Toolkit to Develop a Rapid Response Team

AUTHORED BY THE

Coalition Against Human Trafficking

identification • protection • prosecution • empowerment

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The North Carolina Coalition Against Human Trafficking (NCCAHT) is a group of professionals from multiple fields (including law enforcement, legal services, social services, policy, etc.) that works to raise awareness about human trafficking across North Carolina, support efforts to prosecute traffickers, and identify and assist victims. The Coalition was established in 2004 as a collaboration between the NC Attorney General's Office, the North Carolina Coalition Against Sexual Assault (NCCASA), the Pitt County Sheriff’s Office, and several other organizations.

Since its establishment, the Coalition has grown to include over 60 agencies. Part of this growth has also included the development of Rapid Response Teams (RRTs). Much like the more commonly known Sexual Assault Response Teams (SARTs), Rapid Response Teams are in place to assist victims of human trafficking for the first 24 to 72 hours after their identification as such. Our state’s Rapid Response Teams offer trauma-informed care through medical, mental, case management, and other services in a collaborative, multidisciplinary manner, making them some of the first of their kind in the nation.

This feat is certainly one we should be proud of, however our work is far from over. North Carolina ranks eighth in the nation for rates of human trafficking. Currently, we have nine Rapid Response Teams spanning 16 of North Carolina’s 100 counties. That leaves 84 counties without human trafficking-specific and trauma-informed measures in place to assist the victims that national statistics show us exist.

It is the goal of NCCAHT that, in using this Toolkit, you will be able to help bridge that gap. This Toolkit is the product of hours of research, meetings, and interagency correspondence and collaboration between professionals from across the state and even the country. The result is a collection of diverse perspectives, information, and tips to help you create a successful Rapid Response Team. In following this lead and collaborating with other agencies in your area, you will be able to multiply your potential and together offer the comprehensive services that your clients deserve.

Alexandra Lowrie
NCCAHT Coordinator
How to Read and Use this Toolkit:

It is important to note that while using this Toolkit, it may be most beneficial for your team to bounce around between Chapters; the order outlined may not work best for your stage of development or for your community type. While it’s encouraged to read the entire Toolkit before beginning the process of developing a Rapid Response Team or moving forward if you have already begun, we acknowledge that you know your community the best and we have simply provided a Checklist of suggested tasks towards the end of the Toolkit (Page 28) to help make sure you don’t forget something you hoped to accomplish. Additionally, Appendices with helpful information, resources, forms, and contact information have been included for your use.

CHAPTER 1

1. Roles and Responsibilities of a Rapid Response Team

Rapid Response Teams (RRTs) in North Carolina are multidisciplinary teams of a range of direct service agencies that assist in the first 24 to 72 hours of an identified victim of human trafficking’s recovery and rehabilitation process.

While an overlap between the common needs of human trafficking survivors and those of other crimes exist, there is a necessity in North Carolina for regional groups trained on and working with this specific group of persons. In this Toolkit, agencies with an interest in developing a Rapid Response Team in their community can learn how to determine the team’s jurisdiction, use existing available resources, reach out to potential partners, and even develop team protocol and goals, with the end result being an effective group of professionals that provide a quick and collaborative response to victims of human trafficking and further successful prosecutions of traffickers in North Carolina.

CHAPTER 2

2. Designating a Team Coordinator

While partial or full funding to hire a RRT Coordinator may not be fiscally possible, designating or electing a volunteer RRT Coordinator or Co-Coordinators to lead team meetings and ensure progress is suggested. Setting term limits and expectations is important to ensure accountability, the opportunity for fresh ideas and insight, and also that [Co-] Coordinators don’t suffer from burnout. The role can be both emotionally draining and also a significant time commitment. For this reason, most teams across the state have opted for one to two year terms, though [Co-] Coordinators can be granted permission to seek reelection if desired. Here are the general duties that a Rapid Response Team [Co-] Coordinator can
expect (note that this is not an exhaustive list, and that Coordinator duties may vary based on the structure of your team, location, resources, etc.):

- Initiating [Team involvement in] the creation of, voting upon, and revision of the Team Mission Statement, Case Protocol, and formal documents like Confidentiality Protocols, Consent to Release, Memorandums of Understanding, etc. (Sample forms may be found in Section 11f of this Toolkit)
- Creating the agenda for and facilitation of Team meetings
  - It may also be delegated to the Coordinator(s) to take notes and disseminate minutes to members; this may be difficult as they will be facilitating the meetings. If your team elects Co-Coordinators, the two can switch between facilitator or ‘Secretary’ every other meeting, each stick with one role, etc. Otherwise, it is suggested that the Team designate a Secretary (this can be an elected position or a volunteer(s)).
- Seeking members or outside agencies to hold trainings or presentations of their work at Team meetings (more on this in Section 8.ee)
- Serving as point person for the Team with regard to receiving (and maintaining) membership applications
- Making sure that membership applications are voted upon (and that results are given to the applying agency) in a timely manner, at the Team meeting immediately following the receipt of the application, if possible
- Ensuring contact information and the services offered for each member agency is consistently accurate, up-to-date, and disseminated to team members so as to ensure the most effective and appropriate referrals are made
- Acting as a liaison not only between member agencies, but between the Team and outside agencies, organizations, persons, and the media
- Taking responsibility for the Team phone, should the team opt for one
  - A Team phone allows for the dissemination of a single phone number that victims and agencies alike can call to reach the Team; using a single number is often helpful in advertising your Team to other agencies or places potential victims may see the number or information about the Team. For obvious reasons, a phone number that is not traceable to any member agency can be helpful in making victims feel comfortable reaching out if their trafficker is monitoring calls and/or texts.
  - Remember, NCCAHT is not a 501c3 organization and in turn cannot provide funds for the purchase or maintenance/bills of a team phone. Generally, if a Team decides a

HELPFUL TIP:
Free Google Numbers can be set to automatically transfer to another phone [number], allowing the responsibility to be shared or ‘passed around’ between Coordinators or team members. For more information on Google Numbers and how to acquire one, click [here](#).
phone is desired for guaranteed 24/7 communication, a member agency will donate said phone.

- Developing and maintaining a Team listserv
- Participating in the monthly statewide RRT Coordinator conference call, which lasts approximately one hour and offers Coordinators the opportunity to share team updates, ask other Coordinators for advice, share new resources, and alert Coordinators (and in turn, other RRTs) of upcoming trainings or events. Currently, the Coordinator conference calls are held from 1:00pm-2:00pm on the third Thursday of each month.

In general, the Coordinator(s) should work to facilitate a forward momentum, idea sharing, collaboration, continuing education, transparency, mindfulness, respect, and the most effective, appropriate, and timely response to victims.

CHAPTER 3

3. Define the RRT Jurisdiction

Rapid Response Team jurisdictions or coverage area can vary widely and correlate with prosecutorial districts, cities/urban areas, a county or counties, a larger geographical region (ex. Southwestern North Carolina), or other logical format that perhaps follows specific funding guidelines. Regardless of jurisdiction type, it is important to consider the specific problems or barriers to care victims may face in your jurisdiction; these, too, can vary greatly from one area of coverage to another.

For example, high levels of cases involving foreign labor trafficking in rural farm and factory-heavy regions of North Carolina may result in cultural or language barriers, while more urban areas might see higher rates of sex trafficking, and face issues with placing minors in appropriate housing.

