

**Trafficking Services Policies and Procedures**

**Purpose**

It is not possible for a single agency or organization to respond comprehensively to the crisis of sex trafficking of minors. This multidisciplinary task force is a collaboration between Nashville Children’s Alliance (NCA) and Davis House Child Advocacy Center (DHCAC) as well as other community partners and is designed to enhance the current array of CAC services to embrace and meet the needs of victims of human trafficking and child pornography. This task force is charged with implementing the tactical integration of filling gaps in currently offered community services, funding mechanisms, training, and service implementation.

**Core Value**

We are committed to a victim centered response in combatting human trafficking and child sexual abuse images.

**Intake Protocols**

* + All referrals, triages, and admissions should be called into coordinator at 615-790-5900, ext. 106. Upon receival of referral, points of contact will collaborate to determine what services are needed.
  + Once notification has been made, on call staff will be notified by coordinator. Staff will respond to CAC as needed as determined by intake process.
  + When child arrives to CAC, personal belongings will be placed in a secure location.
  + Child should be accompanied by DCS and LE and both parties should stay present during the entirety of the child’s stay.
  + Advocate will work with client to provide assessment of basic needs.
  + Coordinator will ensure that team meeting is conducted to share as much information with team members as needed to continue with services.
  + Coordinator will work with team to ensure medical needs of child are addressed.
  + Once deemed appropriate as evidenced by a Mental Status Exam a forensic interview can be conducted.
  + After time of arrival, DCS will have 24–48-hour time allotment that the child can remain in CAC care before placement.
  + At time of discharge, CAC advocate and project coordinator will work with team to ensure appropriate referrals and continued care is provided including connecting with End Slavery TN to provide ongoing resources.
  + Child will be discharged with basic hygiene basket and be provided with other immediate assistance needs.

**Agency Roles**

LE responsibilities

* Law Enforcement entities are responsible for notifying task force when a potential domestic minor trafficking victim has been identified.
* Law Enforcement will then coordinate with CAC staff for services requested.
* Law Enforcement must remain present for the interview and for the entirety of the child’s stay at the center.

DCS responsibilities

* DCS is responsible for responding to the appropriate scene after notification by Law Enforcement.
* DCS is responsible for placement of child and has 24 hours from arrival at CAC to make accommodations for child.

CAC Staff responsibilities

* + CAC staff are responsible for providing a safe environment for the investigation to continue.
  + CAC staff will be equipped to provide crisis intervention, trauma informed care, respite care, and forensic interview services.
  + CAC staff will work with DCS to connect child to long term services.
  + CAC staff will stay in communication with End Slavery for coordination of care
  + CAC staff can continue to remain as a support and advocate for the child in conjunction with End Slavery Staff. The following steps will be taken.
    - Regular attendance of all care coordination meetings.
    - ROI documentation for any agencies not involved in the CPIT team for ethical and efficient documentation.

**Safety Planning and Protocols**

* When the child arrives at the CAC all personal items will be placed in a secure location.
* CAC staff will partner with local law enforcement to have a presence at CAC when necessary. Coordinator will call appropriate parties when this is needed.
* DCS will remain present with the child to ensure safety and support.
* CAC will partner with local law enforcement to provide security and surveillance at CAC when needed.

**Crisis Intervention**

* If a child reports suicidal ideations of wanting to harm themselves or others, a trained provider on site will utilize the Columbia-Suicide Severity Rating Scale to determine risks.
* Provider will communicate with the team if a higher level of care is needed for the child upon discharge of the facility.

**After Hours Planning**

* CAC staff will be on call rotating every two weeks. Appropriate staff members will be notified and given instructions on when to arrive at the CAC.
* On call staff will encompass both CAC direct service teams
* On call staff personal will arrive to open CAC and address immediate needs.
* On call staff will debrief with appropriate members of team following the discharge of each client.

**Resource Supplies**

* A resource supply closet will be kept at DHCAC and NCA. This will include clothing and toiletry items.
* CAC will also have access to funds for food, and other immediate needs resources upon requests.
* Partners can notify project coordinator for these needs at 615-790-5900, ext.106