



State of Florida
Department of Children and Families

Rick Scott
Governor

Mike Carroll
Secretary

DATE: January 12, 2016

TO: Regional Managing Directors
Community-Based Care Lead Agencies
Sheriff's Offices conducting child protective investigations
Regional Family and Community Services Directors
DCF CBC Contract Managers

THROUGH: David Fairbanks, Deputy Secretary
Vicki Abrams, Assistant Secretary for Operations
Janice Thomas, Assistant Secretary for Child Welfare
Traci Leavine, Child Welfare Practice Director
Elisa Cramer, Community Services Manager

FROM: Kimberly Grabert, Human Trafficking Prevention Director

SUBJECT: Human Trafficking Screening Tool (HTST) and Level of Human Trafficking Placement Tool

PURPOSE: This memorandum outlines the statutorily required screening and assessment tools that have been developed for the identification and assessment of needs for the sexually exploited child.

BACKGROUND: Section 409.1754, Florida Statutes, created by the Legislature during the 2014 legislative session, cites administrative requirements for serving child victims of sexual exploitation.

The law requires the development or adoption of instruments for the identification, placement and assessment of needs for the sexually exploited child. Section 407.1754, Florida Statutes, says in part:

(1) **SCREENING AND ASSESSMENT.—**

(a) The department shall develop or adopt one or more initial screening and assessment instruments to identify, determine the needs of, plan services for, and determine the appropriate placement for sexually exploited children. The department shall consult state and local agencies, organizations, and individuals involved in the identification and care of sexually exploited children when developing or adopting initial screening and assessment instruments. Initial screening and assessment instruments shall assess the appropriate placement of a sexually exploited child, including whether

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~~placement in a safe house or safe foster home is appropriate, and shall consider, at a minimum, the following factors:~~

1. Risk of the child running away.
2. Risk of the child recruiting other children into the commercial sex trade.
3. Level of the child's attachment to his or her exploiter.
4. Level and type of trauma that the child has endured.
5. Nature of the child's interactions with law enforcement.
6. Length of time that the child was sexually exploited.
7. Extent of any substance abuse by the child.

(b) The initial screening and assessment instruments shall be validated, if possible, and must be used by the department, juvenile assessment centers as provided in s. 985.135, and community-based care lead agencies.

(c) The department shall adopt rules that specify the initial screening and assessment instruments to be used and provide requirements for their use and for the reporting of data collected through their use.

With statewide input and after two public hearings, the human trafficking rule, Chapter 65C-43, Florida Administrative Code, was adopted January 12, 2016.

As required in statute and rule, the following tools have been developed: Human Trafficking Screening Tool and Level of Human Trafficking Placement Tool.

Human Trafficking Screening Tool (HTST)

The Human Trafficking Screening Tool (HTST) was developed through a 23-member workgroup, co-facilitated by the Department of Children and Families (DCF) and the Department of Juvenile Justice (DJJ). The HTST is a common tool to be utilized by DJJ Juvenile Assessment Center (JAC) Assessors, by the Department of Children and Families' specially trained Child Protective Investigators, the Sheriff's Offices' Child Protective Investigators and Community-Based Care Lead Agency staff or their contracted providers as outlined below.

Department of Children and Families

The following indicators will trigger Child Protective Investigators (CPI) to conduct the HTST with a child or victim listed in their report. Only staff who have completed the Specialized Human Trafficking Training may complete the tool. A non-specialized CPI who recognizes any of the below indicators on a child or victim in an investigation is to request a specialized CPI to administer the screening tool.

Community-Based Care Lead Agencies

When a child on a dependency case managers' caseload has any of the following indicators, the case manager will refer the child to the community-based care lead agency's designated specialized screener(s) to conduct the HTST. If a dependent child already has a current designation in FSFN as confirmed CSEC-involved on the person

~~management page, the HTST does not need to be utilized on that child (CSEC = commercial sexual exploitation of children).~~

Human trafficking may be suspected for a number of reasons. The HTST is to be used by specially trained child protective investigators or case managers when any of the following indicators are present:

- Youth's acknowledgement of being trafficked.
- Report of human trafficking by parent/guardian, law enforcement, medical or service provider, teacher, child protective services, and/or juvenile probation officer.
- History of running away or getting kicked out 4+ times.
(Definition of running away or getting kicked out of home: Include times the youth did not voluntarily return within 24 hours, and include incidents not reported by or to law enforcement.)
- Child is 12 or older and has a history of allegations of sexual abuse (with or without findings) or a disclosure of sexual abuse by the child.
- Current incident or history of inappropriate sexual behaviors (not limited to prostitution).
- Child known to associate with confirmed or suspected CSEC youth.
- Child is recovered from runaway episode in a hotel or known area of prostitution.
- Child has no knowledge about the community he/she is located in.
- Child is not allowed or unable to speak for him/herself and may be extremely fearful.
- Child has no personal items or possessions (including identity documents if foreign born).
- Child appears to have material items that he or she cannot afford (e.g., cell phones, expensive clothing, tablets, etc.).
- Child shows signs of being groomed (e.g., hair done, nails done, new clothing, etc. that child cannot afford or justify how paid for).
- Suspicious tattoos or other signs of branding (e.g., tattoos of the trafficker's names, dollar signs, etc.).