After defining your team’s coverage area, brainstorm some of these anticipated challenges and, if a solution(s) isn’t immediately available, keep them in mind as projects to tackle once your team is fully functional. In the meantime, designate appropriate services for the interim, perhaps coordinating with another RRT nearby.

a. Available Resources

Funding:

Much like the varied challenges that Rapid Response Teams will face, there will also be disparities in the resources available to each team. NCCAHT Executive Committee Members, other RRT Coordinators, and the NCCAHT Coordinator (when applicable) are able to offer technical assistance, however they are currently unable to provide funding in the name of NCCAHT.
Ideally, not much outside funding, if any, will be needed for your RRT. If the right member agencies are at the table, then the victims that come into contact with your RRT will be ones that the individual agencies would take on as clients anyways; the RRT simply joins these agencies in a cohesive and collaborative manner to ensure the client receives the most appropriate and effective assistance.

In order for NCCAHT to be qualified to receive and distribute grant funds, the Coalition must demonstrate need. To do this, NCCAHT is working to identify a way to capture statistics of trafficking or indicia of trafficking on a statewide level. However, it would be helpful if teams consider the importance of local statistics for the interim and to track trends. The Case Log included in the Forms for Your Use section of the Appendices is a great tool for recording and keeping this data without compromising the safety of those served.

In the event that member agencies do not receive funding to support human trafficking victims specifically, look to see if funding is provided to them on an overlapping issue, for example to aid victims of domestic violence and/or sexual assault (or, even more broadly, interpersonal violence). Remember that it is likely many victims of human trafficking are also victims of one of the aforementioned crimes. Because human trafficking is a relatively ‘newly’ defined crime under State and Federal law, many funders have not caught up with terminology and trends. Identifying a client as a victim of domestic violence or sexual assault when it is present in their human trafficking case is still accurate if you are following the protocol of the funding source while providing assistance.

THE BIGGER PICTURE: Above are examples of factors that can predispose individuals to human trafficking and/or that victims are more likely to experience once trafficked.

If no funding— for specific types of victims or otherwise— is currently present, member agencies are encouraged to apply for funding in the name of a member agency. Community Outreach Teams (COTs, mentioned in 5.c.v. of this Toolkit) are also encouraged help in fundraising, and donate the proceeds toward the needs associated with the cost of victim care.
Service Provision and Case Investigation:

Particularly noted in more rural areas are the gaps in service provision (i.e. a lack of SANE nurses or bilingual case management). In these cases, it is suggested that the Rapid Response Teams coordinate with nearby RRTs to utilize other local agencies or receive technical assistance. Also, reaching out to national or more large-scale agencies may also be effective, for example in capturing, preserving, and analyzing electronic evidence or using telephone interpretation services to facilitate communication between clients and a monolingual case manager.

b. Service Area Considerations

 Traffickers prey on vulnerable populations. This can be due to age, nationality, sex/gender, sexual orientation, or a variety of other reasons. Your team is likely to encounter a victim for whom you will need to consider multijurisdictional protocol when providing assistance. Here are just a few examples:

- Your victim and/or trafficker are foreign, so you may need to work with law enforcement and other agencies in that country.
- Your victim was also previously trafficked in/ is from another state(s). Federal officials will then get involved, and direct service providers from the other state(s) may also want to, too.
- Your victim is a college student. It may be university policy for officials there to step in and provide assistance or guidance as well.

When developing your team-specific protocol, think of possible issues that are likely to arise and keep the following in mind\textsuperscript{15} (remembering this is not an exhaustive list):

- What are the privileged communications statutes in each jurisdiction?
- How will payment for medical and social services be handled when victims are transported to another state or area?
- What is the activation process for advocates and health care professionals when victims use inter-jurisdictional services? (ex. Native American victims using community-based and tribal services)
- What is the best way to update contact information for team members outside of my agency, especially when there is agency turnover?
- What interagency agreements are needed? (See Memorandum of Understanding in the Appendices)

HELPFUL TIP:
Outlook vcards give users a way to email multiple persons’ contact information with an overarching name (ex. Triangle RRT). When the email recipient opens and saves the vcard, it automatically syncs to his/her smartphone.
4. Assess Community Readiness

Before you develop your Rapid Response Team, it is important to gather some data (qualitative and quantitative both, preferably) so as to best understand your community, its needs, and your team’s role. In doing this, evaluate the following for your jurisdiction:

a. Perception of Human Trafficking

As advocates or service providers that work with victims of human trafficking, we know this issue exists in all parts of North Carolina. However, our lesser-educated counterparts may not be convinced. How widespread is the consensus that your team jurisdiction plays host to this crime? Has the language of the community surrounding the crime (ex. ‘Domestic Minor Sex Trafficking’ vs. ‘prostitution’, etc.) caught up to the laws and safe harbors protecting victims? If your answer to these and similar questions is ‘no,’ you may want to set a team goal of educating local law enforcement, health care professionals, schools, local foreign language press, and other direct service providers or agencies that are likely to make first contact with a victim. This will not only heighten education and awareness of the issue of human trafficking in your area, but may recruit new agencies to your team in the process. (See the Appendix titled ‘Training Your Core Agencies’ of this Toolkit for resources to train members of each core competency.)

b. Current Services or Resources for Victims

The desire to develop a Rapid Response Team speaks to a group of agencies in your area that provide services to victims of human trafficking. Brainstorm with your team all of the services that each agency will be able to provide; this will come in handy for interagency referrals. Another helpful tool is determining unmet needs. If your member agencies have client satisfaction surveys or measures of efficacy, what were some needs survivors identified as being unmet? Does/will your team provide services to Spanish-speaking or other non-English speaking populations? Are services present for LGBT victims, or persons with disabilities? Going back to the multijurisdictional concept, are plans in place to efficiently handle cases that cross jurisdictional boundaries? As you know your community best, try to rank the unmet needs on a scale of Most Important in Our Community to Least Important in Our Community; this helps in goal-setting once your team is established. Additionally, a list of questions that will help your team take an inventory of the coverage your team is capable of offering is included in the Appendices.
Identify Opportunities for Collaboration

To be successful, your Rapid Response Team needs to function as a machine: a system made up of many smaller moving parts that, together, perform a larger task. If even one small piece of your machine is missing, the entity as a whole may be dysfunctional. This speaks to the importance of collaboration in working with victims of human trafficking. As mentioned previously, there often exists much overlap between cases of human trafficking and crimes like domestic violence and sexual assault, among other crimes. Thinking outside the box when identifying possible avenues for collaboration with agencies will not only lead to a more successful team response, but might even make law enforcement and District Attorneys more aware of avenues that allow for a stronger prosecution, ultimately increasing the number of prosecuted traffickers. For example, one of the most famous Federal prosecutions involving farmworkers held in debt bondage in North Carolina involved allegations of violations of the Clean Water Act!

a. Find Partners

Direct service providers and other first responders are the natural first choice when reaching out to agencies. Below are a few examples of great core member agencies. (See Chapter 6 of the Toolkit for a description of the duties of most of the below sectors.)

