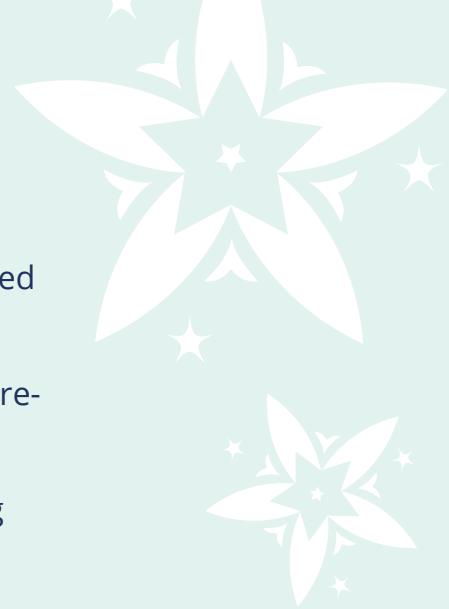




A Guide to
**Responding to
Pre-Trial Notes
Requests**





About the Bluestar Project

This guide forms part of a suite of best-practice resources developed by Emma Harewood of Harewood Consultancy on behalf of the Bluestar Project. The Bluestar Project at The Green House was designed to understand the barriers and facilitators to accessing pre-trial therapy services among children and young people who have experienced sexual abuse. The subsequent training and resources have been designed to apply to any practitioner or service working pre-trial with any victims/survivors of any form of abuse/crime.

Contact the Bluestar Project

All resources and information about our Training and Accreditation Programme can be found at www.bluestarproject.co.uk
Contact the Team on: bluestarproject@the-green-house.org.uk

About this guide

This guide is designed to assist practitioners and services when responding to requests to share notes from therapeutic, health and support sessions by the police, crown prosecution service and courts pre-trial. This guide should be read in conjunction with the [Bluestar Guide to Note keeping](#) which is designed to support best practice in Note Keeping for pre-trial therapy services.

There is a set of principles to follow when providing victims with therapy before a criminal trial. New Pre-Trial Therapy guidelines were published by the CPS in 2022, which apply to both adults and children/young people. Although the CPS guidance was designed for therapy services, the information in this guide applies to services providing therapy, health and advocacy services for children and adults after experiencing sexual abuse. However, pre-trial therapy guidelines apply to all crime types where support services have been accessed prior to a case reaching court. The best practice guidance in this set of resources is also transferable to other service providers supporting victims of other crime types e.g., domestic abuse services.

These guidelines were produced after consultation with experts and voluntary sector providers and are aligned with the principles in the Attorney General's Guidelines on Disclosure 2022.

Acknowledgements

Many thanks to Emma Harewood of Harewood Consultancy, who drafted this guidance in response to the research findings of the Bluestar Project and in partnership with its Best Practice Advisory Group and the Green House. The project was made possible by Home Office funding from the Childhood Sexual Abuse Support Services Transformation Fund.

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Definitions

‘Pre-trial therapy’ describes any therapeutic support given to children or adults during a criminal justice process. There are a set of principles to follow when providing victims with therapy during a criminal investigation and before a criminal trial, as described by the Crown Prosecution Service (CPS).

Victim

The term used for consistency in this document (rather than ‘complainant’, ‘survivor’ or ‘witness’) to refer to an adult, young person or child who has alleged that a crime has been committed against them. The term victim is used in this guide only when directly referring to or quoting the CPS guidelines.

Service user

An adult, young person or child who has alleged that a crime has been committed against them and for whom a referral has been received by a therapeutic service.

Therapist

Any professionally trained practitioner or one undergoing training who is providing therapy to victims.

Therapy

The range of psychological and emotional counselling and therapeutic approaches and support provided for difficulties that are associated with and/or exacerbated by a criminal offence.

Therapy Notes

Throughout this guide we use the term Therapy Notes to apply to notes taken by therapists’ or support workers delivering therapy or specialist support services focussed on recovery pre-trial. The Police and CPS can request access

to notes written by other specialist services supporting victims that are not therapeutic e.g., advocacy services such as ISVA, IDVA as well as statutory services e.g., Children’s Social Care. We use the term Therapy Notes throughout this document to refer to **all sessional notes** taken by practitioners delivering recovery support services for victims of crimes that have resulted in trauma. Sessional notes relate to direct trauma recovery work and **do not include** email or phone correspondence with other agencies; process notes; drawings or creative arts pieces; supervision notes; case management notes.

