

# HOSPITAL-BASED VIOLENCE INTERVENTION PROGRAM (HVIP) OVERVIEW

These slides are designed as adaptable templates for partner reporting and can be customized to meet your organization's needs. If you require support, customization, or a fully white-labeled version, please contact the HMM team through the "Contact Us" section on our website.

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# EMERGING ISSUES

## Violence

- Network Workplace Anti-Violence & Incivility
  - ED Security Enhancements
- Hospital Violence Intervention Program
  - Project HEAL/
  - Trauma Injury Prevention
- Domestic & Interpersonal Violence
- Pediatric Violence Prevention
  - No Hit Zone

## Workplace Safety/ Violence Prevention Regulations

- Health Care Heroes Violence Prevention Act (Bill A3199)
- AAP Statement opposing Corporal Punishment

## Human Trafficking

- Interoperability Standards/Meaningful Use
  - Interpersonal Safety
- Human Trafficking Training & Documentation
  - Department of Homeland Security: Blue Campaign
  - Department of Health & Human Service: SOAR (Stop, Observe, Ask & Respond) Campaign
  - Epic Human Trafficking Flowsheet

## Human Trafficking Regulations

- Human Trafficking Prevention, Protection, and Treatment Act: N.J. Admin. Code § 8:43E-14.3 (Employee Training)
- Governor's Survivor Leader Advisory Council (A.4432/S.3528 - 2024 Proposed)

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## EXAMPLE

# HUMAN TRAFFICKING PREVENTION, PROTECTION, AND TREATMENT ACT

- All healthcare workers and volunteers in New Jersey who have contact with patients - regardless of if the contact is clinical or non-clinical - must complete training in recognizing and intervening in cases of human trafficking.
- Workers must complete training within six months of the first day of employment.
- Training documentation management process managed through the LMS and ICIMS
- The SOAR for Health Care digital module meets the NJ Training requirements

NEW JERSEY ADMINISTRATIVE CODE  
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TITLE 8. HEALTH  
CHAPTER 43E. GENERAL LICENSURE PROCEDURES AND STANDARDS  
APPLICABLE TO ALL LICENSED FACILITIES  
SUBCHAPTER 14. HUMAN TRAFFICKING HANDLING AND RESPONSE TRAINING

N.J.A.C. 8:43E-14.1 (2017)

§ 8:43E-14.1 Purpose

This subchapter implements the Human Trafficking Prevention, Protection, and Treatment Act, P.L. 2013, c. 51 (approved May 6, 2013), particularly § 19, codified at N.J.S.A. 2C:13-12.

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N.J.A.C. 8:43E-14.2 (2017)

§ 8:43E-14.2 Facility personnel to receive training

(a) A facility shall require workers who have direct contact and/or interaction with facility patients and/or visitors of facility patients to receive training in accordance with N.J.A.C. 8:43E-14.3, regardless of whether the contact or interaction is clinical or non-clinical in nature.

(b) As used in (a) above, provided they have the specified contact and/or interaction, "workers" include:

1. Health care professionals who hold professional credentials issued by the State of New Jersey, regardless of the compensation arrangement, contractual status, or privilege status that may exist between the professional and the facility, such as:

- Health care professionals whose professional practice is regulated pursuant to Title 45 of the Revised Statutes;
  - Radiologic technologists who hold licensure pursuant to N.J.S.A. 26:2D-25 et seq.;
  - Emergency medical technicians and paramedics who hold certification pursuant to N.J.S.A. 26:2K-1 et seq.;
  - Nursing home administrators who hold licensure pursuant to N.J.S.A. 30:11-13;
  - Nurse aides who hold certification pursuant to N.J.A.C. 8:39;
  - Assisted living administrators who hold certification pursuant to N.J.A.C. 8:36 or licensure pursuant to N.J.A.C. 8:34; and
  - Personal care assistants and medication aides who hold certification pursuant to N.J.A.C. 8:36; and
2. Paid and volunteer facility workers.

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# RESPONSE TO HUMAN TRAFFICKING AND VIOLENCE

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# Network Violence and Human Trafficking Charter

Executive Sponsor

Initiative Senior Leadership

Human Trafficking & Violence Program Leads

IT and Data Analytics Lead

Learning and Development Lead:

Legal Affairs

Risk Management Lead

Security Lead

Emergency Department Lead

Maternity Services Lead

Government/External Affairs Lead

Compliance Lead

School Of Medicine Representative

Trauma Injury Prevention Lead

Psychiatry

Occupational Health & Safety

Pediatric Violence Prevention

Nursing Operations

Patient Safety / Quality

School of Medicine

Survivors

**Scope, values, and approach:** Committed to addressing violence and human trafficking in the patients we treat by extending Hospital Violence Intervention Programs (HVIP) at existing facility programs across the network..

- Expand Initiatives Including: Project HEAL (JSUMC), Trauma Program (HUMC), No HIT zone, (TIPP?)
- Develop education program for Human Trafficking using materials from SOAR, Blue Campaign by end of CY
- Develop screening, ID, processing, and connections to resources for HT Victims
- Enhance protocols for safety in the ED, Maternity [workplace violence]

## Project Goals:

- Track interpersonal safety metrics across the interoperability dashboard
- Participate (have membership) on the SART committee across all our counties that we service
- Compliance for both the violence prevention act and human trafficking act according IPP Standard
  - Revise training to be in compliance
- Implement resources from the SOAR and Blue Campaigns to develop team member education
- 100% of team members awareness of programs and completion of education
  
- All CHWs are trained to engage HVIP participants
- Project HEAL, TIPP, No HIT zone programs are available at 100% of our hospitals
- 

## Measure Domains:

- Patient safety
- Regulatory compliance
- Industry leader
- Model development and Align partnership with local and national entities