Level of Human Trafficking Placement Tool

The Level of Human Trafficking Placement Tool was developed with the leadership of Dr. Leslie Gavin, clinical psychologist at Nemours Children's Hospital in Orlando, and a statewide work group co-facilitated between the Department of Children and Families and the Department of Juvenile Justice. The Level of Human Trafficking Placement Tool is a tool that can be utilized in the multi-disciplinary staffing process to assess the array of potential interventions and placements for the victim of sexual exploitation. This

~~range of intervention and placement options includes the full continuum of treatment~~
from community-level interventions within the child's existing home through dependency options of relative care, traditional foster care, group care, specialized therapeutic foster care, safe foster home, safe house, residential group setting, and locked residential mental health placement, requiring a suitability assessment.

The tool is designed to ensure the following five domains are considered and discussed in determining the appropriate level of placement. The five domains explore the child's risk of running, risk of placement disruption, motivation to engage in treatment, the level of familial and community support available to the child, and if the child needs to be outside of his/her resident county for safety. The discussion through these five domains should explore the potential for safe house placement and the possible benefits of, as well as barriers to, such a placement. In addition, it encourages the team to assess a full array of services and placement options for the child.

The Department must report annually to the Legislature the number of assessments completed and the outcome of the assessments, specifically if a safe foster home or safe (group) home was selected for placement, and if not, why not. The Screening, Placement and Services for Sexually Exploited Children and Young Adults Reporting Checklist is attached for collecting the information that must be reported to the Department monthly with an annual tally for reporting to the Legislature as required in section 39.524, F.S. The checklist was incorporated into Chapter 65C-43, F.A.C. Utilization of the Level of Human Trafficking Placement Tool should assist the community-based care organization with collection of the data for the annual legislative report.

Decisions for placement should be made on a case-by-case basis, based on the specific needs of the child being evaluated. There should not be a presumption that a safe foster home or safe house is the appropriate placement in every situation for a child who has been the victim of sexual exploitation. As community out-patient, in-home treatment options expand, the opportunity for less restrictive interventions can be explored.

ACTION REQUIRED: Please share this memorandum and the attachments as appropriate with your child protective and case management staff. If you are in need of additional trainings for staff in the area of human trafficking or use of the HTST or Level of Human Trafficking Placement Tool, please contact your Regional Human Trafficking Coordinator to schedule time. The Regional Human Trafficking Coordinators are:

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With the adoption of Chapter 65C-43, F.A.C., the Human Trafficking Screening Tool should be used statewide, as directed by section 409.1754, F.S.

All staff who utilize the Human Trafficking Screening Tool must have completed the six-hour Specialized Human Trafficking Training and be up to date on quarterly additional human trafficking training as referenced in the Training Requirements for Specialized Human Trafficking Designation Memo dated July 22, 2014 and in Chapter 65C-43, F.A.C.

ATTACHMENTS

Human Trafficking Screening Tool Administration Guide
Level of Human Trafficking Placement Tool
Screening, Placement and Services for Sexually Exploited Children and Young Adults
Reporting Checklist

cc: JoShonda Guerrier, Director of Child Welfare Strategic Projects
Ginger Griffeth, Director of Child Welfare Performance and Quality Management
Patricia Badland, Director of Child Welfare Operations
Center for Child Welfare

Human Trafficking Screening Tool (HTST) Instructions

This guide¹ is designed to help child welfare and delinquency professionals screen for possible youth victims of human trafficking. The tool, in its entirety, should be used by the Department of Children and Families' Child Protective Investigators, the Sheriff's Offices Child Protective Investigators and Community-Based Care Lead Agency staff or their contracted providers as outlined below. Human trafficking may be suspected for a number of reasons.

Department of Children and Families

The following indicators will trigger Child Protective Investigators (CPI) to conduct the HTST with a child or victim listed in their report. Only staff who have completed the Specialized Human Trafficking training may complete the tool. A non-specialized CPI who recognizes any of the below indicators on a child or victim in an investigation is to request a specialized CPI to administer the screening tool. If the child is a current confirmed victim of human trafficking (within 6 months) and a new intake is received, the HTST does not need to be administered on that child unless needed to enhance the investigation.

Community-Based Care Lead Agencies

When a child on a Family Case Manager's (FCM) caseload has any of the following indicators, the FCM will refer the child to the Community-Based Care Lead Agency's designated specialized screener to conduct the HTST. If a dependent child already has a current designation in FSN as confirmed commercially sexually exploited child (CSEC) involved on the person management page, the HTST does not need to be utilized on that child.

Indicators:

- Youth's acknowledgement of being trafficked.
- Report of human trafficking by parent/guardian, law enforcement, medical or service provider, teacher, child protective services, and/or juvenile probation officer.
- History of running away or getting kicked out 4+ times.
(Definition of running away or getting kicked out of home: Include times the youth did not voluntarily return within 24 hours, and include incidents not reported by or to law enforcement.)
- Child is 12 or older and has a history of allegations of sexual abuse (with or without findings) or a disclosure of sexual abuse by the child.
- Current incident or history of inappropriate sexual behaviors (not limited to prostitution).
- Child known to associate with confirmed or suspected CSEC youth.
- Child is recovered from runaway episode in a hotel or known area of prostitution.
- Child has no knowledge about the community he/she is located in.
- Child is not allowed or unable to speak for him/herself and may be extremely fearful.
- Child has no personal items or possessions (including identity documents if foreign born - labor trafficking.)
- Child appears to have material items that he or she cannot afford (e.g. cell phones, expensive clothing, tablets, etc.)
- Child shows signs of being groomed (i.e. hair done, nails done, new clothing, etc. that child cannot afford or justify how paid for.)