CPS Guidance

The CPS first published guidance in ‘Provision of Therapy for Vulnerable or Intimidated Adult Witnesses’ in 2001 and in 2020 shared the revised ‘Draft Guidance on Pre-Trial Therapy’ for public consultation. The final guidance was published in 2022 and seeks to clarify and enable access for victims to therapy and counselling, without impacting on criminal justice processes.

The CPS has made the following commitment to victims:

‘You may be having or thinking about having therapy or counselling to help you recover from your experiences. We are clear that you should receive, as soon as possible, effective treatment and therapeutic support to assist your recovery. Therapy should not be delayed for any reason connected with a criminal investigation or prosecution. If you receive therapy before a trial the police must only collect notes from your therapist or therapy provider in pursuit of a reasonable line of enquiry. It will only be a reasonable line of enquiry if there is some reason to believe that the notes will contain material relevant to the case. This is important in making sure there is a fair trial process. The information may also help us to build the case or be in a better position to respond to issues raised by the defence.’

Introduction

As part of an investigation and charging decision, therapeutic, health and advocacy service (e.g., ISVA, IDVA, Specialist Support workers) notes can provide valuable insight into the impact of the abuse on the child/adult victim and can include new or additional disclosures. The Criminal Procedure and Investigations Act states that the police are obliged to follow all reasonable lines of inquiry. The CPS advises that 'it will only be a reasonable line of enquiry if there is some reason to believe that the notes will contain material relevant to the case'. It is important to keep lines of communication with the police open to be able to test whether any request is a reasonable line of enquiry.

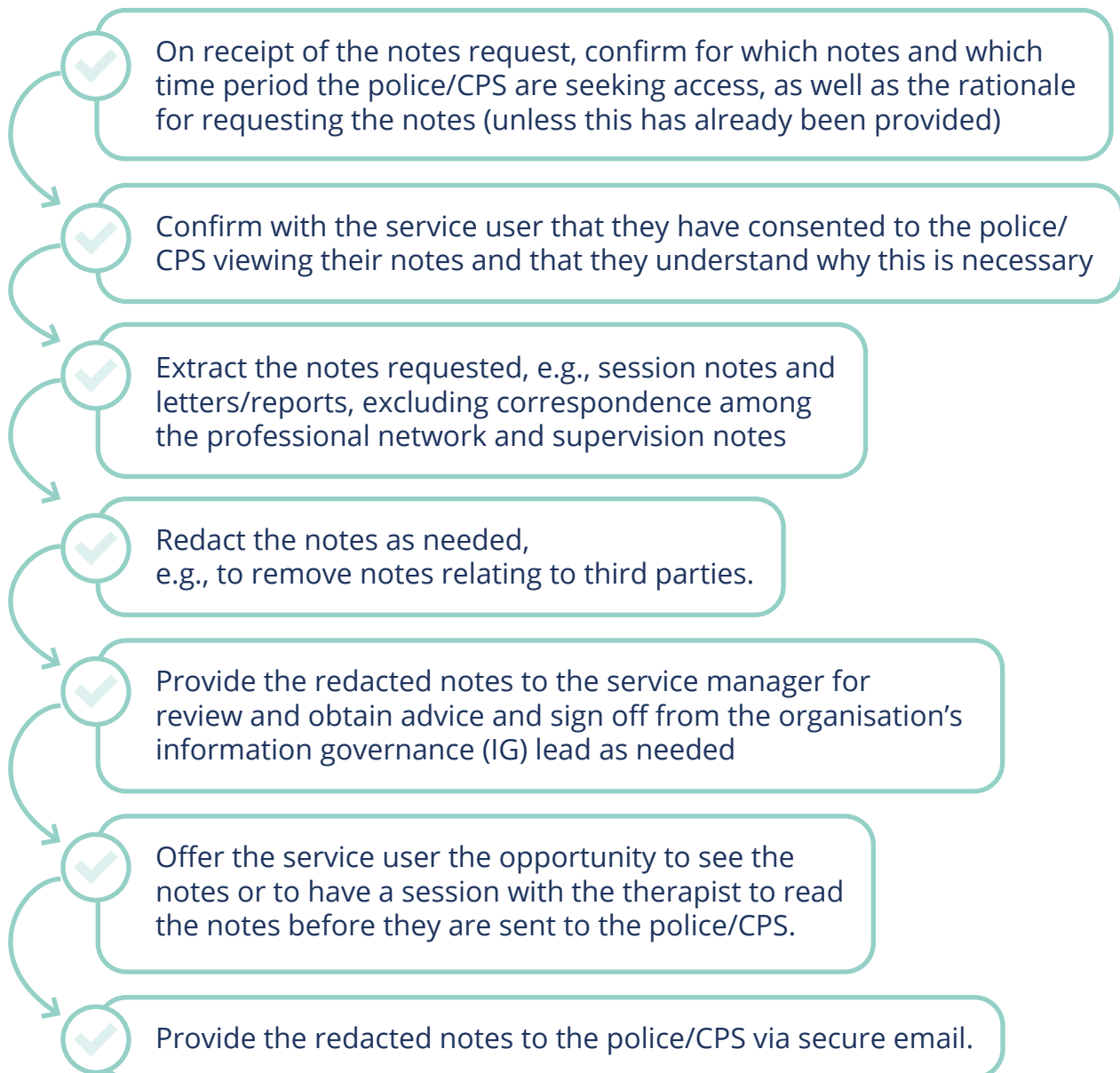
They may be seeking to identify any material 'which might reasonably be considered capable of undermining the case for the prosecution against the accused or of assisting the case for the accused'. For this reason, the police may ask to view notes held by organisations providing therapeutic and advocacy support.