## Deliverables:

- 
- 
- 
- 

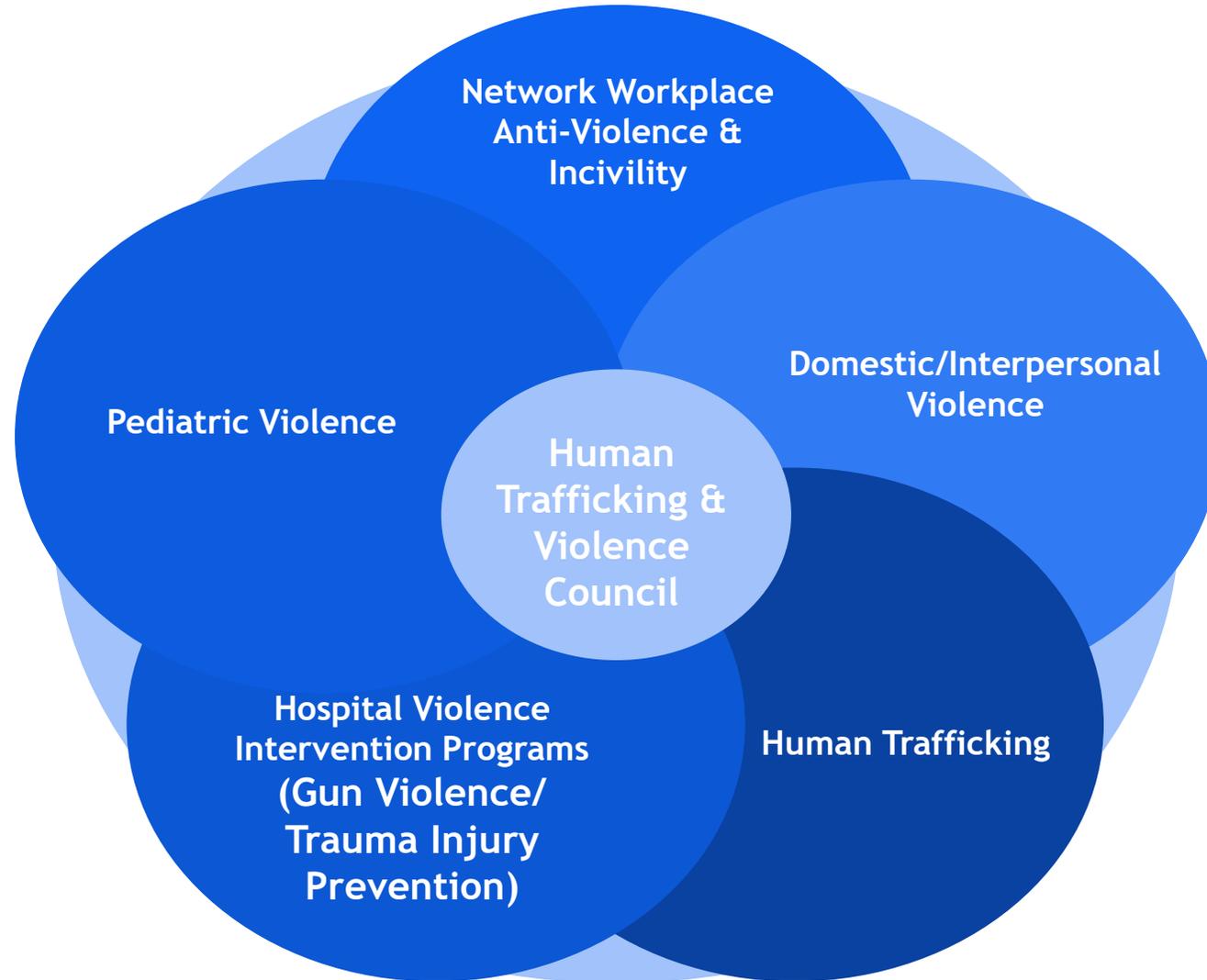
## References:

## Public reporting implications:

Programs are put in place to meet regulatory requirements

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# HUMAN TRAFFICKING & VIOLENCE COUNCIL



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# NETWORK WORKPLACE ANTI-VIOLENCE & INCIVILITY

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# ANTI-VIOLENCE COMMITTEE NETWORK WPV

Core Elements	Objectives
<b>Management Commitment &amp; Employee Participation</b>	Site Workplace Violence Committee
	Network Anti-Violence Committee
	Communication Plan
	Healthcare Heroes Act Reporting & Education
<b>Worksite Analysis &amp; Hazard Identification</b>	ONELink & Team Member Injury Data Analysis
	Early Implementation Response Teams
	Network Wide Wandering Roll Out
	Epic Patient Behavior Screening Tool
	Threat Detection System
	Team Member Injury Serious Event Classification System
<b>Training</b>	Oversight of Training Compliance
<b>Record Keeping &amp; Program Evaluation</b>	Professional conduct reporting process



*Continuous Strengthening of System through data-driven interventions that promote Workforce Safety*

**Goals**

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Reduce Events

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Reduce Harm

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Reduce Severity

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# WORKPLACE SAFETY PROGRAMS

## Healthcare Heroes Violence Prevention Act

*Bill A3199 AcaAcaSca (3R)*

*Session 2022 - 2023*



Establishes "Health Care Heroes Violence Prevention Act."

Any person who assaults a health care worker shall be subject to a fine, imprisonment, or both under the New Jersey Code of Criminal Justice, N.J.S. 2C:1-1 et seq." c. The Commissioner of Health may adopt rules and regulations, in accordance with the "Administrative Procedure Act," P.L.1968, c.

- Enhanced education and training requirements beyond state requirements for team members who have direct contact or interaction with patients and/or visitors, including clinical and non-clinical team members.
- New on-line training modules launched in September 2021 and are required network-wide.
- Regular seminars, conferences, grand rounds highlighting tools and strategies to identify survivors and provide necessary healthcare and address social and behavioral healthcare needs will be provided.

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# HOSPITAL VIOLENCE INTERVENTION PROGRAM

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## EXAMPLE

# HOSPITAL VIOLENCE INTERVENTION PROGRAM

## Counseling

Trained Counselors:

- Listen and guide with open hearts
- Help get you back on a healthy path
- Support you as you plan the future you want for yourself

## Healthcare Coordination

Nurse Navigation:

- Complete a health check-up
- Help with wound care
- Make referrals and appointments

## Case Management

Help to access a wide range of resources including:

- Victims of Crime Compensation
- Psychiatric and substance abuse treatment
- Job training and placement
- Educational opportunities
- Social services