¹ The contents of this guide and the screening tool were informed by the research and reporting of the Vera Institute (2014) *Screening for Human Trafficking: Guidelines for Administering the Trafficking Victim Identification Tool (TVIT)*, the Polaris Project (see www.PolarisProject.org), and the Covenant House (2013) *Human Trafficking Interview and Assessment Measure*.

- Suspicious tattoos or other signs of branding (e.g. tattoos of the trafficker's names, dollar signs, diamonds, stars, etc. May also have certain designs/logos on nails, jewelry, etc.)
- Child associates and/or has relationships with age-inappropriate friends, boyfriends, and/or girlfriends.
- Child has inappropriate, sexually suggestive activity on social media websites and/or chat apps.

To ensure that the tool is administered effectively, all screeners should follow the screening protocol set forth in this guide. It is important for screeners to understand that questions designed to screen for human trafficking are invasive by nature and may reveal that a youth is suffering from the effects of exposure to trauma. As such, screeners must take care to create a safe environment in which they establish rapport and trust with the youth. Additionally, screeners should be prepared to call upon therapeutic and legal staff in responding to the needs of trafficking victims.

Youth may be reluctant to respond due to a lack of trust, fear of consequences related to disclosure, and/or not viewing themselves as a victim. Strengths-based, non-judgmental, and trauma-informed approaches should be used to engage youth in a conversation to secure answers to the questions within the tool, rather than reading items verbatim. Motivational interviewing techniques may also be used to gently question inconsistencies and encourage disclosure. The guidelines that follow provide instruction for following the screening protocol for administering the HTST and should be adhered to each time a screening is conducted.

HTST Screening Protocol

Screening Preparation

The screening should be conducted in a safe and non-threatening environment. Screeners should be well-prepared, should be comfortable working with victims of trauma, and should recognize the need to ask questions in an appropriate manner that is sensitive to the needs of youth. The following guidelines should be followed when preparing to conduct a HTST screening:

- ➡ Read through the entire screening tool and this Administration Guide, so that you are familiar with the tool and able to conduct the screening in a conversational style, allowing the youth to direct the flow of discussion.
- ➡ Conduct the screening in a private, quiet environment designed to make the youth feel physically comfortable and safe.
- ➡ Be prepared to provide the youth with basic needs, such as an interpreter, tissues, drink, food, clothing, medical or therapeutic care, and/or access to services, as appropriate.
- ➡ If an interpreter is necessary, he/she should be trustworthy (unknown to the youth being interviewed) and able to use the same wording as the screener when asking questions and the same wording as the youth when answering questions. Use of an agency or certified interpreter is required (per DCF Operating Procedure 60-10, Chapter 3, in compliance with the laws governing ADA and Section 504 of the Rehabilitation Act.)
- ➡ Do not interview a youth in front of a suspected trafficker or individual who is exhibiting controlling behavior over the youth. Do not allow this person to interpret for the youth if he/she does not speak fluent English.

- ➡ Recognize that dressing in uniforms, suits, or other formal attire may cause youth to fear that you are with immigration services or other enforcement agencies.
- ➡ Use strengths-based and trauma-informed care approaches during the screening, allowing youth to lead the direction of the conversation.
- ➡ The screening process may need to take place over multiple contact points if the screener judges that the youth needs more time. The screener may postpone the discussion to a later time when the youth is ready to discuss his/her experiences. When a youth displays acute signs of anxiety, the screener should consider contacting a trained mental health professional to complete a session with the youth.

The screening tool contains a number of techniques used to help screeners administer the tool properly. Screeners should be familiar with these techniques which include the following:

- ➡ Instructions to screeners are provided in the HTST in *italics* throughout the tool. These instructions guide screeners to sub-questions that may need to be asked, sections that require information to be filled in, and questions that include prompts for further explanation.
- ➡ Introductory comments and questions to youth are in **bold typeface**. Introductory comments should be read to the youth. Screeners should use a conversational approach to secure answers to the HTST questions, being sensitive to the needs of youth who may be suffering from the effects of exposure to trauma.
- ➡ Sections A, B, H, and I are preceded with the instruction – *(DO NOT READ TO YOUTH)* – these sections are intended to be completed by the screener and not asked of the youth.
- ➡ Please use the lines provided within the tool to record youth's responses to open-ended questions or any additional information that has been disclosed to you that is specific to your determination of the child's involvement.
- ➡ At the end of selected questions, you will see this symbol ➡ which asks that screeners code for the likelihood that the youth's responses suggest any evidence of the problem targeted by the preceding item(s). An example is provided below:

➡ Evidence of Unsafe Living Environment: *(Check one)* Yes_____ No_____

Item-by-Item Guide for Administering the Tool

Section A is to be completed by the screener and not asked of the youth.