- Case Managers/ Social Workers/ Victim Advocates
- Sexual Assault Nurse Examiners (SANEs) or other Medical Professionals
- District Attorneys/ Assistant District Attorneys
- Other Attorneys such as Immigration, Employment, and Domestic Violence Prevention
- Law Enforcement Officers (local, state, and federal)
- Mental Health Professionals
- Social Services
- Local rape crisis center
- Agencies that provides emergency shelter
- Migrant Education Coordinators serving rural counties
b. Integrate Community Services

The sustainability of your Rapid Response Team will depend on your ability to utilize and build upon the unique assets and talents of the agencies, coalitions, persons, and other parties in your jurisdiction. When building your team- effectively a multidisciplinary response- ask yourself questions like: Does our proposed model fit with other multidisciplinary or collaborative efforts to assist crime victims in my area? Does there exist outside organizational support from Sexual Assault, Domestic Violence, or other task forces/ multidisciplinary teams in my coverage area? Will this Rapid Response Team be filling a gap in service that exists in my area/jurisdiction?

i. Utilize existing multidisciplinary efforts

Partnering with other existing multidisciplinary groups will ensure that your team is aware of local resources for all types of victims; remember that overlapping vulnerabilities (as mentioned in Section 6b of this Toolkit) are common in victims of human trafficking, so being prepared for many different situations is smart. These groups would not be members of your team per se, but could be used in the case of referrals. Inviting members of these groups (and vice versa) to train each other of the commonalities of cases in their fields is encouraged (more on this in Section 8.e. of this Toolkit). Here are some example types of multidisciplinary teams, task forces, or support groups to which it may be helpful to reach out:

- Domestic Violence programs
- Sexual Assault/ Rape Crisis Centers and Sexual Assault Response Teams (SARTs)
- Child Abuse Programs/ Child Advocacy Centers (CACs)
- Incest Abuse Programs
- Elder Abuse Programs
- Family Justice Centers
- Programs for Foreign Victims of Crime
- Alcohol/Narcotic Dependency Programs
- PTSD or Trauma Survivor Groups
- Homelessness Programs
- Veteran’s organizations
- OSHA health and safety inspectors (North Carolina Department of Labor)
- Local Health Department
- Local office of US Department of Labor, Wage & Hour
- Local Equal Employment Opportunity Commission (EEOC) office
- Local Division of Workforce Solutions (the unemployment office)
- Telamon staff, in rural areas
- Refugee placement organizations
- Local workers’ center
c. **Overcome Common Barriers**

A common barrier to success among Rapid Response Teams in the planning stages is a reluctance of cooperation or participation among community members and agencies. This unwillingness can imply that your RRT model does not fit well with the community needs and/or its structure (think back to Chapter 3 in which Multijurisdictional Issues were discussed, and Chapter 4 that outlined the Perception of Human Trafficking in your area). For legitimacy, it would be helpful to seek endorsement from local or state officials like a district attorney, sheriff, city council member, etc.\(^\text{15}\) Another way to gain the community’s trust is to develop your team as a pilot approach; if positive outcomes exemplify strong planning and increased community awareness, initially hesitant agencies may be more apt to want to join\(^\text{15}\).

i. **Turf Issues**

As suggested in the Toolkit from the Office of Victims of Crime on building a SART (Sexual Assault Response Team), explaining to reluctant agencies that your team takes a victim-centered approach and will respect all member agencies’ roles and responsibilities is encouraged. This should alleviate fears that one agency will overstep the boundaries of another.

ii. **History of Collaboration**

Perhaps especially hard to overcome in the smaller, more close-knit communities of the rural areas of North Carolina are past experiences of poor interagency collaboration. This can be due to conflicting beliefs and methodology on the part of a specific person(s) at one or more agencies, or on the agency level as a whole. Regardless, it is suggested to point out differences between past interactions or conflicts and the idea proposed now to build strong relationships with agencies that would be beneficial to have on the RRT\(^\text{15}\).

The below is a wonderful example of collaboration between the North Carolina Coalition Against Sexual Assault (a founding/member agency of NC CAHT) and Cumberland County:

“NCCASA, via funding from the Governor’s Crime Commission, collaborated with Cumberland County to provide outreach, identification and service delivery for domestic minor sexual trafficked victims in Cumberland County. The project served as a means to strengthen collaboration and cooperation between law enforcement and victim service providers in the community. The project facilitated dialogue and collaboration among partnering agencies to improve the accessibility and appropriateness of services across systems for Domestic Minor Sex Trafficking (DMST) victims, build individual providers’ knowledge related to fundamental issues in providing accessible and responsive services to DMST victims, and provide tools to facilitate assessment and planning by individual agencies to improve the accessibility and appropriateness of their services for DMST victims. A Cumberland County resident served as the Project Coordinator. The successful collaboration, between Cumberland County agencies, continues today with Fayetteville Police Department's Prostitution Diversion Initiative.”

- Robin Colbert
Associate Director, NCCASA
iii. Isolation

Another issue that many of the rural communities may face is the feeling of isolation. It’s possible that your jurisdiction may not house many of the agencies suggested as core partners in Chapters 5 and 6. Possible options are to either partner with public health/governmental agencies, or those of the surrounding area. If neither of these options seems feasible, you may need to consider widening your team jurisdiction\(^\text{15}\).

iv. Funding

As mentioned in Section 3a of the Toolkit, little to no outside funding should be required to keep your team running, so long as your members agree to participate voluntarily/without pay and the member agencies are taking on clients that would be covered under current funding stipulations anyways. Because, by definition, NCCAHT is a Coalition versus a 501(c)3 nonprofit agency, we are unable as an organization to provide or hold funds for the cases in which agency funding will not cover the costs of direct services for a victim. However, individual agencies are welcome to fund costs associated with their RRT in the name of said agency.

v. Lack of Public Awareness

Hopefully, you’ve already assessed your community’s awareness of the issue of human trafficking as outlined in Chapter 4. From this data, you may be able to decide which professional and/or physical sectors of your service area could benefit from an awareness or educational campaign.

A lack of public awareness speaks to the need for a Community Outreach Team (COT). These are teams that, ideally, coincide jurisdictionally with RRTs across the state and aid in raising awareness, fundraising, and in benevolence efforts. Members of the Community Outreach Team should not be members of the Rapid Response Team; if benevolence efforts are required of the COT, RRT members should simply give the COT a list of needs, without any client-specific information explaining those needs. Essentially, COT members are community members without a professional tie to the population of trafficking victims, but hold a well-meaning desire to help in an appropriate way. In addition to raising funds or collecting necessary items, members of the COT are able to become qualified in giving human trafficking presentations to other community, youth, or church groups. (For more information on developing a COT, please see ‘Developing a Community Outreach Team’ in the Appendices.) Note that sector-specific (e.g. medical, law enforcement, mental health) professional presentations should be given by appropriate/corresponding RRT members.

HELPFUL TIP:

Organizations like The Office of Victims of Crime (OVC), The Body Shop, and The NC Field Emergency Fund have programs that offer money to cover aftercare expenses for qualifying agencies.
While ideally functioning under separate but well-connected personnel, it is understandable that it might be hard to develop a RRT and COT simultaneously. If this is the case, the creation of the RRT should take precedence, with RRT members giving community presentations (in addition to sector-specific presentations) as possible in the meantime.

vi. Meeting Fatigue

Many teams experience an ebb and flow of interest from member agencies. Scheduling too many meetings, holding meetings in spaces that are perhaps hard for all members to get to, and/or not allowing enough discussion or input from members can exacerbate this. To confront this issue, try rotating the meeting location so that it is hosted by the member agency that needs to be more active. Additionally, scheduling team meetings so that they fall before or after the local SART team meetings or NCCAHT meetings allows members to have to dedicate less days away from their respective offices, which may make it easier for folks to attend.

Frequency of meetings may depend largely on the number of cases your community sees. However, it is suggested that your team hold no less than four meetings annually (equating to one meeting quarterly). This will encourage ongoing discussion and stronger interagency relationships. A balance exists, though, as too many meetings annually may cause members to get burnt out on the team. Incorporate member agency input regarding frequency and scheduling as much as possible, as these are the folks you’re hoping will be at the table each meeting. Additionally, try to schedule all team meetings for the year at the beginning of that year, or even the end of the year prior. This will ensure that members are able to commit well in advance.