**Steve Billingsley,**  
LCSW  
*Clinical Therapist*



**Randy Scales**  
Case  
Management  
Supervisor



**Lisa McDermott,**  
LCSW, LCADC  
*Clinical Operations  
Manager*



**Kristina Vander,**  
LCSW  
*Clinical  
Supervisor*



**Krista Peoples,**  
LPN, LSW  
*Clinical Therapist*



**Valerie  
Johnson, RN**  
*Nurse Navigator*



**Kristen Ryan,**  
LAC  
*Clinical Therapist*



**Aakash Shah,**  
MD, MBA, MSc  
*Medical Director*



**Tracy A.  
Jones**  
*Secretary*



**Chris Kuhn**  
*Content &  
Outreach  
Coordinator*

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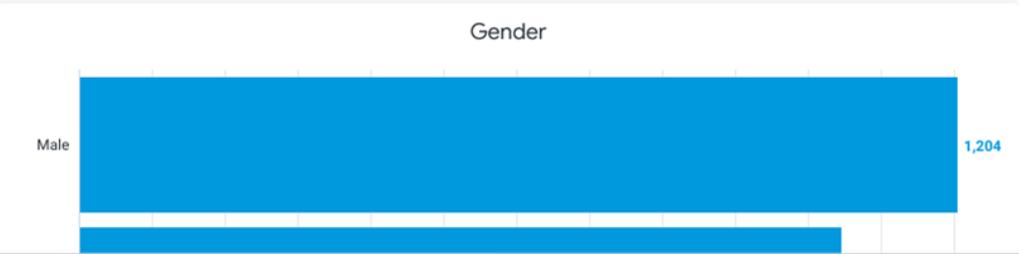
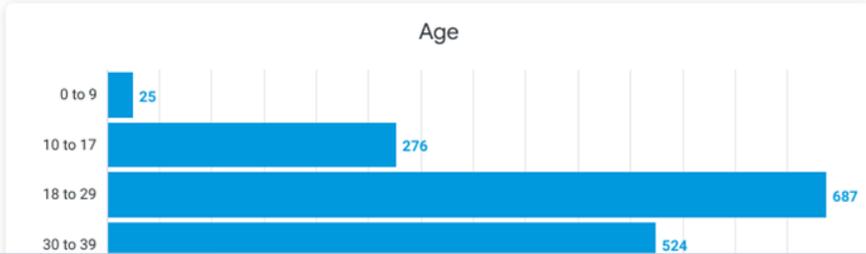
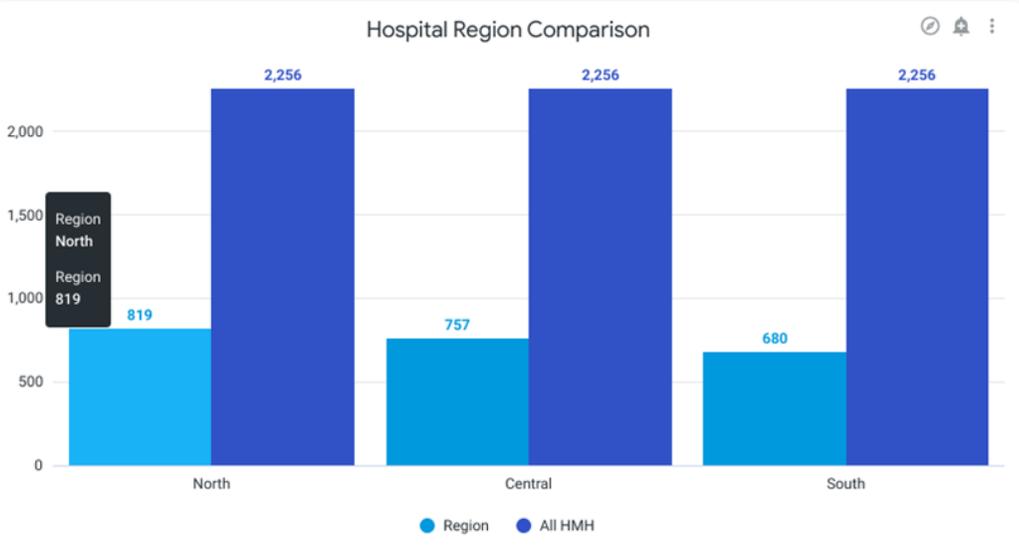
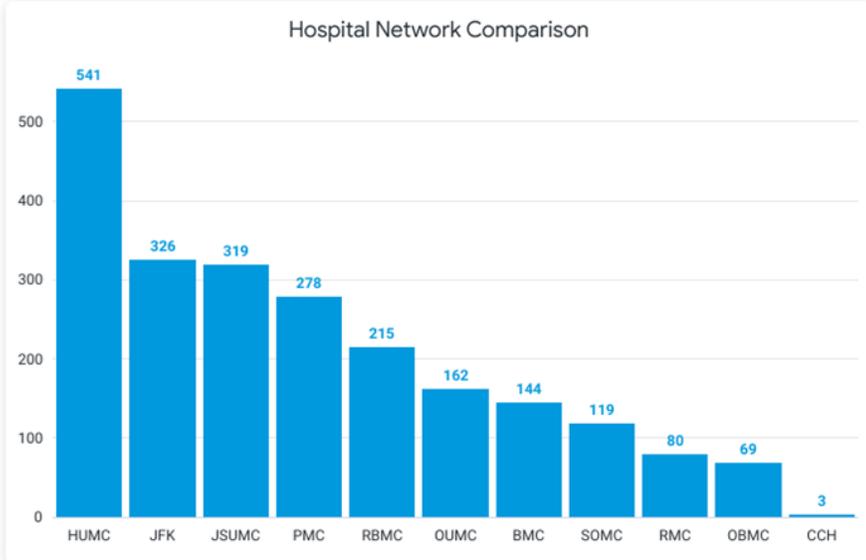
# DASHBOARD EXAMPLES

SDOH

## Hospital Violence Intervention Program - Project HEAL Dashboard

41m ago

Encounter Date: is in the year 2024 | Region: is any value | Location: is any value | Diagnosis: is any value | Age: is any value | Gender: is any value | Race: is any value | Marital Status: is any value | Language: is any value | Financial Class: is any value | Zip Code: is any value | Visit Type: is EDVISIT



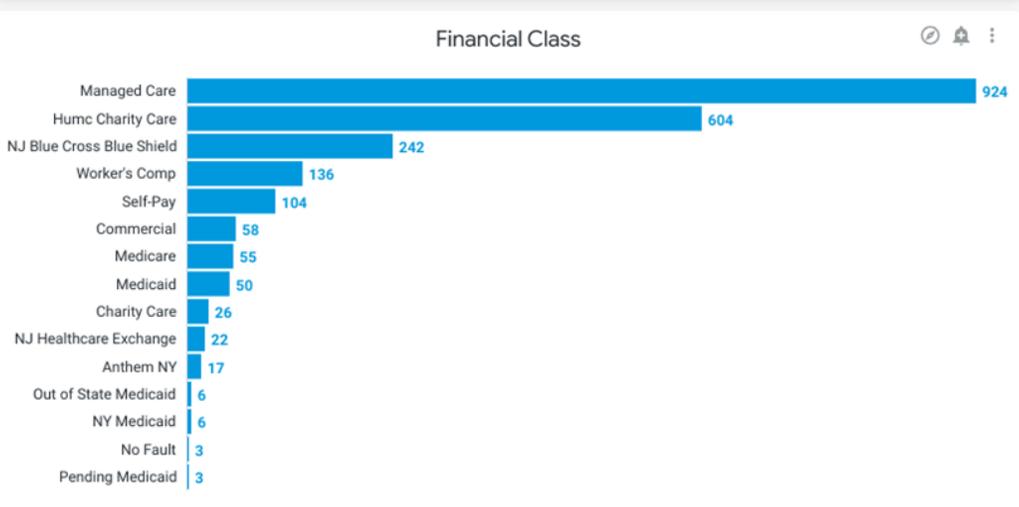
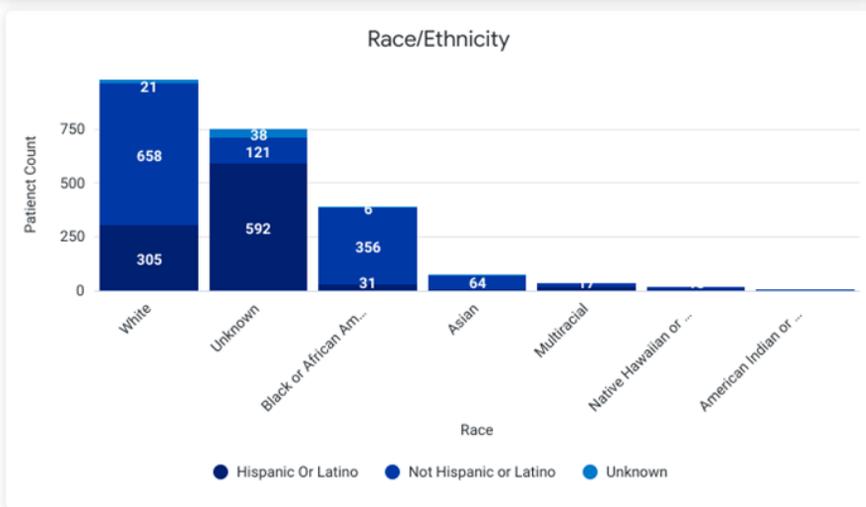
# DASHBOARD EXAMPLES