Section A – Background Information

(DO NOT READ TO YOUTH)

1. Date of Screening: ____ / ____ / ____ (MM/DD/YYYY)
2. Location of screening: _____
3. Screener Name: _____
4. Reason for Screening: *(Check all that apply)*
 - ☐ Youth's acknowledgement of being trafficked.
 - ☐ Report of human trafficking by parent/guardian, law enforcement, medical or service provider, teacher, child protective services, and/or juvenile probation officer.
 - ☐ History of running away four or more times, or getting kicked out. *(Definition of running away or getting kicked out of home: Include times the youth did not voluntarily return within 24 hours, and include incidents not reported by or to law enforcement.)*
 - ☐ Child is 12 or older and has a history of allegations of sexual abuse (with or without findings) or a disclosure of sexual abuse by the child.
 - ☐ Current incident or history of inappropriate sexual behaviors (not limited to prostitution.)
 - ☐ Child known to associate with confirmed or suspected CSEC youth.
 - ☐ Child is recovered from runaway episode in a hotel or known area of prostitution.
 - ☐ Child has no knowledge about the community he/she is located in.
 - ☐ Child is not allowed or unable to speak for him/herself and may be extremely fearful.
 - ☐ Child has no personal items or possessions (including identity documents if foreign born - labor trafficking.)
 - ☐ Child appears to have material items that he or she cannot afford (e.g. cell phones, expensive clothing, tablets, etc.)
 - ☐ Child shows signs of being groomed (i.e. hair done, nails done, new clothing, etc. that child cannot afford or justify how paid for.)
 - ☐ Suspicious tattoos or other signs of branding (e.g. tattoos of the trafficker's names, dollar signs, diamonds, stars, etc. May also have certain designs/logos on nails, jewelry, etc.)
 - ☐ Child associates and/or has relationships with age-inappropriate friends, boyfriends, and/or girlfriends.
 - ☐ Child has inappropriate, sexually suggestive activity on social media websites and/or chat apps.
5. Mode of Screening:
 - ☐ Interview completed without need for an interpreter.
 - ☐ Interview completed with the assistance of a certified interpreter.
 - ☐ Interpreter needed, but unavailable

Section B is to be completed by the screener and not asked of the youth.

Section B – Demographic Information

(DO NOT READ TO YOUTH)

6. Youth's Name: _____
7. FSFN Child ID # _____
8. Intake # _____
9. DCF FSFN case ID # _____
10. SSN (last four digits): _____
11. Sex: _____
12. Race/Ethnicity: _____
13. Preferred Language: _____

Begin the screening by reading the following introductory comments to the youth:

This is an interview to better understand your current situation and experiences. I will be asking you questions about yourself. Try to be as honest as you can. This might be a difficult conversation. You do not have to answer anything you don't want to answer. You can take a break at any time, ask to finish at a later time, or stop the session. I want you to know that you can trust me and that your safety is my priority. The only individuals who will have access to the information you provide are professionals who are working to help you. Before we get started, do you have any questions?

Section C – Youth Personal Background

I'd like to begin with some general questions about you and your personal background.

14. **What is your date of birth?** ____ / ____ / ____ (MM/DD/YYYY)
 - 14a. *(If youth does not know, ask):* **Approximately how old are you?** _____
15. **Where were you born?** _____
16. **What city do you currently live in?** _____
 - 16a. *(DO NOT READ TO YOUTH)* **Was youth arrested outside the city in which he/she resides?**

☐ No

- ☐ Yes

17. Do you go to school?

- ☐ No *(If 'no,' skip to Item 18)*
- ☐ Yes *(If 'yes,' proceed to Item 17a below)*
- ☐ Refused to answer

17a. **Where do you go to school?** *(Fill in. If school entered, ask item 17b)*

17b. **How many days have you attended school in the last two weeks?**

- ☐ 0 days
- ☐ 1-5 days
- ☐ 6-10 days
- ☐ Not applicable/school not in session

Section D – Living Conditions

Next, I'd like to talk to you about where you live and the people you live with.

18. So, tell me about your current living situation. What type of place do you live in?

(Screener may prompt the youth by listing examples from below) (Check all that apply)

- ☐ House
- ☐ Apartment
- ☐ Group/foster home
- ☐ Car/van
- ☐ Shelter
- ☐ Rehabilitation facility
- ☐ Hotel or motel
- ☐ Part of a residence – garage, basement, shed
- ☐ Squat
- ☐ Traveling/in-between residences
- ☐ Homeless
- ☐ Refused to answer
- ☐ Other *(Fill in)* _____

19. Who lives with you? *(Check all that apply)*

- ☐ Father
- ☐ Mother
- ☐ Both parents
- ☐ Guardian

- ☐ Step-parent
- ☐ Relative(s)
- ☐ Friend(s)
- ☐ Romantic partner (girlfriend/boyfriend)
- ☐ By myself
- ☐ Refused to answer
- ☐ Other *(Fill in)* _____

20. Do you pay for where you live?

- ☐ No *(If 'no,' skip to Item 26)*
- ☐ Yes *(If 'yes,' ask Item 25a below)*

20a. How do you pay for where you live? *(Check all that apply)*

- ☐ Parents/relatives
- ☐ Friends
- ☐ Romantic partner
- ☐ Myself through employment/job
- ☐ Myself through selling drugs
- ☐ Myself through stealing
- ☐ Myself through engaging in sexual acts for money/material gain
- ☐ Panhandle/beg
- ☐ Refused to answer
- ☐ Other *(Fill in)* _____

21. Have you ever had any contacts or visits from the Department of Children and Families?

(Note, youth may use other terminology including HRS, CPS, CBC, and/or The State)

- ☐ No
- ☐ Yes
- ☐ Refused to answer

➞ **Evidence of Unsafe Living Environment:** *(Check one)* Yes _____ No _____

Section E – Work Information

Now, I'd like to ask you some questions about work situations. What I mean by "work" is anything you have done where you have received something of value, like money, food, clothing, a place to stay, drugs, or gifts, in exchange for your efforts. This could include a more typical job like working at a fast-food restaurant or store, but may also include things that some kids have to do to survive when away from their homes, anything where you were given something of value for your efforts. So, your boss may have been a typical employer or may have been a family member, friend, boyfriend or girlfriend, or someone you lived with or had a relationship with.