The CPS advises that the police must only collect material from service providers if:

- It is strictly necessary as part of a reasonable line of enquiry that points towards or away from a suspect
- They are able to explain to the therapy or service provider why the information is required and can be specific about what is required
- The request is for the minimum amount of information that is enough to cover the line of enquiry.

This guide will detail each step of the process with practical examples at each stage.

Summary guide to responding to notes requests



Receiving a request for notes

According to the CPS Guidelines, Police cannot request access to entire therapy notes and notes cannot be accessed on a speculative basis. When receiving a notes request from the Officer In Charge (OIC) or CPS, a practitioner should expect to receive as part of the request:

- An overview of the allegation/charge under investigation
- Specific issues in the case the OIC is seeking to evidence from the notes
- Consent from the child, parent, or adult
- Details of the types of notes requested e.g., session notes, letters, and the time period in question

However, as the CPS guidance is still new, it is not uncommon for police and/or solicitors to make a blanket request for all notes or seek access to notes close

to a charging decision, putting services under pressure to respond. Practitioners and services are encouraged to seek the above information before commencing the note-sharing process. A standard email response to notes requests and accompanying notes request form, can assist local police and solicitors in making a response in line with the CPS guidance.

Typical email from police:

Police: 'We need you to send us all the therapy notes for *[service user]* by tomorrow. Failure to do so will stop the CPS making a charging decision and the defendant will be bailed.'

OR

'Request for: Therapy Notes'

Service provider / practitioner email response:

'Thank you for your request to access therapy notes pertaining to *[service user]*.

In line with the CPS Pre-trial therapy guidelines (2022) we need you to provide a specific reason for requesting access to therapy notes and that request must be a reasonable line of enquiry. We are unable accept requests to access all therapy notes as we have a legal obligation to protect our client's privacy and data. A step-by-step guide for police can be found in the CPS Guidance for accessing Pre-Trial Therapy notes from Third Parties in [Annex B of the new CPS Pre-Trial Therapy Guidelines](#).

Please can you complete the attached notes request form and confirm:

- Whether Early Investigative Advice (EIA) has been sought?
- The specific time period and particular issue you are looking to confirm?
- Why you have reason to believe access to the therapy notes constitutes a reasonable line of enquiry?
- That you have spoken to the victim and have agreement for us to share the notes

Once we have this specific information, we can then let you know if we have any relevant information. We will review the notes to share with the service user and confirm if they still consent before sharing this with you. We are happy to discuss further.'

Ideal email from police:

Police: 'We have reason to believe that *[service user]* attended therapy with you during these dates - she disclosed that she recalled more about the allegation in your sessions. We are seeking access to your therapy notes for this day/ date range.'

Service provider / practitioner email response:

'Thank you for your specific request to access therapy notes pertaining to *[service user]*. Please can you complete the attached notes request form, and we will prepare relevant documents. The client will be offered the choice to review any notes that are deemed relevant to your inquiry and if they still consent to release this information after reviewing it we will then forward this to you and discuss with you how best to do this.'

Ensure you copy in your supervisor/ manager, so that you can be properly supported through this process. Practitioners report they can feel isolated when being asked to release notes. Your supervisor, manager and/ or your information governance lead will be able to assist you. If you are a lone practitioner, we recommend you contact your professional body or supervisor for advice.

You can invite the OIC to meet to discuss further the nature of their request. The CPS guidance advises 'Investigators must be able to clearly articulate why it is a reasonable line of inquiry to obtain the material in possession of the therapist. Where relevant, prosecutors should encourage the police to take an incremental approach, including having a conversation with the therapist in the first instance, making clear that the officer will need to evidence this conversation in the crime report or preferably in a statement.'