SDOH

## Hospital Violence Intervention Program - Project HEAL Dashboard

42m ago

- Encounter Date: is in the year 2024
- Region: is any value
- Location: is any value
- Diagnosis: is any value
- Age: is any value
- Gender: is any value
- Race: is any value
- Marital Status: is any value
- Language: is any value
- Financial Class: is any value
- Zip Code: is any value
- Visit Type: is EDVISIT



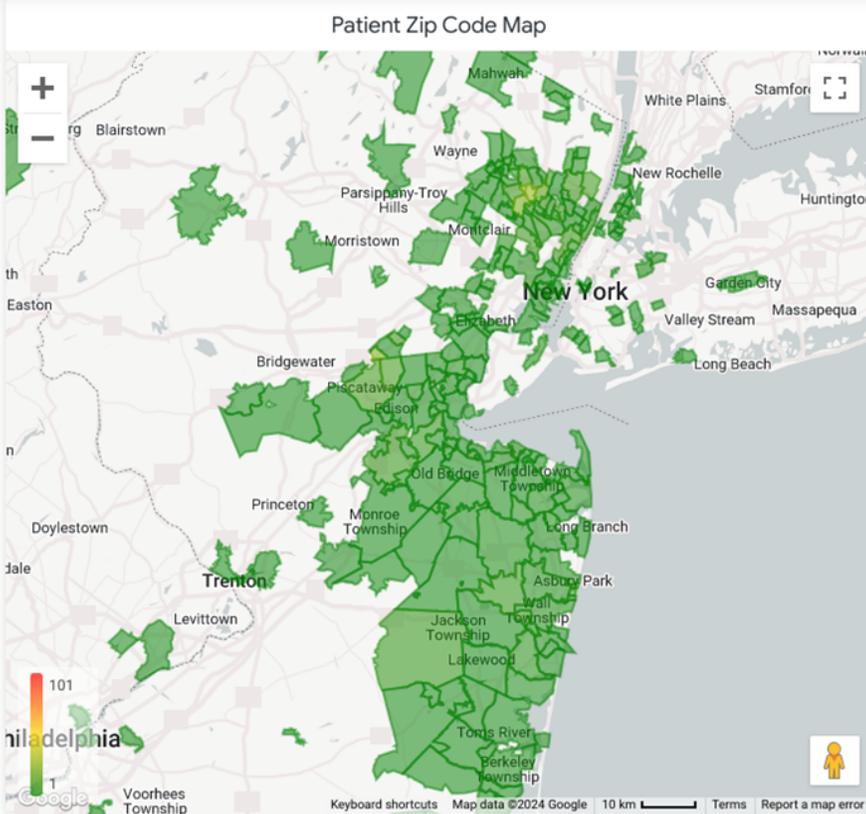
# DASHBOARD EXAMPLES

SDOH

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🔄 🏠 ☰

- Encounter Date
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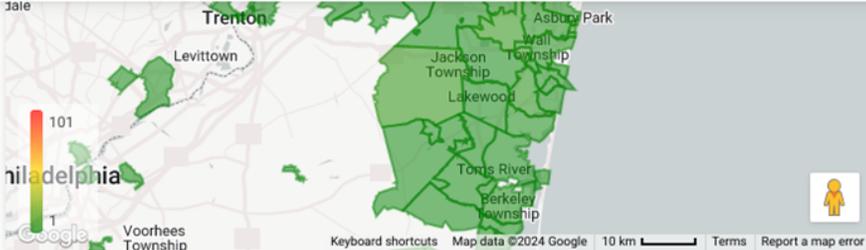
### Top 25 Patient Zip Codes

Zip	Patient Count
1 08861	114
2 07060	99
3 07601	86
4 07093	81
5 07753	78
6 07047	75
7 07712	74
8 07734	48
9 07087	47
10 08724	42
11 08050	31
12 07026	28
13 08701	27
14 07008	27
15 08723	25
16 07063	25
17 08820	25
18 07735	25
19 08005	23
20 07747	22
21 07055	22
22 08087	22
23 08753	21
24 07095	21
25 08742	19

