoting common standards, interagency understanding and collaborative working (NCAC, 2025; APSAC, 2026).

This approach also recognises the benefits of professionals learning together within shared training environments. Joint learning promotes adherence to common quality standards, shared professional language and a mutual understanding of roles and responsibilities. Nationally coordinated training cohorts support this principle by bringing together police officers and social workers from across Scotland. This allows participants to develop a shared understanding of the interviewing model, strengthens professional networks and reinforces the collaborative practice that is essential to effective joint investigative interviewing. This strengthens consistency of practices, supports professional networks and reinforces the collaborative approach that sits at the heart of the Scottish Child Interview Model.

PROTECTION CHILD CENTRED JUSTICE

Research-informed training programmes place considerable emphasis on experiential learning through simulated interviews, direct observation, recorded review and structured feedback (Steele et al., 2025; NCAC, 2025). These activities are recognised as critical for translating theoretical knowledge into effective interviewing practice.

Effective interviewer training requires realistic environments that allow practitioners to practise and develop their skills under conditions that closely reflect operational practice. Consequently, many leading forensic interviewing programmes are delivered within specialist training environments designed around interview suites, observation rooms and technology-enabled feedback processes (APSAC, 2026; FIRE).

The specialist facilities required to support this approach include interview suites, observation rooms, recording capability and dedicated spaces for assessment and feedback. Central delivery at the Scottish Police College ensures access to these facilities and provides a consistent learning experience for all participants. Attempting to replicate this infrastructure across multiple local areas would be both costly, difficult to identify and difficult to sustain.

Operational and Financial Considerations

The practical realities of programme delivery further strengthen the case for centralised training delivery of a national model.

During the initial implementation phase of the Scottish Child Interview Model, on request local delivery arrangements for aspects of the programme were both practical and proportionate. Individual areas were establishing specialist interviewing teams and often required significant numbers of practitioners from that area to be trained within relatively short timescales. Training cohorts could therefore be populated largely from a single locality, making local delivery an efficient means of building capacity quickly.

The implementation landscape has now changed significantly. The Scottish Child Interview Model is established as a national model of practice and training demand is spread across Scotland. Rather than training large number of practitioners from a single area, current demand comes from multiple local authorities and policing divisions, each requiring smaller numbers of practitioners to access training throughout the year.

As a result, training cohorts are now routinely formed from participants drawn from across Scotland. This approach reflects national workforce requirements and supports efficient use of training capacity.

The programme is designed around cohorts of twelve participants, ideally comprising six police officers and six social workers, as this mix and scale maximise opportunities for peer learning while maintaining the intensity and quality of facilitation. This reflects the

PROTECTION CHILD CENTRED JUSTICE

evidence base underpinning NICHD and other forensic interviewing approaches, where sustained skills development is best achieved through repeated practice, observation, and feedback in small, highly interactive learning groups (La Rooy et al., 2015).

While this balance was achievable during the early implementation phase, it is increasingly unlikely that individual local areas could consistently identify sufficient numbers of practitioners from both professions to populate a full cohort within the required timescales.

A return to even in part local delivery would therefore create a risk of delays in accessing training, under-subscribed courses, increased delivery costs and inefficient use of specialist trainers and assessors. Central delivery avoids these challenges by enabling places to be allocated according to national demand rather than local availability, ensuring that training capacity is used efficiently and effectively.

The national delivery model also represents better value for money. Delivery through established national training facilities significantly reduces venue and accommodation costs when compared with sourcing local authority or commercial alternatives. It also avoids the duplication of specialist infrastructure, trainer development programmes and quality assurance systems across multiple organisations. By concentrating resources within a single national programme, Scotland is able to maximise the use of specialist facilities, maintain high standards of delivery and ensure that public resources are used effectively.

Conclusion

Joint investigative interviewing is a highly specialised area of practice that requires evidence-based training, robust quality assurance, expert trainers and access to specialist facilities. International research consistently demonstrates that high-quality child forensic interviewing is best supported through structured interviewing protocols, ongoing coaching and feedback, fidelity monitoring, specialist trainer expertise and multidisciplinary learning environments (Lamb et al., 2008; Lamb et al., 2002; Price and Roberts, 2011; Steele et al., 2025).

The current national delivery model reflects these principles. It provides a consistent standard of training across Scotland, supports effective quality assurance and governance, enables the development and maintenance of specialist expertise, and ensures efficient access to the facilities and infrastructure required for high-quality training.

Whilst local delivery was appropriate during the early stages of establishing specialist interviewing capacity within individual areas, the national implementation of the Scottish Child Interview Model has fundamentally changed the pattern of demand, with reliance

on locally generated cohorts increasingly impractical and reducing the viability of local delivery arrangements.

The evidence from research, international best practice and implementation experience clearly supports a centrally coordinated model as the most operationally viable, sustainable and cost-effective means of maintaining consistent, high-quality Scottish Child Interview Model training across Scotland. By ensuring consistent national standards, it upholds every child's right to be heard, protected and treated fairly, while reducing the risk of geographical variation in the quality of forensic interviewing practice and supporting equitable outcomes for children across Scotland.

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PROTECTION CHILD CENTRED JUSTICE

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