Request the OIC or solicitor complete a copy of your notes request form. Ideally this form will be co-designed with your local police or CPS. The notes request form should include:

- Police/CPS requestor name and details
- Victim name and details
- Charge under investigation
- Outcome of early investigative advice – The CPS guidance states 'During Early Advice investigators and prosecutors will discuss third party material and will agree what reasonable lines of inquiry need to be pursued based on the unique facts of the case.'
- Section of notes requested – therapy, ISVA, health, other
- Date range of notes requested
- Reason that the request is a 'reasonable line of enquiry'
- Written agreement of the person that the notes request pertains to – The CPS guidance states 'Police should speak to the victim prior to approaching the therapist. The police should seek the agreement of the victim and inform them of their right to object at any time to the processing of their data.'

See [Appendix 1: SAMPLE Notes request form](#).

Ensure the request is added to a notes request log – you may be asked to share this with your manager/information

governance lead in larger organisations. It can be helpful for practitioners and services to keep a log of all notes requests received to keep track of number of requests each month, confirm that local processes have been followed and senior leaders are aware. The log should be kept up to date as the process progresses and serves as a helpful prompt for practitioners to:

- Alert senior leaders, including information governance lead if appropriate

- Confirm it is a reasonable request for notes
- Seek appropriate advice
- Seek service users' agreement to share
- Upload information to service users records
- Check that response time of 30 days is met

See **SAMPLE Pre-trial therapy requests database** available from [The Bluestar Project](#).

Preparing to respond to notes request

Once you or your service have received a completed Notes Request Form from the police, you are encouraged to confirm that the service user has consented to the police/CPS viewing their notes and that they understand why this is necessary. Whilst the police may have consent from the service user, this could have been taken at the point of making a statement e.g., some time ago. Things may have changed for the service user since this consent was received and we know that giving consent to the police is a complex issue. It is considered best practice to check with the service user that they understand what they have consented to.

Discuss with your Supervisor/Service Manager and agree who will review the Records and determine who is best to respond to the request and write the Cover Letter. Alongside the Notes it is considered best practice to include a **Cover Letter** which provides important contextual information for the police (see **[Appendix 2: Sample Cover Letter](#)**)

Confirm with the service user whether they would like to see a copy of the

notes once they have been redacted either before/after they have been sent. Remember that viewing notes written about you can be triggering and cause distress to the service user such as worry about the defence team seeing notes, an invasion of privacy. It is best practice to offer choice and support to the service user; such as a private space to view and discuss the redacted notes, a support session afterwards and a supported conversation with the OIC or solicitor if the service user has any further questions. When contacting the service user, you can use the Pre-Trial Therapy Leaflet as a guide to the conversation (see **[Appendix 3: Pre-Trial Therapy Leaflet](#)**).

If the child/adult is no longer receiving support from the service, it is important to consider the trauma impact of being contacted by the service again and asked to come in to review and release notes. It is best practice to offer a number of sessions with a therapist or an advocate afterwards.

Extracting and redacting notes

The Notes Request Form from the police or solicitor should detail the section of notes requested (therapy, ISVA, health, other) and the date range of notes requested. Extract the notes requested pertaining to the specific dates/date range, session or assessment; with the exception of the following types of notes



The following are not considered part of the case note

- Third party email correspondence or meeting notes from conversations with other agencies
- Third party documents e.g. strategy meeting notes
- Process notes
- Supervision notes
- Safeguarding correspondence with social care
- Did not attend/Unable to attend/ Was not brought
- Client's artwork or materials created within sessions



Redact the notes as needed, removing any information in the notes related to the following:

- Personal feelings - should be in a victim impact statement
- Names of third parties
- Names and direct notes from other agencies
- Referral to other agencies
- Previous sexual history
- Sexuality and gender identity
- Other physical health conditions, if they are not relevant to the investigation

Redacting notes can be undertaken using a variety of methods, but the method chosen must ensure that the redaction cannot be reversed. The most commonly used options are blanking out text on a printed copy or deleting text in an electronic copy. When blanking out text in a printed copy, it is important to check that the highlighting with a dark marker

pen completely obscures the text, before scanning and sending the document. If deleting words/sections of text in an electronic, replace the removed text with [REDACTED] in its place to identify where a redaction has taken place. Do NOT highlight text in black and PDF a document. A PDF can be reversed and the highlighting removed.