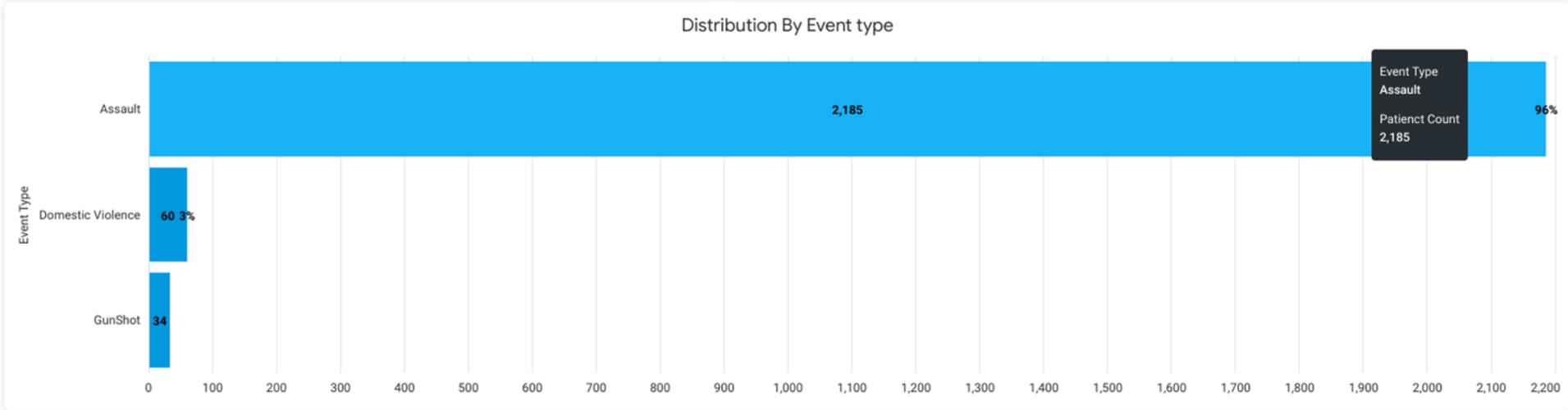
# DASHBOARD EXAMPLES

SDOH  
 Hospital Violence Intervention Program - Project HEAL Dashboard ♡ 📄 🔄 ☰ ⋮

Encounter Date: is in the year 2024  
 Region: is any value  
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 Diagnosis: is any value  
 Age: is any value  
 Gender: is any value  
 Race: is any value  
 Marital Status: is any value  
 Language: is any value  
 Financial Class: is any value  
 Zip Code: is any value  
 Visit Type: is EDVISIT



20	07747	22
21	07055	22
22	08087	22
23	08753	21
24	07095	21
25	08742	19



# PEDIATRIC VIOLENCE INTERVENTION

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EXAMPLE

# ALIGNED PEDIATRIC VIOLENCE INTERVENTION PROGRAM

## THE NO HIT ZONE

NHZ is a national initiative to end corporal punishment

The program trains staff, medical faculty and builds community partnerships to promote preventive approaches and to learn how to intervene when families are exhibiting high levels of stress and negative responses to their children.

### Charge

Create an environment within HMHN, clinics and community that promotes non-physical responses to emotions, including when parenting.



**NO HIT ZONE**  
HEALTHY KIDS - SAFER COMMUNITIES



**IN THIS ZONE OF RESPECT**

- No adult shall hit another adult
- No adult shall hit a child
- No child shall hit another child
- No child shall hit an adult

 Hackensack Meridian  
Children's Health

In Partnership With

 NEW JERSEY DEPARTMENT OF  
CHILDREN AND FAMILIES

 NO HIT  
ZONE

TO LEARN  
MORE ABOUT  
NO HIT ZONE



SCAN ME

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# HUMAN TRAFFICKING RECOGNITION, POLICY, WORKFLOW AND TRAINING FOR TEAM MEMBERS

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# THE SOAR TO HEALTH AND WELLNESS CAMPAIGN (SOAR)

The National Human Trafficking Training and Technical Assistance Center (NHTTAC) is a service of the U.S. Department of Health and Human Services Office on Trafficking in Persons.

Designed to help identify and respond to those who are at risk of, are currently experiencing, or have experienced trafficking and connect them with the resources they need.

Trainings are for professionals, organizations, and communities that address human trafficking in health care, behavioral health, public health, and social services settings.

Accredited and delivered on behalf of the Office on Trafficking in Persons in partnership with the Office on Women's Health at the U.S. Department of Health and Human Services.

Describe the types of trafficking and common risk factors.

Identify individual and environmental indicators of trafficking.



Address individual needs by coordinating across multidisciplinary partners to deliver appropriate services.

Screen and identify individuals who have experienced trafficking or who have increased risk factors for trafficking using a trauma-informed and person-centered approach.

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# WHAT IS THE BLUE CAMPAIGN



Blue Campaign is a national public awareness campaign designed to educate the public, law enforcement, and other industry partners to recognize the indicators of human trafficking, and how to appropriately respond to possible cases.

Blue Campaign works closely with DHS Components to develop general awareness trainings, as well as specific educational resources to help reduce victimization within vulnerable populations.

Located within the DHS Center for Countering Human Trafficking, Blue Campaign leverages partnerships with the private sector, Non-Governmental Organizations (NGO), law enforcement, and state/local authorities to maximize national public engagement on anti-human trafficking efforts. Blue Campaign's educational awareness objectives consists of two foundational elements, prevention of human trafficking and protection of exploited persons.

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# HUMAN TRAFFICKING IS CLOSER THAN YOU THINK



# HUMAN TRAFFICKING (HT) POLICY - KEY STEPS FLOWCHART

## Assess

Assess patient for risk factors and observable signs/symptoms of abuse, neglect, exploitation or HT upon admission or entry into facility. Reassess with change in condition or as deemed necessary. Follow SANE policy if applicable.

## Triage Documentation

Document risk factors and observable signs/symptoms in electronic medical record (EMR). Document additional information, including wounds, injuries, and patient statements.

## Referral

For patient exhibiting risk factors or sign/symptoms of HT: Activate "Security Alert - Human Trafficking"  
For patients exhibiting risk factors or signs/symptoms of abuse, neglect or exploitation, follow existing policy and notify MD and Social Services.

## Security Alert: Human Trafficking

Utilize PEARR Tool: Provide Privacy, Educate, Ask, Respect and Respond. Notify Dream Free 24/7 @ 800-286-4184. Provide education on abuse, neglect or exploitation, including contact information for hotlines. Ask if patient requires assistance.

## Report Safety Concerns

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# HUMAN TRAFFICKING - CODE DOVE ACTIVATION - PEARR

- |   |            |           |
|---|------------|-----------|
| <b>1. P - Provide Privacy: Were you able to speak with patient in private</b> | <b>Yes</b> | <b>No</b> |
| <hr/>   |            |           |
| <b>2. E - Educate: Were you able to educate the patient</b>                   | <b>Yes</b> | <b>No</b> |
| <hr/>   |            |           |
| <b>3. A - Ask: Did the patient share any concerns with you</b>                | <b>Yes</b> | <b>No</b> |
- a. If unable to provide privacy, do not proceed
  - b. Notify DreamFree 24/7 at 800-286-4184
- 
- a. Educate patient, “I educate all of my patients about their right to safety because violence is so common in our society, and violence has a big impact on our health, safety, and well-being.”
  - b. Make conversation - build trust - educate patients that we are always available to help and we are a safe place. Educate that the discharge instructions will be phone numbers for safety: elder abuse, domestic violence, human trafficking (take the time to explain what labor and sex trafficking look like), and suicide hotlines.
- 
- a. Allow time for discussion
    - i. “I’ve noticed .... And I’m concerned for your health, safety, and well-being. You don’t have to share details with me, but I’d like to connect you with resources if you’re in need of help. Would you like to speak with someone (social services/case management, DreamFree). If not, you can let me know anytime.”
  - b. Limit questions to only those needed to determine patient safety and connect with resources. You can inadvertently trigger re-traumatization and feelings of vulnerability, shame, feeling frightened, and/or attached.
  - c. The goal is to build trust and rapport to assess their needs.