Most existing RRTs in North Carolina opt for the quarterly meeting structure, but some also hold case-specific meetings for agencies involved to collaborate and share ideas regarding service provision, prosecution, or other issues. This ensures confidentiality is not broken, and that agencies not involved on the specific case do not feel their time is wasted. Communicate as a team if these ‘extracurricular’ meetings are something the group is interested in.

HELPFUL TIP:
Invite members using Outlook, Google calendar, or another calendar program that allows the meetings to sync with members’ schedules on their smartphones, so meeting times and locations are put on work calendars and they don’t double book their time.
6. Deciding Core Membership

It is important that invited or applying RRT members understand their role and responsibilities required of the team. A piece of this is ensuring that those agencies interested hold the appropriate licenses, accreditations, insurances, etc. for the services that they [intend to] perform for victims. Allowing agencies to participate on the team before they are legally or otherwise allowed could expose other members of the team to liability undermine members’ and the team’s credibility.

Applying or invited agencies should also be aware of the importance of attending scheduled team meetings the time commitments resulting from collaborating with other team members. As the OVC Toolkit offers about Sexual Assault Response Teams (SARTs), ‘[RRTs] do not redefine core members’ agency roles per se, but rather integrate them into a new, collective identity that draws on each member’s professional expertise.’

Most existing teams in North Carolina vote on membership applications at the team meeting following the application(s) submission to the Coordinator. The most favorable approach in North Carolina is to decide membership based on a popular vote of the general Team membership present at the meeting in which voting will take place.

a. Core Competencies:

<table>
<thead>
<tr>
<th>Core Competencies</th>
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<tbody>
<tr>
<td>Those who meet with victims must be trained in victim issues, crisis response, violence prevention, and multidisciplinary cooperation. Use the following list of competencies as a catalyst for developing, prioritizing, and customizing core competencies for responders in your jurisdiction:</td>
</tr>
</tbody>
</table>

- Can communicate non-judgmentally (regarding sexuality, gender identification, religion, nationality, etc.) and compassionately with [human trafficking] victims, their families, and friends.
- Understands the importance of survivors’ rights to self-determination.
- Knows state and national laws, rules, and regulations regarding [human trafficking], including mandatory reporting responsibilities.
- Knows the laws and ethical principles that apply to medical, legal, and advocacy responders.
- Knows how to provide assessments, interventions, and prevention programming that are culturally competent.
- Is aware of factors that increase vulnerability to [human trafficking] (e.g. disability, age, nationality, etc.) while in no way blaming victims for these vulnerabilities.
- Knows developmentally appropriate questions for interviewing victims.

Adapted from material via The Ohio Department of Health. Originally authored by Debra Seltzer.
b. Primary Responders and Direct Service Agencies

It is important that member agencies, which can include but are not limited to the personnel listed below, make a commitment to incorporate human trafficking into training regimens for all new staff, and not only those that will be attending RRT meetings.

i. Victim Advocates
   1. Act as a liaison among RRT on behalf of victims
   2. Protect and promote victims’ right to confidentiality
   3. Educate the team of issues of diversity
   4. Help implement initiatives aimed at educating folks about prevention of human trafficking

ii. Case Managers/ Social Workers
   1. Coordinate interagency needs for the victim as necessary
   2. Act as a liaison between mental health and other medical providers
   3. Ensure that follow-up support services are met
   4. Protect and promote victims’ right to confidentiality

iii. Law Enforcement Officers (Local, State, and Federal)
   1. Act as a liaison between the RRT and Law Enforcement agencies and educate the team of ways to improve coordination between the two
   2. Provide pertinent/allowed case information (See Sections 8.c. and 8.d.)
   3. Update the team on changes in laws and ordinances

iv. Sexual Assault Nurse Examiners/ Physicians
   1. Perform necessary medical exams (pertinent to a case or otherwise; dependent on client wishes)
   2. Serve as a liaison between the team and medical community and educate the team on how to improve coordination between the two
   3. Educate the team of common medical conditions that are associated with human trafficking (ex. STDs in sex trafficking cases or iron deficiency anemia from poor diet and long work hours in labor trafficking cases)

v. Prosecutors
   1. Relay to the RRT which cases can/cannot be prosecuted
   2. Educate the team of prosecutorial practices, policies, and legal definitions
   3. Assist in developing and enhancing strategies that improve prosecution rates of human trafficking cases
   4. Provide training of and answer questions about pertinent legal issues
   5. Assist in case review, if appropriate (See Section 8.c.)
   6. Provide updates on case dispositions

vi. Civil Legal Attorneys
   1. Provide legal information to the RRT
   2. Assist with multijurisdictional [legal] issues
3. Help clients that require aid in immigration, employment, landlord-tenant, post-conviction relief (expunction) or international law

4. Educate the team and victims of victims’ civil legal remedies and rights

vii. Mental Health Professionals

1. Educate the team about posttraumatic stress disorder (PTSD), trauma bonds, coercive partner behavior, counterintuitive behaviors, anxiety, and other common mental health diagnoses

2. Explain the importance of trauma-informed care, not just from the Mental Health Professional

3. Educate the team of risk factors for suicide among victims

4. Assist the Case Manager/ Social Worker in acting as a liaison between the mental health and other medical providers

viii. Agencies with Emergency Shelter

1. Educate the team of necessary and optimal security measures for housing victims of trafficking

2. Make team members aware of the varied needs of clients based on gender, age, sexuality, and other factors

C. Expanding Membership: Other Agencies to Consider

Identifying additional agencies that have more of a hidden or less obvious connection to human trafficking cases can only strengthen your team and its efficacy. Here are some example agencies that have been determined to be beneficial members or allies:

i. Internal Revenue Service: helpful in proving wages were withheld from the victim, or in proving tax evasion on the part of the trafficker

ii. Emergency Medical Services (EMS): possible first encounter agency that, if trained, can identify the red flags of a possible case trafficking and inform medical professionals at the hospital

iii. Crime Victim Compensation Agencies: can educate the team of possible victim benefits, claims processing, and common application issues or difficulties

iv. Disabilities Experts: able to inform the RRT of ways to become better equipped to assist a client with developmental and/or physical disabilities

v. Probation, Parole, or Correctional Officers: can assist the team in victim safety needs, sex offender management issues, and can help educate incarcerated victims of their rights via Safe Harbor and other legislation

vi. Culturally-Specific Organizations: able to offer the RRT suggestions as to culturally-appropriate language (also dialect and/or slang), food, customs, etc. for foreign-born clients from their region of expertise

vii. Substance Abuse Specialists: can educate the team of the connection between surviving trauma and drug or alcohol abuse
viii. Survivors*: can offer the team suggestions regarding victim treatment and the services that should be offered based on their individual experience. [*Note: Exercise extreme caution when inviting a survivor to join your RRT. While their testimony of their history is priceless, discussing cases may re-traumatize the survivor. Additionally, it is important to remember that this one survivor’s experience does not represent the entirety of human trafficking cases. Taking this into account while being respectful in hearing the suggestions of the survivor can be difficult but is extremely important.]*

CHAPTER 7

7. Team Development

Ideally, at this stage in the process you’ve initiated contact with and/or approached the appropriate agencies with the idea of starting a Rapid Response Team, and have received positive feedback and/or commitments to join. Using this core group of individuals and agencies committed to your Rapid Response Team, it is suggested you proceed with team development. Collaborate to develop a Team Mission Statement and Case Protocol, which outlines how your team will respond to cases based on type of case, nationality of the victim, who receives the initial call, etc.

a. Mission Statement¹

Every Rapid Response Team in North Carolina is going to be unique; each team will interact with a myriad of different situations of trafficking, clients, and needs. Some teams may be more victim advocate or social work-centered, whereas another might place focus on the medical and mental health needs of their clients. As long as clients’ needs are met without compromising the goals and foundation of NCCAHT, diversity among team approaches is encouraged. For this reason, it is suggested that each team work together to create its own Mission Statement.