22. So, do you have a job or did you have one before coming here?

- ☐ No *(If 'no,' skip to Item 35)*
- ☐ Yes *(If 'yes,' continue to Item 23 below)*

23. What type of work do you do? *(Check all that apply)*

- ☐ Agricultural/farm work
- ☐ Housekeeping/janitorial work
- ☐ Door-to-door sales
- ☐ Restaurant work
- ☐ Construction
- ☐ Retail
- ☐ Nails/hair
- ☐ Massage
- ☐ Personal dancing, stripping, or similar activity
- ☐ Refused to answer
- ☐ Other *(Fill in)* _____

24. How much money do you make an hour? *(Screener may ask relative to the minimum wage rate)*

- ☐ Below minimum wage *(Minimum wage is \$8.05/hour in Florida)*
- ☐ At or above minimum wage but less than \$15 an hour
- ☐ \$15-\$25 an hour
- ☐ More than \$25 an hour
- ☐ Does not know
- ☐ Refused to answer

25. Does your boss or supervisor owe you money?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

26. Do any of your family members owe your boss money?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

Screener may prompt for something else that is owed like a favor, house, property, or land

27. Have you ever worked or done something for your boss without getting the payment that you thought you would get?

- ☐ No *(If 'no,' skip to Item 33)*
- ☐ Yes *(If 'yes,' ask Item 32a through Item 32c below)*

- ☐ Refused to answer

27a. What kind of work was it? _____

27b. What payment did you expect? _____

27c. What did you receive? _____

➞ **Evidence of Deceptive Payment Practices:** *(Check one)* Yes _____ No _____

28. Do you live and work at the same place?

- ☐ No
☐ Yes
☐ Refused to answer

29. Can you quit or could you have quit your job at any time without punishment from your boss or supervisor?

- ☐ No
☐ Yes
☐ Refused to answer

➞ **Evidence of Forced Labor:** *(Check one)* Yes _____ No _____

30. So, do you currently have a boyfriend or girlfriend?

- ☐ No *(If 'no,' skip to Item 21)*
☐ Yes *(If 'yes,' ask Item 20a and Item 20b below)*
☐ Refused to answer

30a. How old is he/she?

- ☐ Less than 10 years old
☐ 10 to 15 years old
☐ 16 to 17 years old
☐ 18 to 21 years old
☐ 22 years or older
☐ Refused to answer

30b. How did you meet?

- ☐ Through a friend
☐ At school
☐ Through a family member
☐ Online (Facebook, Internet, game console)

- ☐ Public place (mall, movies, sports event)
- ☐ Work
- ☐ Other *(Fill in)* _____
- ☐ Refused to answer

32. Do you get on the Internet, Wi-Fi, or use phone or tablet apps?

- ☐ No *(If 'no,' skip to Item 19)*
- ☐ Yes *(If 'yes,' ask Item 18a below)*
- ☐ Refused to answer

32a. What kind of sites or apps do you use? *(Check all that apply)*

- ☐ Twitter
- ☐ Instagram
- ☐ Snapchat
- ☐ Online game chat
- ☐ Instant messaging
- ☐ Facebook
- ☐ Tinder
- ☐ Craigslist
- ☐ Backpage
- ☐ Other apps or sites *(fill in)* _____
- ☐ Refused to answer

33. Have you ever agreed to meet someone you met online or through the Internet or through a phone app?

- ☐ No
- ☐ Yes *(If 'yes,' prompt by saying, Tell me more about that.)*
- ☐ Refused to answer

 Evidence of Unsafe Online Activity: *(Check one)* Yes _____ No _____

34. Do you have any tattoos?

- ☐ No *(If 'no,' skip to Item 22)*
- ☐ Yes *(If 'yes,' ask Item 21a through Item 21c below)*
- ☐ Refused to answer or responded no, but staff observed tattoos *(If selected, ask items 21a through 21c below)*

34a. What is the tattoo(s)? *(Screener may respond to this item based on youth response and/or based on observation of the tattoo.) (Check all that apply.)*

- ☐ Dollar/currency sign, money bags
- ☐ Star/hearts
- ☐ Male name
- ☐ Female name
- ☐ Nickname or street name
- ☐ Refused to answer
- ☐ Other *(Describe)* _____

34b. What does your tattoo(s) mean? *(Check all that apply)*

- ☐ Family connection
- ☐ Personal meaning *(Fill in)* _____
- ☐ Romantic partner's name
- ☐ Gang-related
- ☐ Suspected trafficker's name/initials
- ☐ Forced branding/ownership
- ☐ No meaning
- ☐ Don't know the meaning
- ☐ Refused to answer
- ☐ Other *(Fill in)* _____

34c. Who was with you when you got your tattoo(s)? *(Check all that apply)*

- ☐ Family member
- ☐ Friend
- ☐ Romantic partner
- ☐ No one
- ☐ Suspected trafficker
- ☐ Gang member
- ☐ Refused to answer
- ☐ Other *(Fill in)* _____