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# HUMAN TRAFFICKING - CODE DOVE ACTIVATION - PEARR

4. R-R - Respect & Respond: Did the patient accept/request assistance accessing services Yes    No
- a. If patient denies or declines assistance - respect their wishes
  - b. If patient accepts assistance, Respond and provide the ability to call the hotline:
    - i. NJ HT hotline, 855-363-6545 (855-END-NJ-HT)
    - ii. National HT hotline, 888-373-7888
    - iii. Dream Free 24/7 hotline, 800-286-4184
  - c. If the patient is willing to cooperate with Law Enforcement
    - i. Bergen County Prosecutor's Office
      - 1. Office hours are 9 am-10 pm; contact BCPO directly at 201-226-5620 to be connected with a member of the BCPO Special Victims Unit
      - 2. Outside office hours, contact the Public Safety Operation Center at 201-785-8500. The on-call Detective will then contact us.

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# DOMESTIC AND INTERPERSONAL VIOLENCE

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# ENHANCED COMMUNITY PARTNERSHIPS TO ADDRESS SEXUAL ASSAULT & DOMESTIC VIOLENCE

- Alignment with New Jersey Attorney General statewide SART Initiatives
- Partnership with 180 Turning Lives Around across service counties
- Engagement with multiple county specific Sexual Assault Response Teams (SART)
- Engagement across County Domestic Violence Response Teams
- Engagement with multiple county Family Justice Centers

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[www.nj.gov/oag/end-sexual-assault](http://www.nj.gov/oag/end-sexual-assault)

Supporting Victims of Sexual Assault

Understanding the Services Available  
to Sexual Assault Victims in New Jersey



# HUMAN TRAFFICKING DOCUMENTATION AND DATA MANAGEMENT

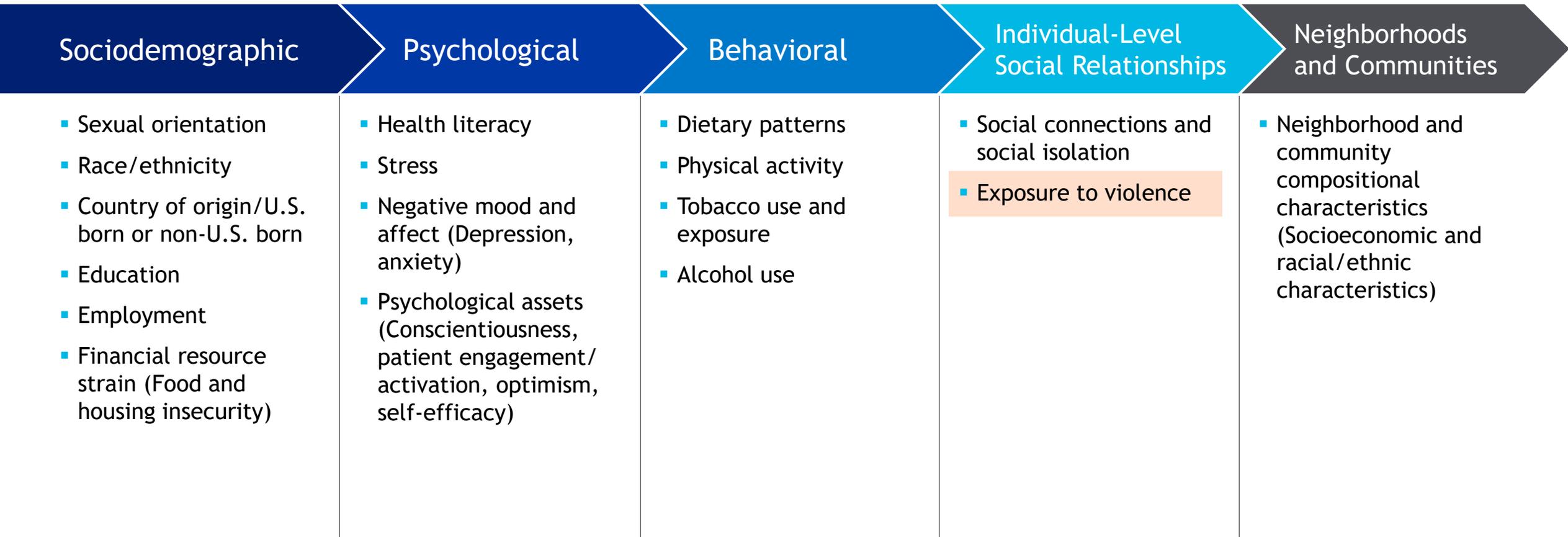
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# CANDIDATE SET OF DOMAINS FOR CONSIDERATION FOR THE INCLUSION IN ALL ELECTRONIC HEALTH RECORDS



Committee on the Recommended Social and Behavioral Domains and Measures for Electronic Health Records; Board on Population Health and Public Health Practice; Institute of Medicine. Washington (DC): National Academies Press (US); 2014 Jun 23. <https://www.ncbi.nlm.nih.gov/books/NBK222128/>

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# 2026 SDOH SCREENING: NEW DOMAINS

**♥ Social Drivers of Health**

-  **Tobacco Use**  
Not on file
-  **Food Insecurity**  
Mar 20, 2026: Food Insecurity Present
-  **Physical Activity**  
Mar 20, 2026: Sufficiently Active
-  **Social Connections**  
Mar 20, 2026: Unknown
-  **Depression**  
Not on file
-  **Alcohol Use**  
Not on file
-  **Health Literacy**  
Mar 20, 2026: Adequate Health Literacy
-  **Financial Resource Strain**  
Mar 20, 2026: High Risk
-  **Transportation Needs**  
Mar 20, 2026: No Transportation Needs
-  **Stress**  
Mar 20, 2026: No Stress Concern Present
-  **Intimate Partner Violence**  
Not on file
-  **Housing Stability**  
Mar 20, 2026: Low Risk
-  **Utilities**  
Mar 20, 2026: Not At Risk

# INTERPERSONAL SAFETY/DOMESTIC VIOLENCE

Because violence and abuse happens to a lot of people and affects their health we are asking the following questions.

- Never (1)
- Fairly often (4)
- Rarely (2)
- Frequently (5)
- Sometimes (3)

- How often does anyone, including family and friends, physically hurt you?
- How often does anyone, including family and friends, insult or talk down to you?
- How often does anyone, including family and friends, threaten you with harm?
- How often does anyone, including family and friends, scream or curse at you?

A score of 11 or more when the numerical values for answers to [the four questions] are added shows that the person might not be safe.

