

## APPENDIX E: DRAFT PROTOCOL FOR SCREENING AND REFERRING MINOR VICTIMS

### **Step 1: Screening**

- Screening should be conducted for any youth who raise concern about being victim of trafficking or who provider/agent thinks may be potential victim of sex or labor trafficking based on red flags or basic questions outlined in this protocol. Youth should be asked the full list of screening questions from the proposed child trafficking screening tool.
- Attention to screening for human trafficking should be part of the regular processes of police, victim service providers, health care workers, and school officials.
- Screening questions should be asked in a conversational style and not read as part of a checklist.
- Screener should identify any language or cognitive barriers to screening. Trained third party translators should be used where appropriate for screening.
- Explanation should be provided to child in advance of asking questions that the screening is being conducted because the interviewer is worried that the child may not be safe. The child should be warned that the interviewee cannot promise that the child won't get in trouble or that all information can be kept confidential but the intent of the screening is to help keep them safe. Explain that questions are not intended to identify immigration status issues. Law enforcement should be provided specific guidance that the screening is not an interview.
  - Need to address issue of confidential communication of human trafficking caseworker as defined in the statute. Not clear that this caseworker is exempt from mandatory reporting requirements.
- Screener should ensure the safety of victims before he/she leaves. Screener should determine if any immediate safety planning, medical or mental health needs exist.

### **Step 2: Reporting potential victimization**

- If the provider or agent suspects a child may be a victim of labor or sex trafficking he or she should file a suspected child abuse report (51A)<sup>65</sup> with DCF.
- At a minimum any child involved in commercial sexual exploitation or trafficking or who has exchanged sex for money, shelter, food or drugs should be reported to DCF.
- A human trafficking case coordinator in the county should be notified about the 51A<sup>66</sup> report.  
*(note: this requires the group recommending the development of such a coordinator in each county, maybe associated with the DA's office, might be a child abuse specialist or separate person designated to all human trafficking)*

### **Step 3: DCF review and referral**

- DCF will review each 51A<sup>67</sup> report and make an immediate referral to the DA when human trafficking is suspected.

### **Step 4: DA referral and reporting**

- The DA will receive referral from DCF electronically, or by other means, and conduct a review.
- The DA referral will also be sent electronically to the human trafficking case coordinator in the county.

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65 Mass. Gen. Laws ch. 119 § 51A.

66 *Id.*

67 *Id.*

### **Step 5: Notification to and action of multi-disciplinary team**

- Legislation specifies the multi-disciplinary team to respond to sexually exploited children should include *“professionals trained or otherwise experienced and qualified to assess the needs of sexually exploited children or children who are otherwise human trafficking victims including, but not limited to, a police officer, as defined by section 1 of chapter 90C, or other person designated by a police chief, as defined in said section 1 of said chapter 90C, an employee of the department of children and families, a representative of the appropriate district attorney, a social service provider, a medical professional or a mental health professional.”*
- The human trafficking case coordinator (or DA’s office) will contact key members of a multi-disciplinary team established in each county to respond to human trafficking of minors.
- The multi-disciplinary team will conference to share information that they have about the victim’s involvement in or risk for human trafficking and establish if any other agencies have contact with the minor victim.
- The team will develop a plan of action for the victim based on their immediate and long term needs including a formal assessment, possible investigation, and where, needed assistance with housing, mental health services, medical services, legal advocacy, safety planning and education.