While it might be easiest for the Coordinator(s) to create several options of Mission Statements and let the team simply vote, more interaction and discussion amongst all members of the team is recommended. This allows for the entire group to understand and consider that members from each discipline are going to value different goals based on their background, training, and affiliation to the crime and victims. However, no one opinion is more important than another, and all should be incorporated as best possible. **NCCAHT only asks that you refrain from using phrasing that implies lobbying or the holding of funds, as the Coalition currently does not participate in either.**

Because of the back-and-forth discussion that drafting a team Mission Statement will create, this process may take some time. Setting a time limit for yourselves is smart, but allow for thoughtful consideration. Creating this first document as a team will also allow you to get a feel for how your team best communicates (e.g. in person, via email, over the phone, etc.: this information can be useful when
developing your Meeting Structure; for more information see Section 8.a), and who the natural leaders are (this may be especially helpful if you have not yet designated a Coordinator).

Below is the NCCAHT Mission Statement (accurate as of date of publication) and a couple existing team Mission Statements, included for your own reference or to help you brainstorm.

**NCCAHT Mission Statement**

The North Carolina Coalition Against Human Trafficking (NCCAHT) is a diverse network of federal, state, and local agencies and non-governmental organizations that collaborate in knowledge and practice to eradicate human trafficking in North Carolina. Members educate the community about human trafficking, promote the investigation and prosecution of the crime, advocate on behalf of victims, and create local coalitions to link victims to legal, social and medical services.

**Triad RRT Mission Statement*\)**

Our mission is to identify and to connect recently liberated victims to needed services in the community as quickly and efficiently as possible with an emphasis on service provision during the first 72 hours after identification. During this period, victims have many needs and often do not understand or are frightened by the systems in place to help them. By working together with multiple agencies to get victims’ needs met, we hope to minimize this fear and engender victims’ trust, so that they ultimately continue to work with service providers and law enforcement through the recovery process. The Triad Rapid Response Team currently covers Guilford and Forsyth counties.

*Mission Statement in editing/voting stage as of 4/30/14*

**Triangle RRT Mission Statement**

Our mission is to identify and to connect recently liberated victims to needed services in the community as quickly and efficiently as possible with an emphasis on service provision during the first 72 hours after identification. The Rapid Response Team of the Triangle currently covers Wake, Durham, and Orange Counties.

**Cape Fear RRT Mission Statement**

The Cape Fear Human Trafficking Rapid Response Team is committed to identifying victims while providing a rapid and effective response in establishing a safe environment. A Support System is available to meet the victim’s immediate needs during the first 72 hours after identification. The Cape Fear Human Trafficking Rapid Response Team covers New Hanover, Brunswick and Pender Counties.
b. Case Protocol
Protocol will vary based on who is first notified of the case and in turn calls the agency deemed lead or ‘on-call’ at the time. For example, if the call comes from law enforcement, the appropriate service providers should be notified. If the call comes from a service provider agency, the appropriate law enforcement agency should be called if the situation is emergent. Example protocols are shown below, but meeting as a team to create alternative protocols will ensure your team is best prepared for every scenario.

Scenario 1:

Scenario 2:
c. Recording Cases

Currently, there exists no statewide database of case numbers or trends of human trafficking in North Carolina. In turn, statewide ‘statistics’ are actually often estimates. Even law enforcement officials, who use crime-specific codes to classify cases, are unable to accurately label a case of human trafficking because, up until recently, there existed no such code for human trafficking. The crime would be filed under domestic violence, sexual assault, labor exploitation, etc. (see the diagram on Page 9 for a least of just a few examples of how these cases could be otherwise categorized). With a push from law enforcement officers trained on human trafficking, government officials, statewide coalitions like NCCAHT, and community groups, a code has been created specifically for human trafficking. While this is certainly very exciting, change takes time, and it is estimated that it will be early 2016 before all (or most) law enforcement agencies in the state have transitioned to using this new code.

For this reason, and even to help your team’s individual agencies secure grant funds, it is important that Rapid Response Teams record cases. A case log that has been developed and maintained by the Salvation Army of Wake County is included in the Appendices. NCCAHT asks that Rapid Response Teams [begin to] use the case log provided, so that data collected will remain consistent across the state. In addition to securing individual agency funding, the statewide statistics we will ultimately gather could help greatly in securing a future for NCCAHT, and in turn Rapid Response Teams.

Below are excerpts from the Case Log that is provided for your use (found in the Appendices), with guidance provided in how to most effectively input appropriate client information.

<table>
<thead>
<tr>
<th>Preferred Query Responses</th>
<th>Case Number</th>
<th>ID #</th>
<th>Gender</th>
<th>Age Range</th>
<th>If minor, does client have history with child welfare program(s)? If so, which?</th>
<th>Type of Trafficking</th>
<th>Trafficked in NC?</th>
<th>Absolute Case?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1</strong></td>
<td>See example Above</td>
<td>Male/ Female</td>
<td>Minor, 18-25, 26-40, 41-60, 61+</td>
<td>Yes/ No/ Unknown/ [Name of Agency or Agencies]</td>
<td>Labor, Sex, Domestic Servitude</td>
<td>International/ Domestic</td>
<td>Yes/ No/ Unknown</td>
<td>Yes/ No (As defined by state legislation)</td>
</tr>
</tbody>
</table>

**Why is this included?**

NCCAHT is committed to Project NO REST (North Carolina Organizing and Responding to the Exploitation and Sexual Trafficking of Children. This project, grant funded by the Children’s Bureau and led by the UNC School of Social Work, is hoping to not only create a system to record statewide data on minor cases of human trafficking. Additionally, the project aims to link this data with participation (or lack thereof) in child welfare programs. We’re including this query on our RRT statewide Case Log so as to help collect data.

**Example:** Maria Lopez Garcia, born December 10, 1980 from Honduras is: **MLG121080H**
<table>
<thead>
<tr>
<th>Preferred Query Responses</th>
<th>Case Number</th>
<th>Industry</th>
<th>If sex trafficking, was internet solicitation involved?</th>
<th>Is this case gang affiliated?</th>
<th>Trafficking Country of Origin <em>Report only regions public</em></th>
<th>Area of Trafficking within US, if more than one state involved</th>
<th>T/U Visa Status</th>
<th>Law Enforcement Certification?</th>
<th>Primary Language</th>
<th>Other Agencies working with client</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td>Restaurant Industry, Farm/Agriculture, Factory, Hotel, Nail Salon, Massage Parlor, Escort Service, Truck Stop, Domestic Servitude, Other</td>
<td>Yes/ No/ Unknown/ Not Applicable</td>
<td>Yes/ No/ Unknown</td>
<td>Southeast US, Northeast US, Central, Eastern Coastline (Only includes regions in which NC falls)</td>
<td>Pending T, Pending U, Granted T, Granted U; Unknown, Not Applicable (client is US resident)</td>
<td>Yes/ No/ Pending/ Unknown</td>
<td>[Name of Language]</td>
<td>[Name of Agency or Agencies]</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Preferred Query Responses</th>
<th>Case Number</th>
<th># of People in House</th>
<th>Case Manager</th>
<th>Status</th>
<th>Location when Identified</th>
<th>Current Location</th>
<th>Referral Source</th>
<th>Law Enforcement Agency</th>
<th>Date Open</th>
<th>Date Closed</th>
<th>Case Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>1</td>
<td># of people living in same house as victims (Do not also have to be victims)</td>
<td>[Name of Case Manager]</td>
<td>Open/Closed</td>
<td>City, State, Country</td>
<td>City, State, Country</td>
<td>Community Member</td>
<td>[Insert LEO Agency Name]</td>
<td>[Date]</td>
<td>[Date]</td>
<td>[Insert notes]</td>
</tr>
</tbody>
</table>