35. Do you have any scars or brands that were made intentionally, not from an accident or injury? *(Screener should respond based upon youth answer and/or observation of visible scars)*

- ☐ No *(If 'no,' skip to Item 23)*
- ☐ Yes *(If 'yes,' ask Item 22a)*
- ☐ Refused to answer
- ☐ Screener observes mark(s), but youth denies mark(s) made intentionally

35a. Who was with you when you got your brand(s) or when you received the scar?*(Check all that apply)*

- ☐ Family member
- ☐ Friend
- ☐ Romantic partner
- ☐ No one
- ☐ Suspected trafficker
- ☐ Gang member
- ☐ Refused to answer
- ☐ Other *(Fill in)* _____

➔ **Evidence of Forced Tattooing/Branding:** *(Check one)* Yes _____ No _____

Section F – Leaving or Running Away from Home

I'd like for you to think about the past 12 months and times when you have been away from home.

36. Have you run away, stayed away, or left your home without permission in the past year?

- ☐ No *(If 'no,' skip to Item 37)*
- ☐ Yes *(If 'yes,' ask Items 36a through 36k below)*
- ☐ Refused to answer

36a. How many times have you run away or left without permission?

- ☐ 1 to 5 times
- ☐ 6 to 10 times
- ☐ 11 to 20 times
- ☐ More than 20 times
- ☐ Refused to answer

36b. How long were you gone the last time you left home?

- ☐ 1 to 6 days
- ☐ 1 to 4 weeks
- ☐ 2 to 3 months
- ☐ 4 months or longer
- ☐ Refused to answer



Evidence of Excessive Running Away: (*Check one*) Yes _____ No _____

36c. **Where did you go when you left?** (*Check all that apply*)

- ☐ Friend's place
- ☐ Relative's place/other biological parent's place
- ☐ Romantic partner's place
- ☐ Motel/hotel
- ☐ Street
- ☐ Out of town
- ☐ Pro-social adult's place
- ☐ Anti-social adult's place
- ☐ Street gang
- ☐ Refused to answer

36d. **While you were away, how did you support yourself?** (*Check all that apply*)

- ☐ Family/relatives took care of me
- ☐ Friend(s) took care of me
- ☐ Romantic partner helped
- ☐ Worked (legal employment/jobs)
- ☐ Money through drugs
- ☐ Money/material gain/favors from prostitution, stripping or similar activities
- ☐ Didn't stay away long enough to need support
- ☐ Stealing
- ☐ Government assistance
- ☐ Panhandling
- ☐ Borrowed money from friends
- ☐ Trafficker/pimp
- ☐ Refused to answer
- ☐ Other (*Fill in*) _____

36e. **While you were away, were you in control of your own money?**

- ☐ No
- ☐ Yes
- ☐ Refused to answer

36f. **Who were you with while you were away?** (*Check all that apply*)

- ☐ No one
- ☐ Friends
- ☐ Romantic partner
- ☐ Suspected trafficker/pimp

- ☐ Guardian
- ☐ Family/relatives
- ☐ Street gang
- ☐ Refused to answer

36g. **Did that person(s) ever give you things like money, drugs or clothes?**

- ☐ No
- ☐ Yes
- ☐ Refused to answer

➞ Evidence of Questionable Support While Away: (Check one) Yes_____ No_____

36h. **Did you leave town while you were away from home?**

- ☐ No
- ☐ Yes
- ☐ Refused to answer

36i. **While you were away, did anyone you were with not allow you to go back home?**

- ☐ No
- ☐ Yes
- ☐ Refused to answer

➞ Evidence of Coercion to Stay on the Run: (Check one) Yes_____ No_____

Sometimes, people find themselves in situations where they feel unsafe, threatened, controlled or even tricked into doing something they didn't want to do. I am going to ask you a few questions about things that might have made you feel unsafe, threatened, controlled or tricked into doing something you didn't want to do.

36j. **While you were away, did you experience anything that made you uncomfortable?**

- ☐ No
- ☐ Yes; if so, what? (Fill in) _____
- ☐ Refused to answer

36k. **Sometimes, young people who are away from home can be taken advantage of and asked to do sexual activities in exchange for something of value. These activities can include dancing, stripping, posing for photos, or sex of any kind. While you were away, did anyone ever ask you to do something like that?**

- ☐ No
- ☐ Yes

☐ Refused to answer

➞ Evidence of Sexual Activities for Money, Support or Gifts: (*Check one*) Yes_____ No_____

37. Have you or someone else received something of value like money, a place to stay, food, clothes, gifts, favors, or drugs in exchange for you performing a sexual activity?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

➞ Evidence of Compensation for Sexual Activity: (*Check one*) Yes_____ No_____

Section G – Sexual Exploitation/Coercion/Control

38. In thinking about your past experiences, has anyone ever locked doors or windows or anything else to stop you from leaving work or home?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

➞ Evidence of Inability to Leave: (*Check one*) Yes_____ No_____

39. Has anyone ever forced you to get or use false identification, like a fake ID or fake green card?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

➞ Evidence of Forced Identity Deception: (*Check one*) Yes_____ No_____

40. Has anyone ever pressured you to touch someone physically or sexually when you didn't want to?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

41. Has anyone ever asked/made you do anything sexually that you didn't want to do?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

42. Has anyone in your home ever done anything sexually to you that you didn't want?

- ☐ No
- ☐ Yes
- ☐ Refused to answer

➞ **Evidence of Sexual Exploitation:** *(Check one)* Yes _____ No _____

When you think about the future, what do you want to do when you get older? *(Fill in)* _____

Screener, close out the interview by saying the following to the youth:

I want to thank you for being open with me and answering these questions. Do you have any questions, or is there anything that you would like to talk about?