Understanding case notes in the justice process

It is best practice in pre-trial therapy to write notes after sessions and groups with the criminal justice and family courts in mind, considering how the notes could be understood by a court of law, if notes are requested. Some topics, phrases or information provided could

be detrimental to the client in a court case and could be used by a defence team to undermine or discredit a client. The CPS advice keeping limited notes of sessions and groups. (For more info read the [Bluestar Best Practice Guide to Note Keeping](#)).

Findings from Bluestar Project Case Audits

Case note audits undertaken as part of the Bluestar project have shown that most therapists document how a service user presented and the theme/topic of the session. About half of the therapists audited documented assessment tools used and resources shared, as well as the next steps and only one in five gave a formulation. However, a third of the case notes audited included highly detailed session notes which could lead to difficulties in future criminal proceedings. Generally, therapists are aware of the topics/phrases that can cause difficulties, and less than 10% of cases audited included statements about feelings/ guilt/

shame/blame or a therapist's hypothesis. However, one in five case notes audited did include a statement that could impact on witness credibility.

Ideally case note systems allow therapists to mark each case note as session notes, group, professional liaison, telephone call with professional etc. to ease identification in future.

When documenting a disclosure or direct statement from a service user, use "speech marks" and note who is speaking. For example, the child said she feels that *"everyone hates her"* in these moments; or service user could link the book to her own experiences and said *"that's like what happened to me"*.



A sample case note for a session could include:

- Date
- Type of session or group e.g., 1:1 session, Group session 4, Joint family work
- Who was present
- How the service user presented
- Topic/themes covered in the session
- Assessments undertaken
- Resources used
- Next steps



Some case management systems can record group work, outside of the individual case record. A sample note for a group could include:

- Name of group facilitator(s)
- Name of service users who attended
- Topic of session
- Date of group session



The following details could lead to difficulty in a criminal justice process and should be avoided:

- Highly detailed discussion/content
- Jargon – such as abbreviations or assessment tools with explanation
- Statements about feelings of guilt/shame/blame
- Therapists hypothesis or interpretation
- Statements and words that could impact on witness credibility and memory – such as confusion, forgotten, liar, not tell



Examples of best practice case notes

She spoke about her somatic response (eye rolling, shuddering in response to XX name), but that she doesn't have that response anymore; she has spoken about the abuse so much it has been normalised.

Completed a CRIES-8 - scoring mid-high on trauma responses.

XX presented with tummy pain. Creative and verbal session finishing off the sensory grounding toolkit. Themes discussed: listening to needs, inter-generational family loss, pain held in the body.

Session 2: Complete. XX was calm and engaged. We talked about anchoring the feeling and explored what a safe space feels like to her. Enjoyed the discussion about black

history. Described how she had asked her teacher to make sure she had a warning before difficult topics. Themes: self-nurture, competence and feeling safe.

XX attended by himself and said he felt more relaxed and had not been self-harming. We made artwork about hope. Topics discussed: historical sexual abuse, consent, coping strategies, friendships and relationships.

XX talked about experiencing flashbacks and described experiences which sounded like dissociation. We explored psychoeducation and the brain responds to trauma when triggered.

XX described that she often does not freeze but is more likely to resort to fighting. We discussed this is a common reaction after trauma.



Example case notes that could cause difficulty

Mum shared that the perpetrator had been harassing the family and [client] pleaded with mum not to tell the police. *(could suggest client not being open with police)*

I left with heavy, difficult and confused feelings *(unclear if this is what the YP said or how the therapist felt at end of the session)*

Call to father: XX can appear to be 'attracted to risk' *(Could be used by defence lawyer to strengthen the myth that client puts herself at risk)*

XX mentioned how she comes across like a much older person in some conversations with her peers *(could be used defence lawyer to evidence that defendant thought client was 16 years old)*

I asked if she had been having a difficult time and she agreed. I spoke about how I was aware that she may feel closed off and struggle to speak about what she needed and she agreed. *(leading by the practitioner)*

We spoke about how she feels she is to blame for the abuse but she doesn't always feel this way *(could suggest she feels to blame for the abuse)*

Accompanying Cover Letter

Professionals in the criminal justice and family courts process are not always familiar with the language of assessments and formulation in practitioners' notes. A brief report to accompany the notes can provide useful context and an explanation of the impact of the trauma on the service user. The therapist is encouraged to offer the police or CPS a brief report, in addition to the case notes, to help the police or CPS understand their work with the service user. This can reference symptoms that are consistent with the current literature in the field of sexual violence and include the impact of the trauma on the service user.