It is important to remember that if your agency desires to create and implement an additional agency-specific case log, that identifying information about clients is redacted as best as possible. For the safety of your client and the staff of your agency, it is crucial that the identity of clients and case specifics are kept as confidential as possible.
8. Meeting Structure

Your meeting structure can be set up however your team decides, but it is suggested the structure remains consistent, with an agenda outlining the meeting available for attendees to follow along. Most RRTs in North Carolina have a meeting time ranging from 1-2 hours, and generally meet quarterly (more on this below). Generally, a RRT meeting agenda will look something like this:

<table>
<thead>
<tr>
<th>Time</th>
<th>Agenda Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:00</td>
<td>Introductions</td>
</tr>
<tr>
<td>10:05</td>
<td>Agency Updates</td>
</tr>
<tr>
<td>10:15</td>
<td>Case Review</td>
</tr>
<tr>
<td>11:00</td>
<td>Continuing Education/ Training</td>
</tr>
<tr>
<td>11:30</td>
<td>Vote on Membership Applications</td>
</tr>
<tr>
<td>12:00</td>
<td>Closing, Upcoming Meeting Reminder(s)</td>
</tr>
</tbody>
</table>

RRT Agenda
January 1, 2014

a. Meeting Location

Meetings should be held in a place that is easily accessible to all members and large enough to seat members comfortably in a way that facilitates discussion (for example, a ‘round table’ layout versus individual forward-facing desks or tables is ideal). If none of the team’s member agencies are able to offer this space, securing a community space is suggested. Possible spaces include a community center, church, or even school or community college classroom if used while classes are not in session. Keep in mind that the material your team will discuss will be sensitive, if not confidential (see Sections c and d of this Chapter for more information on this), and a mindfulness of this is a must when acquiring a space. [Note: If a COT coexists in your jurisdiction, securing an appropriate community space for your team meetings could be a job for them.]

b. Case Review

As mentioned briefly in the above Section, case review is often a large part of RRT meetings, but is not required. There are several different ways that a team can review cases: open, closed, or mock. None of these avenues are ‘better’ than another, and all encourage thoughtful discussion and the brainstorming of new ideas. To decide which option (if any) is best for your team, the majority of the input should come from your [assistant] district attorneys, law enforcement officials, and case managers/social workers.
Generally speaking, these are the three disciplines on a RRT with very specific confidentiality and discovery protocols. District attorneys need to remain cognizant of rules regarding what information they hear that they would then have to turn over to a judge if the case were to be prosecuted. Case managers or social workers will also be wary of the information released, but more out of concern for the victim’s rights to confidentiality. Finally, law enforcement officials are often at the opposite end of the spectrum; any information given to them may help in their investigations and is welcomed. In turn, having these three agencies (and any others that might also qualify) come to an agreement regarding the type of information shared at team meetings is highly suggested.

If an agreement as to the type of case review offered consistently cannot be reached, consider the idea of facilitating closed or mock (both described in further detail below) case review at regular RRT meetings, and open case review at ‘extracurricular’ meetings (as mentioned above) for interested parties as desired.

Example Mock cases (mentioned in more detail below) are included in the Appendices for your team’s use. However, it might also be helpful for your team to use these cases in making the differences between the types of case review more clear. For example, members can discuss what information in each case should be kept confidential based on case review type.

i. Open

Open case review (the review of a real, still-open case) gives teams the opportunity to collaborate in knowledge and expertise as to avenues beyond basic needs (i.e. shelter and case management, as those should be taken care of straightaway) with which the team can assist the victim, with the chance to implement the resulting ideas and services immediately. This differs from simply following RRT protocol in that members whose services might not be required for the case are still invited to participate in idea sharing.

To consider:
- Open case review can result in immediate implementation of idea sharing and collaboration.
- This type of case review may elicit the most discord between district attorneys, law enforcement officers, and case managers/social workers as their confidentiality and/or discovery protocols will often clash.
- Consent of the victim is required.
ii. Closed

Closed case review (the review of a real, closed case) allows a RRT to see the result of the actions [not] taken as a team to help the victim, and brainstorm ways that the team could’ve done better in coordinating services. On the other hand, closed case review also lets a team discover strengths that might have otherwise been overlooked.

To consider:
- Consent of the victim is **required**.

iii. Mock

Mock case review (facilitating discussion around a mock or ‘fake’ case - would be the job of the Coordinator(s) to draft this case unless another party volunteered) gives RRTs the chance to work together on a case with which no agency (other than that of the Coordinator) is familiar with. This gives team members an even playing field when analyzing the case specifics and brainstorming ways to assist the victim. Additionally, mock cases allow for in-depth discussion without fear of breaking confidentiality.

To consider:
- No confidentiality or consent measures need to be taken.

c. Confidentiality and Consent

It is important to remember that confidentiality and consent protocols vary greatly between professions. It is suggested that your team members each share their respective protocols at an early meeting so as to decide which of the aforementioned types of case review would be best for your team. Some teams alternate types of case review so that each member feels he or she is comfortable participating at least some of the time; those in conflict may abstain from this portion of the meeting.

Barb Kocher, Assistant US Attorney and member of the NCCAHT Executive Committee offers this insight:

“I offer these two scenarios for members of RRTs to be aware of as relates to law enforcement and/or prosecutors:

At a trial, of course, the defendant has the right to cross examine the witnesses against them. One of the most common areas for cross is witness bias. Now, a witness can be biased against somebody (presumably so against one who harmed them), but they can also be biased toward a side. To that end, we have to provide to the defendant any and all things of value/inducements given a witness in every case. While it might not seem applicable at first blush, this includes housing, diapers for their babies, meals, or, in a morale booster, a trip for a massage. The answer is not stopping the provision of such aid to a victim, but to keep such aid in the range of normal for such a victim (i.e. preferably no massages). Many folks who work as informants for the police in other types of cases are actually paid for their work assisting in the investigation, and that is okay, just as long as we inform the defendant. The jury usually understands and does not hold such
things against a witness. Please be aware of this, and keep track of what types of and how many things are provided to a victim who might testify.

Second, it is highly likely a target and/or acquaintances will still be under investigation at the time the RRT is activated and a victim is removed from the trafficking situation. In fact, that would usually just be the beginning of an investigation. Prudence and ethics dictate that until the investigation is completed (which could be a year or more, if analysis of seized computers has to be done, phone records obtained, a search warrant for Backpage or other social media obtained and executed), it cannot be discussed. In the human trafficking arena, this need for discretion in discussing the investigation is exacerbated when the majority of victims I have encountered are still emotionally connected to the target, and in those early stages, would turn directly to the target to let them know what is happening. Despite this training and inclination to stay silent, and in the interest of assisting the victims and collaborating with DSPs and others, law enforcement does share info and discuss matters in the RRT meetings. Please be mindful that under no circumstances should discussions or sharing of any specific investigations make their way into meeting minutes or notes that would leave the room.”