Section H – Parent/Guardian Information

(DO NOT READ TO YOUTH)

Section H is to be completed by the screener.

43. Did you speak with the child's parent(s) or guardian(s)?

- ☐ No
- ☐ Yes (If yes, to whom did you speak? _____)

If yes, then ask parent/guardian items 44-47.

44. Does the parent/guardian report that youth has a cell phone that a third party/trafficker pays for or might be paying for?

- ☐ No
- ☐ Yes

45. Does the parent/guardian report that youth returns home from running away with hair/nails done, new clothing or money that were not provided by the parent/guardian?

- ☐ No
- ☐ Yes

46. Does parent/guardian report that youth has internet postings or text/cell phone messages that indicate youth may be exchanging sex for something of value to him/her?

- ☐ No
- ☐ Yes

47. If youth has a tattoo of someone else's name, does guardian verify this person is who youth says the person is?

- ☐ No
- ☐ Yes

➔ Evidence of Potential Trafficking: *(Check one)* Yes _____ No _____

Section I – Post-Screening Assessment

(DO NOT READ TO YOUTH)

Section I is to be completed by the screener.

48. Did you observe any nonverbal indicators of past victimization? *(If so, explain)* _____

49. Did you observe any indicators that the youth's responses may have been false? *(If so, explain)* _____

50. Indicate the likelihood that the youth is a victim of trafficking:

- ☐ Definitely not
- ☐ Likely not
- ☐ Not sure
- ☐ Likely is
- ☐ Definitely is

51. Provide at least three reasons for your answer in Item 50:

1. _____
2. _____
3. _____

If you answered “not sure,” “likely is,” or “definitely is”:

For CBC staff - call the Florida Abuse Hotline at 1-800-962-2873 and schedule a Multidisciplinary Team (MDT) staffing as soon as possible or as is required by CFOP 175-14. If the child is a possible or confirmed CSEC victim, place the appropriate designation in FSN.

For DCF staff - schedule an MDT staffing as soon as possible or as is required by CFOP 175-14. Please add the appropriate human trafficking maltreatment code to your investigation, if not already included.

Reminder: If you have personal knowledge that the youth is a victim of human trafficking, you must call the Florida Abuse Hotline.

52. What kind of service referrals, if any, will you make for the youth? (You may include MDT service referrals.)

1. _____
2. _____
3. _____
4. _____
5. _____

Level of Human Trafficking Placement Tool

Age:

Gender:

Status: Community DCF DJJ Crossover

Is youth awaiting DJJ placement? Y N

Client insurance status:

This tool is designed for the user to consider domains that are pertinent to the disposition of human trafficking survivors, including but not limited to commercially sexually exploited youth.

Service options from least to most restrictive should be considered and are suggested in the following schematic. This is suggestive only.

Community/Family outpatient counseling	Community/Family intensive wrap around services	Traditional foster care	Specialized Therapeutic Foster Care CSEC Non CSEC	Group home, non CSEC	Safe House	Residential group care facility, not secured	Locked residential facility (Suitability assessment needed)

Domain 1: Will They Stay Put?

- Runaway History (with “running” defined as >8 hours, whereabouts unknown):
 - 0-1 Episodes
 - 2 Episodes
 - 3 Episodes
 - 4 and over episodes
- Foster Care History:
 - No prior foster care placement OR no disruptions in placement due to child’s behavior.
 - No disruptions in placement due to child’s behavior in last six months; Youth open to foster care option.
 - History of multiple failed foster placements; loss of placement due to child’s behavior in last six months.

3. Gang Involvement:
 - 1- No active gang involvement.
 - 2- Suspected affiliation with gang, but no clear signs (tattoos, branding, clothing); no evidence of familial gang involvement.
 - 3- Evidence of familial involvement in gang, but youth denies involvement.
 - 4- Active gang involvement.
4. Pimp Involvement:
 - 1- No close pimp involvement.
 - 2- Associated with pimp but denies emotional attachment.
 - 3- Close pimp involvement; Pimp looking for survivor; Survivor highly attached to pimp, describes pimp as boyfriend; deep bonds with exploiter.
5. Drug Involvement:
 - 1- No, or minimal, drug and alcohol use.
 - 2- Occasional drug use.
 - 3- Regular drug use.
 - 4- Daily narcotic drug use with addiction.

Domain 2: Will They Disrupt?

6. Behavior Status:
 - 1- No daily behavioral outbursts
 - 2- Intermittent behavioral outbursts, can be deescalated
 - 3- Multiple daily behavioral incidents, needs strict individualized behavior plan with high need for consistent and frequent reinforcement and supervision
 - 4- Dangerous acting out; Possible restraint needed; history of fire setting and/or animal cruelty.
7. Psychiatric History:
 - 1- No previous psychiatric history, no medications
 - 2- Psychiatric diagnosis, no medication
 - 3- Psychiatric diagnosis, on psychotropic medication
 - 4- Psychiatric diagnosis, non compliant with psychotropic medication.
8. Danger to Self or Others:
 - 1- No thoughts of suicide or harming others, no history of gestures.