A cover letter should include:

- Dates attended
- Summary of psychological interventions and/or groups attended
- Summary of relevant treatment
- Detail of notes released and any notes not provided with a clear rationale
- Glossary of shared language and terminology to inform the justice process – such as freeze, panic attacks, dissociation

See [Appendix 2: SAMPLE Cover Letter](#)

Support for therapists and service managers

Remember this can feel like a worrying and isolating time – especially if you are a lone practitioner

- Talk to your colleagues
- Undertake redaction process in pairs with a trusted colleague
- Seek advice from professional bodies
- Use the Bluestar protocol and training materials
- Review the CPS guidance
- Refer to experts in information governance and the Data Protection Law

Further helpful information can be found in:

- [Bluestar Protocol, Notes Guidance and Easy Read guides](#)
- [CPS Pre-trial Therapy Guidance](#)
- [BACP guidance](#)
(for BACP members)



Appendix 1: SAMPLE Notes request form

This form is designed to support Investigating Officers and Solicitors to submit Notes Requests and/or Subpoenas to [INSERT SERVICE NAME] in line with CPS Guidance for pre-trial therapy.

Information for Investigating Officers: The CPS Pre-trial therapy guidelines "(2022) state that Police must have a specific reason for requesting access to therapy notes and that the request must be a reasonable line of enquiry. In line with the guidance, we are unable accept requests to access all therapy notes as we have a legal obligation to protect our client's privacy and data. A step-by-step guide for police can be found in the CPS Guidance for accessing Pre-Trial Therapy notes from Third Parties in Annex B of the new CPS Pre-Trial Therapy Guidelines. We require this information and a copy of the victim's consent form to release notes before we can release any notes.

Section A: Notes Request

Professional requesting notes		*Mandatory
Your Name		*
Role		*
Force Identification Number		*
Email		*
Contact Telephone		*
Do you have agreement from the victim to release notes?	Yes – please complete section B with the victim No – We are unable to release notes without client agreement	Delete as appropriate
Reason for request to share notes	For use by the Police to assist in the investigation of a criminal offence For use by the Crown Prosecution Service in support of criminal proceedings For use by Social Care in Family Court proceedings For use by the Criminal Injuries Compensation Authority (CICA) Court request Other	Delete as appropriate
Victim Details		
Victm Name		*
Victim Date of Birth		*

Continued below



Offence Details		
Offence under investigation:	Drop down of Offences <ul style="list-style-type: none"> • Rape • Sexual Assault by Penetration • Sexual Assault • Sexual act with a child • Sexual touching • Grooming • Extreme pornography • Disclosing private sexual images without consent ('revenge pornography') • Indecent images of children • Other 	<i>Delete as appropriate</i>
Has Early Advice from the CPS been sought in this case?	Yes/No	<i>Delete as appropriate</i>
Why you have reason to believe access to the session notes constitutes a reasonable line of enquiry?	<<Free text>>	
Notes from which part of the service?	Therapy / counselling Independent Sexual Violence Advisor (ISVA) Advocacy / case navigator Other <<Services could add here any unique service offers such as medical, sexual health, social care liaison, police liaison>>	<i>Delete as appropriate</i>
The specific time period and particular issue you are looking to confirm?	<<Please insert dates to and from>>	*
Other information	<<Please include details of any specific requests>> E.g. Summary of psychological support, content of psychoeducation programme, verbatim notes of disclosure	

On submission

We aim to respond to Notes requests within 30 days. We encourage Investigating Officers and Solicitors to contact the practitioner/service manager for a further conversation once you have submitted this request form. You can contact us on <<INSERT GENERIC SERVICE EMAIL>

Section B: Agreement for Police to complete with victim

Please complete this section with the person whose notes you are requesting, to seek their agreement for requesting their notes. NB: Police may have their own Consent Form Template that they send to therapy

services to release notes. This is a guide to demonstrate what should have been completed by the police with your client in advance of the Notes Request

Agreement

I confirm that I have read this form with my police officer/ solicitor (or had this form read to me by my police officer/solicitor).

I have had the opportunity to ask ANY questions about any part of this form that I do not understand.

I agree to my therapy/support service being asked to the release the notes from my sessions as detailed above.

Please complete your details and sign below if you agree with the statements above.

Name	
Signature	
Date	
For children and young people, please seek agreement from a parent/carer.	
Parent/ carer name	
Signature	
Date	

Appendix 2: SAMPLE Cover letter

On headed paper
XXXXXXXXXX
XXXXXXXXXX

Our reference

Date

Address of requestor
XXXXXXXXXXXXXXXXXX
XXXXXXXXXX

Dear <<name of notes requestor>>

Thank you for your request of DD/MM/YY for the notes for <<service user name>> who attended <<service>> from MM/YY to MM/YY. We have now reviewed the notes requested with <<service user>> who has consented to release these notes.

