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Implementing Sex Trafficking Screening and Management Protocol at UPMC Children's Hospital of Pittsburgh Emergency Department

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As a fulltime Pediatric Nurse Practitioner at the Child Advocacy Center at UPMC Children's Hospital of Pittsburgh (CHP) I perform the majority of the outpatient sexual assault and abuse evaluations for pediatric patients within our hospital system. In this role I screen for and respond to concerns of sex trafficking. As the clinic is only daylight weekday hours, there are many patients that first present to the CHP Emergency Department (ED) for examinations related to sexual assault or with concerns that may reflect high risk for sex trafficking. To ensure the highest level of care, myself and a Physician Assistant from the CHP ED implemented a screening protocol for the triage process, an EMR pop-up form for the provider, and recommendations for follow-up based on patient age and identified level of risk or red flags for sex trafficking. The project included providing education to both clinic and non-clinical staff who work in the ED to help better identify individuals who are at risk for sex trafficking.

National Human Trafficking Hotline statistics show a 25 percent jump in human trafficking cases from 2017 to 2018. One study interviewed ninety-eight human trafficking survivors and found that 87.8% of them had encountered a health care professional during their time being trafficked with 63.3% of them being seen in an emergency department (Lederer & Wetzel, 2014). The number of sex trafficked patients presenting to UPMC Children's Hospital of Pittsburgh's ED is difficult to measure, but by implementing the sex trafficking protocol the goal is better identification, management, and follow-up of sex trafficked persons and high-risk patients presenting to our ED.

1. As part of the initial nursing triage, nurse to look/observe for the following red flags:
 - a. Patient presents with an accompanying "friend" or "family member" who is unwilling to leave patient and/or answer questions for the patient
 - b. Patient is a runaway, homeless, or not currently enrolled in school
 - c. Patient presents requesting sexually transmitted infection testing or pregnancy test
 - d. Adolescent patients who present with Children and Youth Services for physical exam
 - e. Patient presents for substance use, intentional overdose, or suicidal ideations
2. If any red flags are identified a traffic cone icon is populated in the ED "Patient Care" field on the ED tracking list through answering the question, "Is there concern for sex trafficking?" with YES.



3. Once medical concerns have been addressed the following will be addressed through a PowerForm pop-up:
 - a. ED Provider should complete a brief chart review. If the following are present, refer to PCP or Adolescent Medicine:
 - i. Frequent history UTIs or STIs
 - ii. Frequent concerns regarding sexual health
 - iii. Vague injuries/frequent ED visits
 - b. Focused assessment should be completed by ED Provider by asking the following privately (**bolded answer indicates positive screening**):
 - i. How many sexual partners have you had and when was the last time you were sexually active? (**5 or more means positive result**) Have you ever had sex with someone you just met, didn't know their name, or was much older than you? (**yes**)
 - ii. Has anyone done anything to you that makes you feel hurt or scared? (**yes**)
 - iii. Have you ever done anything or thought of intentionally hurt yourself? If so, what caused you to feel that way? (**living situation, forced to do things they don't like**)
 - iv. Have you ever been asked to trade sexual acts for food, money, shelter, or drugs? (**yes**)
 - v. Is there anything you are not allowed to share with me because you are afraid you will get in trouble? (**yes**)
 - c. Upon completion of focused assessment:
 - i. Focused assessment is negative and provider has no concerns
 1. No additional intervention
 - ii. Focused assessment is negative, but still have provider concerns
 1. For patient under 18
 - a. Contact Social Work and file ChildLine clearly voicing concerns
 - b. Leave a message on Child Advocacy Center (CAC) "Safe Line" to arrange follow-up
 - c. Consider contacting Human Trafficking Hotline (1-888-373-7888)
 - d. Obtain dirty urine sample to send for Gonorrhea, Chlamydia, and Trichomonas
 2. For patient 18 or over
 - a. Provide resources
 - b. Consider contacting Human Trafficking Hotline (1-888-373-7888)
 - c. Offer dirty urine sample to send for Gonorrhea, Chlamydia, and Trichomonas
 - d. Offer blood work (HIV, syphilis serology, RPR, Hepatitis B and C)
 - iii. Focused assessment is positive and patient under the age of 18
 1. Contact Social work to File a ChildLine
 2. Speak with CAC physician on call
 3. Contact Human Trafficking Hotline (1-888-373-7888)

4. Figure out safety plan per Children and Youth Services caseworker (may need to admit for social reasons)
 - a. Review Human Trafficking Referral Flowchart for additional resources
 5. Obtain dirty urine sample to send for Gonorrhea, Chlamydia, and Trichomonas
 6. Obtain blood work (HIV, syphilis serology, RPR, Hepatitis B and C)
- iv. Focused assessment is positive and patient age 18 or older
1. Determine if there is life-threatening danger. If yes, report to law enforcement immediately
 2. Consult Social Work
 3. Provide with Human Trafficking Hotline number (1-888-373-7888). If patient is reluctant to take the number either have them memorize it or enter the number into their phone under an alias
 4. Provide resources (Human Trafficking Referral Flowchart)
 5. Offer dirty urine sample to send for Gonorrhea, Chlamydia, and Trichomonas
 6. Offer blood work (HIV, syphilis serology, RPR, Hepatitis B and C)
4. Additional resources
- a. CHP CSEC Protocol Flowsheet
 - b. Allegheny County Sex Trafficking Referral Flowchart for Medical Providers, URLs, phone numbers to give patient
 - c. PowerPlan used for Sexual Assault provides access to all needed labs associated with Sex Trafficking

Partial list of references used for protocol development:

Human trafficking awareness in the emergency care setting. Retrieved December 15, 2021, from http://preview.ena.org/docs/default-source/resource-library/practice-resources/position-statements/humantraffickingpatientawareness.pdf?sfvrsn=cd0ad835_28

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