**d. Training/ Continuing Education**

Even the most successful Rapid Response Teams can benefit from continued training and education. While some teams bring in outside experts to give presentations on related issues or practices (examples below), remember that many times the best knowledge to be shared can come from your team’s own members. Offering member agencies to present their programs, protocols, and practices can help other members understand how the pieces of the larger puzzle fit together. If your team has exhausted your list of agencies, or simply wants to expand the team’s knowledge base to fit a current trend or issue being faced, consider more specific presentation topics like the ones below:

- How to Secure and Maintain Digital Evidence (FBI or other Law Enforcement Agency)
- Gangs and Human Trafficking (Gang Unit of Law Enforcement Agency)
- The Foster Care System Explained (Department of Social Services)
- Post-Traumatic Stress Disorder/Other Effects of Trauma Explained (Mental Health Professional)
- Rights of Migrant Farm Workers and/or their Employers (Farmworker Unit, Legal Aid of NC)
- Appropriate Terminology and Practices for Working with LGBTQIA Survivors (Representative from LGBTQIA Center at local College/University, and/or Victim Advocate)
CHAPTER 9

9. Toolkit Checklist

Developing a Rapid Response Team can be a daunting, confusing, multifaceted process. We know that you might need to jump around this Toolkit based on your community structure, agencies at the table, time commitments, etc. For this reason, we’ve included a Toolkit Checklist to ensure you do not forget any steps along the way!

**To Do List:**

- √ Review the ‘Toolkit to Develop a Rapid Response Team’
- □ Designate a RRT Coordinator
- □ Define the RRT Jurisdiction
- □ Assess Community Readiness
- □ Identify Opportunities for Collaboration
  - o Find Partners
  - o Integrate Community Services
  - o Overcome Common Barriers
- □ Decide Core Membership
- □ [Consider Outside Agencies]
- □ Write Your Mission Statement
- □ Develop Your Team Protocol
- □ Decide Meeting Structure
  - o Location
  - o Frequency
  - o Case Review
- □ Hold your first official meeting!
10. Appendices

The forms and documents in this chapter of the Toolkit are provided so that your team can hit the ground running. You will first find information on the structure and leadership of NCCAHT and existing Rapid Response Teams along with the contact information of statewide professionals and NCCAHT Allies. Next, we’ve included resources to help strengthen the success of your team and reinforce team members’ knowledge of the realities of human trafficking. These resources include example mock cases, suggested material on collaboration, and a compilation of books, films and websites that offer a variety of perspectives on the crime of human trafficking. Finally, we’ve capped off the Toolkit with a section of ready-to-use forms, allowing your team to begin accepting membership applications, recording cases, and even creating memorandums of understanding right away!
a. NCCAHT: Organizational Structure

**EXECUTIVE COMMITTEE**

- 3 Direct Service Provider Chairs
- 3 Government & Law Enforcement Chairs
- 3 Training & Education Chairs
- 2 Community & Faith-Based Chairs

**COORDINATOR**

**INTEREST GROUPS**

- DIRECT SERVICE PROVIDERS
- GOVERNMENT OFFICIALS & LAW ENFORCEMENT
- TRAINING & EDUCATION ORGANIZATIONS
- COMMUNITY & FAITH-BASED GROUPS

**RAPID RESPONSE TEAMS**

**NCCAHT GENERAL MEMBERSHIP**

**NCCAHT ALLIES**

*Formerly Committees*
NCCAHT Executive Committee

Chair:
- **Kiricka Yarbough Smith**
  Independent Consultant/ Trainer
  Partners Against Trafficking Humans in NC (PATH NC)
  PO Box 6403
  Raleigh, NC 27628
  Email: Kiricka@gmail.com
  www.PathNCOncline.wordpress.com

Community and Faith Based:
- **Pam Strickland**
  Founder
  Eastern NC Stop Human Trafficking Now
  PO Box 959
  Fayetteville, NC 27828
  Email: encstophumantrafficking@gmail.com
  www.ENCStopHumanTrafficking.org

- **Rachel Parker, MA**
  AHT Specialist & Client Advocate
  World Relief High Point
  155 Northpoint Ave., Suite 102
  High Point, NC 27262
  Email: RParker@wr.org
  Phone: (336) 887-9007, Ext. 108
  Fax: (336) 887-5245
  www.WorldReliefHighPoint.org

Training and Education:
- **Robin Colbert**
  Associate Director
  North Carolina Coalition Against Sexual Assault (NCCASA)
  811 Spring Forest Road, Suite 900
  Raleigh, NC 27609
  Email: Robin@nccasa.org
  Phone: (919) 871-1015
  Fax: (919) 871-5895
  www.nccasa.org

- **Laila Shahid- El**
  Director of Outreach
  North Carolina Victim Assistance Network (NCVAN)
  130 Penmarc Drive, Suite 101
  Raleigh, NC 27603
  Email: Laila@nc-van.org
  Phone: (919) 831-2857

Direct Service Providers:
- **Dale Alton, Esq.**
  Project FIGHT Coordinator
  Salvation Army of Wake County
  1863 Capital Blvd.
  Raleigh, NC 27604
  Email: Dale.Alton@uss.salvationarmy.org
  Phone: (919) 834-6733, Ext. 120
  www.ProjectFIGHTNC.org

- **Libby Magee Coles, Esq.**
  Executive Director
  JusticeMatters
  Email: Libby@justicemattersnc.org
  Phone: (919) 794-7511, Ext. 3
  www.JusticeMattersNC.org

- **MaLisa Umstead**
  Executive Director, Co-Founder
  A Safe Place (also Centre of Redemption)
  20 N. 4th Street, Third Floor
  Wilmington, NC 28401
  Phone: (855) 723-7529
  Email: MaLisa@asafeplacetogo.com
  www.CentreOfRedemption.com

Government and Law Enforcement:
- **Barbara Kocher, Esq.**
  Assistant US Attorney
  Eastern District of North Carolina
  310 New Bern Avenue, Suite 800
  Raleigh, NC 27601
  Email: Barb.Kocher@usdoj.gov
  Phone: (919) 856-4530

- **Melissa Larson**
  Grants Administrator
  Pitt County Sheriff’s Office
  PO Box 528
  Greenville, NC 27834
  Email: Melissa.Larson@pittcountync.gov
  Phone: (252) 902-2656
  www.pittcountysheriff.com

- **Lindsey Roberson, Esq.**
  Assistant District Attorney
  New Hanover Co. District Attorney’s Office
  316 Princess Street #541
  Wilmington, NC 28401
  Email: Lindsey.Roberson@ncourts.org
  Phone: (910) 663-3951
North Carolina Rapid Response Teams
Rapid Response Teams (RRTs) and Coordinators

- **Cape Fear RRT:**
  - Gloria Hegarty
    Counselor/Advocate
    Coastal Horizons Center, Inc.
    Email: ghegarty@coastalhorizons.org
    Phone: (910) 392-6936
  - Felicia Garnes
    Detective
    Leland Police Department
    Email: fgarnes@townofleland.com
    Phone: (910) 371-1100 ext. 1309
  - Emily Turner
    Victim Advocate
    Coastal Horizons Center, Inc.
    Email: eturner@coastalhorizons.org

- **Pitt County RRT:**
  - Anna Smith
    Executive Director
    Restore One
    Email: anna@restoreonelife.org
    Phone: (252) 717-6525

- **Triangle RRT:**
  - Jess Porta
    Project FIGHT Training and Education Manager
    Salvation Army of Wake County
    Email: Jessica@uss.salvationarmy.org
    Phone: (919) 478-1034
  - Dale Alton
    Project FIGHT Coordinator
    Salvation Army of Wake County
    Email: Dale.Alton@uss.salvationarmy.org
    Phone: (919) 478-1034