The aim of this cover note is to provide a brief context to our service, our work with the service user and guide to common trauma symptoms consistent with the current literature in the field of sexual violence.

Our service:

For example: The Green House has been providing therapy for people affected by sexual abuse for over 30 years. Formerly known as Avon Sexual Abuse Centre, the Green House provides counselling services to children and adults living in Avon and Somerset. It is our mission to help people affected by sexual abuse to recover from their trauma and help improve their mental health, well-being, and resilience through the provision of specialist professional therapy accessible to all.

Our Work with the Service User:

Session attendance record				
Date of session	Type of session	Location	Other persons present	Notes provided
	<<1:1 or group>>	<<service centre, online, telephone, at school>>		<<y/n>>

<<Service user name>> was referred to the <<Green House>> because <<service user name>> was suffering from trauma relating to an alleged <<rape>> that took place in <<month of assault>>. <<Service user name>> started individual support with the <<Green House>> on <<start date>> and had their final session on <<end date>>. During the work it was noted that <<service user name>> suffered from *anxiety, suicidal ideation, self-harm depression/low mood*. See appendices for Common trauma symptoms.

Continued below



<<Service user name>> attended 16 individual sessions of counselling and their mother attended a parent psycho-education group, which follows a clear pre-trial therapy protocol.

Their key worker (s) were:

- *<<Name, job title>>*
- *<<Name, job title>>*

Response to notes request:

We enclose/attach with this cover letter the following notes that were requested:

- *<<list session notes included>>*

We have not included the following notes requested for the reasons detailed below:

- *<<List session notes not included and why>>*
- For example, notes from 3rd Aug 2020 not included as no relevant information related to the incident under investigation
- For example, notes on 5th August not included as third-party notes from strategy meeting

We ask that these notes are stored securely and only shared for the purposes of the criminal investigation and subsequent trial. Please do let the service know if we can be of further assistance.

Yours Sincerely

<<Name>>

Service manager/CEO of organization

Cover letter Appendices

Flashbacks - reliving aspects of a traumatic event or feeling as if it is happening now, which can happen whether or not you remember specific details of it.

Panic attacks - a type of fear response. They're an exaggeration of your body's response to danger, stress or excitement.

Hyper-arousal and Hypo-arousal - Typically, hyper-arousal and hypo-arousal are frequently referred to as "fight, flight and freeze", which are survival responses to perceived and actual threats. These responses activate physiological processes in the body, either with hyper- or heightened arousal (i.e. heart racing, faster breathing, sweating, nausea and dizziness, feeling very anxious, on edge and unable to relax, you may constantly be on the lookout for danger) or, hypo- or 'shut-down' freeze responses (inability to move or speak).²

Dissociation - one way your mind copes with overwhelming stress. You might feel numb, spaced out, detached from your body or as though the world around you is unreal. Dissociation is a more prolonged response that includes feelings of oneself or others being 'unreal'. It can include changes in the sense of subjective time, 'spacing out' or loss of awareness of the current situation, alterations in the ability to feel emotions, unusual bodily sensations such as analgesia or anaesthesia, paralysis or a sudden loss of skill, and out-of-body experiences. Dissociative flashbacks - a symptom of posttraumatic stress disorder - involve re-experiencing the traumatic event and loss of the ability to differentiate it from the 'here and now'. Whilst not every victim of sexual violence will experience these responses, there is a higher association and likelihood of this occurring with this kind of traumatic event. Dissociation is significantly more likely where a victim has experienced accumulative trauma from multiple or repeated abuse, such as childhood abuse, domestic violence, and torture.³

Sleep problems - you might find it hard to fall or stay asleep, feel unsafe at night, or feel anxious or afraid of having nightmares.

Low self-esteem - trauma can affect the way you value and perceive yourself.

Grief - experiencing a loss can be traumatic, including someone dying but also other types of loss. Many people experience grief as a result of how trauma has changed their lives. You might feel that trauma has caused you to miss out on some things in life, which can also lead to feelings of loss.

Self-harm - hurting yourself as a way of trying to cope. This could include harming parts of your body that were attacked or injured during the trauma.

Suicidal feelings - including being preoccupied by thoughts of ending your life, thinking about methods of suicide, or making plans to take your own life.

Alcohol and substance misuse - a way you might try to cope with difficult emotions or memories.