## Interoperability Standards/Meaningful Use



### Description

This component displays the Adult Inpatient Social Drivers of Health Screening and Positivity measures as defined in CMS Inpatient Prospective Payment System FY 2023 Final Rule.

Social Drivers of Health: Adult Inpatient			
	2022	2023	YTD
Social Drivers Screening Rate	0/28,913	0/30,694	0/1,533
Food Insecurity Positivity Rate	0/0	0/0	0/0
Housing Instability Positivity Rate	0/0	0/0	0/0
Interpersonal Safety Positivity Rate	0/0	0/0	0/0
Transportation Needs Positivity Rate	0/0	0/0	0/0
Utility Difficulties Positivity Rate	0/0	0/0	0/0

## Human Trafficking Screen



Responsible Create Note Macro Manager ▾

Show Row Info  Show Last Filed Value  Show Details  Show All Choices

### Human Trafficking Screening Tool (ask only if the patient is alone and trafficking is suspected)



Have you ever been tricked/trapped in an unwanted job or situation?

<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="Declined to answer"/>	<input type="button" value="Don't know"/>	
------------------------------------	-----------------------------------	---	---	--

Sometimes lies are used to trick people into accepting a job that doesn't exist, and they get trapped in a job or situation they never wanted. Have you ever experienced this, or are you in a situation where you think this could happen?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

Have you ever been forced to do something to repay a personal debt?

<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="Declined to answer"/>	<input type="button" value="Don't know"/>	
------------------------------------	-----------------------------------	---	---	--

Sometimes people make efforts to repay a person who provided them with transportation, a place to stay, money, or something else they needed. The person they owe money to may require them to do things if they have difficulty paying because of the debt. Have you ever experienced this, or are you in a situation where you think this could happen?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

Have you ever stayed in a dangerous situation to protect someone?

<input type="button" value="Yes"/>	<input type="button" value="No"/>	<input type="button" value="Declined to answer"/>	<input type="button" value="Don't know"/>	
------------------------------------	-----------------------------------	---	---	--

Sometimes people do unfair, unsafe, or even dangerous work or stay in dangerous situations because if they don't, someone might hurt them or someone they love. Have you ever experienced this, or are you in a situation where you think this could happen?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

### Have you ever been denied possession of your own ID by someone else?

Yes	No	Declined to answer	Don't know	
-----	----	--------------------	------------	---

Sometimes people are not allowed to keep or hold on to their own identification or travel documents. Have you ever experienced this, or are you in a situation where you think this could happen?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

### Have you ever had someone prevent you from contacting family, friends, or traveling?

Yes	No	Declined to answer	Don't know	
-----	----	--------------------	------------	---

Sometimes people work for someone or spend time with someone who does not let them contact their family, spend time with their friends, or go where they want when they want. Have you ever experienced this, or are you in a situation where you think this could happen?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

### Have you ever been forced to live at work or somewhere dictated by a person in charge?

Yes	No	Declined to answer	Don't know	
-----	----	--------------------	------------	---

Sometimes people live where they work or where the person in charge tells them to live, and they're not allowed to live elsewhere. Have you ever experienced this, or are you in a situation where you think this could happen?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

### Have you ever been forced to lie about the work you do?

Yes	No	Declined to answer	Don't know	
-----	----	--------------------	------------	--

Sometimes people are told to lie about their situation, including the kind of work they do. Has anyone ever told you to lie about the kind of work you're doing or will be doing?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

### Have you ever been forced or threatened to make money for someone else?

Yes	No	Declined to answer	Don't know	
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Sometimes people are hurt or threatened, or threats are made to their family or loved ones, or they are forced to do things they do not want to do in order to make money for someone else or to pay off a debt to them. Have you ever experienced this, or are you in a situation where you think this could happen?

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

### Risk for Human Trafficking

If the client/patient answered YES to any of the questions, this may indicate a risk for current, former, or future trafficking. If you feel this individual is at risk, or is being trafficked, discuss referral options, including possibly reporting to the appropriate authorities trained on human trafficking. Ask, "do you want additional resources or information?" For assistance with referrals or other resources, please contact the National Human Trafficking Hotline: 1-888-373-7888, 24/7 (200 languages).

Human Trafficking Screening Tool, U.S. Department of Health and Human Services, National Human Trafficking Training & Technical Assistance Center, January 2018.

### Is Human Trafficking Current?

Yes	No		
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 Restore	 Close	 Cancel
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 Previous	 Next
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## Is Human Trafficking Current?

Yes

No



### PEARR TOOL



#### Privacy and confidentiality discussed with the patient?

Yes



##### Provide Privacy

Discuss sensitive topics alone and in a safe, private setting.

1. Explain limits of confidentiality (i.e. mandated reporting) without discouraging patients from disclosing victimization.
2. "I'd like to ask you some questions about your health and safety. These are questions I ask many patients because safety is so important to our health. These questions are personal and if you don't want to answer them you don't have to; or you can answer some questions and not others. Based on your answers, I may offer referrals to specific resources; it is always your choice to accept or refuse a referral. There will be no judgement and I will support you in whatever you decide."
3. "Any information you share with me today will stay between you, me, and your providers, unless you give me permission to share it with someone else."

"However, if you tell me something that leads me to believe that a child has been abused or neglected, by law, I must report that."

"If you tell me about plans to kill yourself or someone else, I may need to share that information with others for your safety or the safety of someone else."

"Do you have any questions before I go on?"



## Was patient given educational materials/ resources?

Yes

Declined educational materials/ resources



Educate patient in manner that is nonjudgmental and normalizes sharing of information.

Example:

"I educate all of my patients about [fill in the blank] because violence is so common in our society, and violence has a big impact on our health, safety, and well-being."

Use a brochure or safety card to review information about abuse, neglect, or violence, and offer brochure/card to patient. [Ideally, this brochure/card will include information about resources (e.g., local service providers, national hotlines)]

For Safety Concerns (to be confirmed)

National Human Trafficking Hotline: 888-373-7888

NJ Human Trafficking Hotline: 855-363-6548 (855-END-NJ-HT)

Dream Free 24/7 hotline, 800-286-4184

## Does the patient have safety concerns?

Yes

No



Limit questions to only those needed to determine patient's safety, to connect patient with resources (trained victim advocate) and to guide your work.

Do you feel like anyone is treating you in a way that negatively affects your health, safety, or well-being? "Is there anything you'd like to share with me?"

IF physical indicators:

"I've noticed [Insert indicator here, e.g. bruises, etc.] and I'm concerned for your health, safety, and well-being. You don't have to share details with me, but I'd like to connect you with resources if you're in need of assistance.

National Human Trafficking Hotline: 888-373-7888

NJ Human Trafficking Hotline: 855-363-6548 (855-END-NJ-HT)

Dream Free 24/7 hotline, 800-286-4184

### Does the patient accept assistance?



Always ask: "Would you like to speak with an advocate from the Dream Free? If not now, you can let me know at any time."