- 2- Passive suicidal thoughts; passive thoughts of hurting others.
- 3- Suicidal or homicidal thoughts, no gestures, no plan.
- 4- Actively suicidal or homicidal with gestures; aggressive, assaultive, threatening; actively recruiting peers to go to exploiter.

9. Recruiting:

- 1- **Client not a risk to recruit others into trafficking within the facility.**
- 2- **Client suspecting of recruiting others into trafficking in the past.**
- 3- **Client has a history of recruiting others, has been caught eloping with others out of a placement.**

Domain 3: Are They Ready?

10. Motivation to change:

- 1- **Maintenance:** Maintaining behavior change that is now integrated into the person's life.
- 2- **Action/Willpower:** Making the change and living the new behaviors.
- 3- **Preparation/Determination:** Taking steps and getting ready to change.
- 4- **Contemplation:** Acknowledging that there is a problem but struggling with ambivalence. Weighing pros and cons, and benefits and barriers to change.
- 5- **Pre-contemplation:** Avoidance. Not seeing a problem behavior, or not considering change.

11. Medical Stability:

- 1- No immediate medical concerns.
- 2- Neglected preventive medical issues requiring outpatient attention when possible.
- 3- Chronic medical conditions requiring outpatient care as soon as possible.
- 4- Acute medical illness or trauma requiring immediate medical care.

Domain 4: Is There School, Community, and Family Support?

12. Educational involvement:

- 1- History of consistent school involvement and attendance.
- 2- Consistent school attendance but poor grades/ test scores.
- 3- History of school failure, inconsistent attendance.
- 4- No school involvement, truant or has dropped out of school.

13. Family support:

- 1- Parent/caregiver involved, want child in home, willing to be actively involved in treatment.
- 2- Parent/caregiver involved, regular contact, moderate dysfunction, open to treatment.
- 3- Minimal caregiver involvement, low level of support, marked family dysfunction
- 4- No parental/caregiver figures involved, or family involved in criminal behavior.

14. Community Support:

- 1- The youth resides in neighborhood with high level of afterschool activities, job opportunities, and recreational choices.
- 2- The youth resides in neighborhood with moderate number of afterschool activities, job opportunities, and recreational choices.
- 3- The youth resides in neighborhood with low opportunity, few choices for recreational activities and jobs.

Domain 5: Placement Location Considerations

15. Legal:

- 1- There is no legal case pending.
- 2- There is a legal case pending and legal/law enforcement needs access to client.

16. Peer Cohort:

- 1- There are no peer issues for placement.
- 2- There are peers involved in the trafficking, and these peers cannot be placed in same setting; peers share exploiter or pimp.

17. Danger:

- 1- There is no consideration of danger in placement. Trafficker is not a threat for any reason.
- 2- Client has been threatened by exploiter, is in danger; exploiter is looking for client.

Other considerations (factors that must be considered in level and location of placement):

Placement decision and reasoning:



Screening, Placement and Services For Sexually Exploited Children and Young Adults Reporting Checklist

PART 1: To be completed for each child.

Child: _____ Date of Birth: _____ Gender: _____

1. Date Human Trafficking Screening Tool was administered		Date:
2. Screener's Name and Title		Name/Title:
3. Child was screened and verified as a sexually exploited victim	Yes/No	If yes, identify the child protective investigation findings (i.e., verified, not substantiated, no indicators).
4. Child was assessed for placement in a safe house or safe foster home	Yes/No	If yes, identify date and type of assessment (i.e., suitability assessment, CBHA, etc.): Identify type of placement if child was sheltered (i.e., relative, non-relative, traditional foster home, safe foster home, group home, safe house or specialized residential treatment facility): If child was not sheltered, identify placement arrangement (i.e., remained in the home with parent or other identified caregiver):
5. Child has a history of placement	Yes/No	If yes, how many placement disruptions?

disruptions		Date of last placement disruption:
6. Child was referred for specialized services	Yes/No	If yes, identify which service (i.e., inpatient/outpatient substance abuse or mental health services, educational/vocational services). Date of referral: Date of referral: Date of referral: Outcome of referral (i.e., child refused, child was on runaway, child actively participating):
7. Did the community-based care agency assume costs associated with specialized services?	Yes/No	If yes, identify cost per day and service: If other funding streams supported this placement, please identify (i.e., Medicaid, grants, etc.) and service (i.e., counseling):

Community-based care agency representative signature

Date

Region/Circuit

PART 2

Month: _____		Region/Circuit: _____	
Community-based Care Agency: _____			
1. Total number of children and young adults assessed using the Human Trafficking Screening Tool			
2. Total number of children and young adults determined to be victims of sexual exploitation			
3. Total number of children and young adults who were placed in a safe foster home or safe house			
4. Total number of children and young adults who were referred to a safe foster home or safe house, but placement was unavailable			
5. Total number of children and young adults that were not placed due to lack of funding or funding eligibility			
6. Total number of children and young adults who were not placed in a safe foster home or safe house due to lack of recommendation (i.e., suitability assessment, Comprehensive Behavioral Health Assessment, etc.)			
7. Total number of children and young adults who were not placed due to a runaway episode			
Total screened and served:			