Self-blame, shame, and avoidance - Sexual violence can often result in self-blame due to feelings of shame about the sexual assault; often the victim internalises the experience in the absence of objective external evidence or witnesses to challenge this assumption. Victims can feel that their behaviour in some way contributed to the assault - usually despite the absence of any evidence to support that view or even when there is evidence to the contrary. This has been exacerbated by the perpetuation of rape myths and stereotypes, particularly whereby society has endorsed beliefs that a victim should have been able to say 'no' and 'fight back' against any potential assailant. Any identification of self-blame should be understood in the context of the victim trying to explain what happened and why it happened. It should not be confused with a legal admission of fault or guilt. Accounts may also vary over time because victims are initially unwilling to disclose certain facts through avoidance or shame. Disclosure, e.g. to a therapist, tends to develop over time. It is only when a victim develops a sense of trust that they will more fully disclose what has happened. Some details may never be disclosed.⁴



Appendix 3: Pre-Trial Therapy Leaflet



Pre-Trial Therapy

Everything you need to know





What is pre-trial therapy?

Pre-trial therapy is **any type of therapy** that is accessed when a report has been made to the police, a criminal investigation is underway and before the case has gone to trial.

The choice to enter therapy before, after or during the criminal justice process is yours – this decision should not be made by the police or Crown Prosecution Service (CPS).

Your wellbeing is the most important factor in choosing when it is the right time to access services and your treatment should not be delayed because of the ongoing criminal justice process.

Accessing therapy pre-trial can be helpful in supporting you emotionally with what has happened, and the impact of the criminal justice process itself.



How is pre-trial therapy different?

When a criminal case is underway, therapy and specialist support services are required to work within CPS Guidelines which you can read [here](#).

As part of the criminal justice process, the police or CPS may seek in very limited situations access to the notes we keep about your sessions.

If you want to talk about the incident under investigation that is okay. It's important for you to know that any new information about that allegation may need to be shared with the police if we receive a notes request or if there is a concern that you or someone else is at risk of harm.



Why would the police want access to my notes?

Therapy notes are sometimes seen as a form of evidence. The police and CPS have a responsibility to look at material that could 'point towards or away from the allegation' that has been made.

There is a possibility that therapy notes, if they include disclosures about the allegation, can form part of the case material that goes to court.



What happens when the police ask for my therapy notes?

The police **will not have access to all your therapy notes**, only very specific pieces of information related to the disclosure or incident under investigation (or what they call "a reasonable line of enquiry").

If the police ask us for access to your notes, we will always ask you first whether you want them to be shared. We will also offer to go through the notes together and share with you a copy of everything that is sent.

You do not have to share your notes if the police ask for them and we as your service are under no legal obligation to do so.

Though this very rarely happens, it is important for you to know, that if we or you refuse to share notes, later in the investigation process the Crown Court can issue a court order to access them.

If this were to happen, the prosecution may need to release some of the information to the defence lawyer – this means that the suspect could have access to some of your notes in these rare cases. For this reason, we keep limited notes about our sessions, as advised by the CPS.



What happens in pre-trial therapy?

Like other therapies, you will meet with your therapist on a regular basis. The therapy will be designed to offer you emotional support with how you are feeling and what is going on for you.

You will be asked to sign a Client Contract which includes in it an agreement and understanding with the key points included in this leaflet.

Your therapist should offer you the opportunity to read

through your notes each session to check you are happy with them and that everything is accurate - we believe it is important for you to feel in control of your information.

It's okay to ask your therapist to go through the process for this with you. Sometimes reading notes about your sessions can be difficult, they can support you to work with them on this in a way that feels right for you.



Who can I talk to about this if I have any questions?

Your therapist will talk with you about this at your first appointment. Other members of the support service may give you information about this if you are in contact with them. The service you are accessing

will be able to talk through any questions you have.

You can also talk to your investigating officer (OIC), Independent Sexual Violence Advisor (ISVA Service) or Victim Support Services.

For more info visit www.bluestarproject.co.uk
or contact us on bluestarproject@the-green-house.org.uk

References

- 1 Mind (2020). Effects of Trauma. Available at: <https://www.mind.org.uk/information-support/types-of-mental-health-problems/trauma/effects-of-trauma/> (Accessed: 3rd August 2022).
- 2 The Crown Prosecution Service (CPS) (2022) Pre-trial Therapy. Available at: <https://www.cps.gov.uk/legal-guidance/pre-trial-therapy> (Accessed 4th August 2022)
- 3 The Crown Prosecution Service (CPS) (2022) Pre-trial Therapy. Available at: <https://www.cps.gov.uk/legal-guidance/pre-trial-therapy> (Accessed 4th August 2022)
- 4 The Crown Prosecution Service (CPS) (2022) Pre-trial Therapy. Available at: <https://www.cps.gov.uk/legal-guidance/pre-trial-therapy> (Accessed 4th August 2022)