As per the NJ Human Trafficking Task Force, NJ Division of Criminal Justice, Office of Attorney General:  
For direct Victim Support & Services – call 24/7 Dream Free Hotline 800-286-4184.

Activate a Code Dove if not already completed.

A representative will arrive from Dream Free will be arriving at the ED, delay discharge if possible.  
National Human Trafficking Hotline: 888-373-7888  
NJ Human Trafficking Hotline: 855-363-6548 (855-END-NJ-HT)  
Dream Free 24/7 hotline, 800-286-4184

### Documentation:

Please use this row (not in progress notes) to document any additional information regarding this encounter.

 Restore

 Close

 Cancel

 Previous

 Next

# SUSPECTED HUMAN TRAFFICKING RESPONSE

## Quick Training

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Meridian Health

# WHEN A PATIENT IS IN FRONT OF YOU

## SUSPICION OF TRAFFICKING

- Escalate to the care team for placement.
- Build trust and rapport.
- Treat patients for all medical conditions as per routine care for a patient (wounds, injuries, sexual assault, labor, etc.).
- Secure privacy and place the patient alone. If you cannot is unable to speak to the patient in private, do not proceed.
- Limit questions to those in the human trafficking flowsheet clarifying to determine if this is a current situation.



All patients are assessed for risk factors and observable signs or symptoms of potential human trafficking in accordance with mandatory annual education.

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# SECURITY ALERT - “HUMAN TRAFFICKING”

## HOW TO ACTIVATE THE EVERBRIDGE SECURITY ALERT

- Activate Everbridge Alert “Security Alert - Human Trafficking” upon positive screening for current human trafficking
- Care team will notify the operator to activate Security Alert - Human Trafficking
- Security Alert - Human Trafficking will not be an overhead page
- During case management business hours, Case Management will respond
- During non business case management hours, the Care team will implement the PEARR tool.



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# THE PATIENT DECIDES WHAT HAPPENS

- If the patient does not choose to make a report and decides to return to previous living arrangements, resources are provided and patient is discharged
- If the patient chooses to disclose trafficking and wants to make a report, a call to the appropriate agency is made by the team member with the patient.
- If the patient does not wish to return to their trafficker, the patient is not discharged and case management will work with the patient to find alternate placement.



## 60%

of survivors reported visiting a hospital or emergency room at least once during their captivity, with many presenting with injuries, infections, or drug-related issues.

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# HUMAN TRAFFICKING EDUCATION

## Long Form Training

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Meridian Health

# HUMAN TRAFFICKING

## Description

This learning activity provides an overview of human trafficking. The learning activity discusses the two broad types of human trafficking and identifies who is at risk for being trafficked. Also discussed is how to report trafficking, how society at large is affected by human trafficking, and how the health care community is positioned to intercede on behalf of the victims. Lastly, resources are identified to assist victims of trafficking.

## Objectives/Outcomes

- After completing this learning activity, the learner will be able to:
- differentiate the two broad types of human trafficking.
- implement hospital procedure
- identify how to report trafficking.
- discuss resources for victims.

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# INDIVIDUAL RISK FACTOR

Anything that makes an individual vulnerable and therefore easy to exploit is an individual risk factor.

Some examples include:<sup>2,9,12</sup>

- female gender
- young age
- living in poverty
- family dysfunction
- isolation
- lack of personal safety, or understanding how to be safe
- individual's mental health
- developmental delay or disability
- substance addiction
- lack of self-esteem or emotional distress
- runaway youth
- children in foster care
- LGBTQI+ youth
- history of sexual abuse.



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# TRAFFICKING CATEGORIES

The most commonly publicized form of human trafficking is sex trafficking. It is important to understand the types of human trafficking in order to identify victims, provide resources and support, and combat this crime. The Polaris Project has identified over 25 different types of human trafficking, which fall into these two broad categories: labor trafficking and sex trafficking.<sup>6</sup> It is important to remember that a victim may experience multiple types of trafficking at any given time.

Other specific types of trafficking that also occur are baby and organ trafficking, as well as recruitment or use of child soldiers.<sup>2</sup>

## Human Trafficking



Child abduction



Human cage



Forced prostitution



Forced labor



Forced marriage



Organ theft



Selling baby



Forced child beggar



Trafficking boat

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# FORCE, FRAUD, AND COERCION

Force, fraud, and/or coercion are used to bring victims into a life of servitude and abuse.

- Force is any type of confinement, beatings/abuse, use of constraints/restraints, or rape.
- Fraud is any false or deceptive means used to gain someone's trust or compliance; examples include offers of employment, marriage, or a better life.
- Coercion is any plan, pattern, or lie to cause victims to believe that they must do something or perform an act. Examples include threats of:<sup>2,3,5</sup>
  - physical attack or restraint
  - abuse of the legal process
  - harm to a loved one
  - public shaming.



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# BABY TRAFFICKING

Baby trafficking occurs when a baby or toddler is sold, or a pregnant person is trafficked with the intent to sell the infant. This type of trafficking is usually performed for the purpose of illegal adoption. Baby trafficking can affect the health care system if the baby was forcibly removed from the pregnant woman. Forced delivery, whether operative or vaginal, can lead to both the mother and baby arriving at a health care facility because of injury or illness. In some situations, the mother dies of her injury.<sup>2,5,9</sup>



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# PHYSICAL AND PSYCHOLOGICAL BARRIERS

There are physical and psychological reasons individuals who are trafficked cannot or will not leave their abuser.

Some of these reasons include:<sup>7,14</sup>

- captivity or confinement
- use or threat of violence
- shame
- self-blame
- debt bondage
- language and social barriers
- traumatic bonding to trafficker
- false promises
- lack of awareness of available resources
- becoming accustomed to the abuse.



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# IDENTIFYING VICTIMS IN THE HEALTH CARE SETTING

Human trafficking victims are a commodity for the traffickers. It may only be when the victim begins to provide less profit for the trafficker that the trafficker seeks medical care for the victim.

Because of poor working conditions and a general lack of health care, human trafficking victims typically enter the health care system only when intervention is necessary for a life-threatening condition. Health care workers are on the front lines of victim identification and thus begin the process of transitioning the human trafficking victim to human trafficking survivor.<sup>2,5,9,13-16</sup>



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# CLINICAL AREAS THAT SEE VICTIMS

The most common area visited by trafficked victims is the emergency department. Other clinical areas commonly utilized by trafficking victims in the United States are family planning clinics, urgent care centers, primary care clinics, community health centers, local health departments, and private practice offices.<sup>12-16</sup>

Maternity units are also clinical areas



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# APPENDIX

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# HUMAN TRAFFICKING AND HEALTHCARE



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# HUMAN TRAFFICKING AND HEALTHCARE



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