- **Alamance County RRT*:**
  - Liz Leon
    Program Director
    Alamance for Freedom
    Email: info@alamanceforfreedom.org
    Phone: (336) 525-1214

- **Triad RRT:**
  - Rachel Parker
    Human Trafficking Specialist/Client Advocate
    World Relief High Point
    Email: RParker@wr.org
    Phone: (336) 823-6978

- **Johnston County RRT*:**
  - Keri Christensen
    Executive Director
    Harbor, Inc.
    Email: kchristensen@harborshelter.org
    Phone: (919) 938-3566
  - Caitlin Ryland
    Staff Attorney- Farmworker Unit
    Legal Aid of North Carolina
    Email: CaitlinR@legalaidnc.org
    Phone: (919) 856-2180 ext. 113

- **Charlotte RRT:**
  - Amanda Hinnant
    Staff Attorney- Battered Immigrant Project
    Legal Aid of North Carolina
    Email: AmandaR@legalaidnc.org
    Phone: (704) 971-2601

- **Asheville RRT*:**
  - Karen Arias
    Bilingual Victim Advocate/Child Forensic Interviewer, Outreach & Training Coordinator
    30th Judicial District Domestic Violence/Sexual Assault Alliance, Inc.
    Email: arias@30thalliance.org
    Phone: (828) 452-2122
Mock Case Studies*

Manuel

Manuel was a 20-year old married man from South America who decided to come to the United States after his friend approached him about a work opportunity. Manuel would have to pay a fee to travel to the US to make money for farm work. His harrowing journey to the United States lasted for weeks and included being forced by armed men to walk for hours on end as well as being drugged.

After crossing the US border, he was taken to an apartment where he was kept with over a 100 other people. The apartment was dirty, rat-infested, and guarded by armed men. He was held in this apartment for months because he was unable to pay the additional smuggling fees which were demanded from him. During his time there, he was forced to cook and clean for the others but without any compensation. He was repeatedly threatened, including being told that he would be killed and was witness to acts of sexual violence. At one point Manuel and a few other men attempted to help a woman who was being raped. As punishment, the traffickers forcibly removed one man at a time from the apartment, and none of them ever returned. The traffickers forcibly removed Manuel from the apartment, and he feared he was going to be killed. He was not killed, but instead severely beaten up and thrown out of a moving van, which provided an opportunity to run away. As he was running, he saw a police car and flagged it down. The police took him to hospital for his injuries where he was referred to a service provider. He cooperated with the United States Immigration and Customs Enforcement to try to identify his traffickers, but they were never found so the case was closed. He has received a T-Visa, was reunified with his wife and is now a Legal Permanent Residence who is currently working in construction.

John

John was 16 years old when he ran away from his home in North Carolina, hoping to see the country. He arrived in New York City and was quickly stranded once he ran out of money. He was sleeping on the streets and fell in with a group of older homeless youth who introduced him to injecting heroin. Within a few months they also introduced him to some older men who would pay him for sexual favors so that he could afford the heroin that he now needed in order to get through the day.

John initially made contact with street outreach workers who referred him to more ongoing supportive services and helped him find the resources he needed to take care of himself, including shelter and psychiatric help to manage his addiction. John had never told anyone about how he was supporting himself and his drug habit while on the street and he had a lot of shame and anxiety about this. After a few weeks of non-judgmental counseling he began to open up about his experience of trading sex for drug money and especially what this meant to him as a heterosexual young man. Through the counseling and services he received he was able to get his GED, find a job, and move into a supportive housing program for young people who are recovering drug users.
Mock Case Studies*, continued

Alex

Alex was 15 years old and living in a group home in Queens when she met her boyfriend. She was frustrated with her life in the group home and felt that the workers only noticed her when she was doing something wrong. In contrast, David, her new 31 year old boyfriend, showered her with love and attention. When he offered that she could move in with him Alex didn't think twice.

At first Alex loved living with David but soon their relationship grew violent and he began pressuring her to contribute financially. Alex knew David was struggling to support her and she wanted to help out but she didn't feel comfortable with his suggestion that she sleep with men for money. He argued that plenty of women do this and it would be a sign of her love for him. He said they needed the money in order to continue to be able to stay together in his apartment. If they lost the apartment she would have to go back to foster care, and he told her that they would place her in a locked facility because she had previously run away.

Alex agreed to enter into prostitution and eventually ended up working on a well-known prostitution stroll. Sometimes outreach workers would come by and give the women who were working packs of condoms, while offering to talk with them about available services. Alex often thought about running away from David, especially after he beat her up. But where would she go? She didn't want to go back to foster care because she feared they would lock her up. She couldn't return to her old neighborhood in Queens, because David often told her what he would do to her if she ever left him, and he would know to find her there. Alex could not think of a safe place to run, and so she stayed. One time the condom pack that the outreach workers handed her had a card in it that described a drop-in center she could go to where she could get help. When she did decide to leave David she went to the drop-in center and was able to describe her situation to an intake worker.

When Alex first arrived at the drop-in center she was 19 years old. The intake counselor was able to help her enter a domestic violence shelter. Alex continued to come into the drop-in center to meet with her counselor and receive support. Today she is working in retail and is a devoted mother to her two young children.

Vicky

Vicky F., a young woman from Mexico, came to the United States with her husband, Jorge. They left their young son back home with Jorge's mother. Jorge convinced Vicky to work in prostitution so that they could save money to build a house back home. He kept all the money she earned and sent it directly back home to his family. Vicky was not allowed to keep a dime. He told her that if she did not work as a prostitute, she would never be allowed to see their son again. He threatened her with physical abuse and hit her when she disobeyed him.

Vicky's mother grew suspicious after she did not hear from her daughter for an extended period and contacted the authorities. She had a telephone number for Vicky that was traced to an apartment in Queens. Law enforcement investigated and located Vicky, who broke down and told them what Jorge was forcing her to do. They helped Vicky find a place to stay and referred her for counseling. Vicky cooperated with the prosecution in the case against Jorge. He received one of the longest sentences for human trafficking to date. Vicky now has a T visa and has been reunited with her son.
Vishalie

Vishalie A., a young woman from India, came to the United States to work as a nanny to support her widowed mother and four younger siblings. Vishalie answered a newspaper advertisement in India. She responded to the ad and went for an interview. She was offered a job with the Desai family, but the terms changed without notice as soon as she arrived in the U.S. Her passport was confiscated by Mr. Desai, and she was sent to work for another family, the Patels, in New Jersey. Mr. and Mrs. Patel paid Mr. Desai directly and seemed not to know that Vishalie wasn't receiving any of her wages. She was not permitted to leave the Patel home alone.

When Vishalie asked about her wages a few months after starting work, the Patels learned that she wasn't receiving any compensation. They decided to drive her to the train station and arrange for Mr. Desai to pick her up. She went back to working for the Desai family but, again, was still not being paid. Vishalie was physically abused on several occasions by Mrs. Desai. She was extremely isolated and was not given any days off from work. Mr. Desai kept her passport the entire time she was in the United States. Vishalie was able to escape through the help of a concerned neighbor, and she connected with a domestic worker's rights organization in Queens. Vishalie reported the Desais to law enforcement officials and now has a T visa.

Alena

Alena P. was a dancer and performer in Russia. She came to the United States on a visa for cultural performances to work in a theater troupe. When she arrived, she was taken to an apartment in New Jersey and told that she was to work as a stripper to pay off the debt that she accrued from coming to the United States. She was physically threatened and her passport was confiscated.

She worked for almost a year, only receiving about $50 a week that she had to use to pay for meals. Every day, her traffickers picked her up from an apartment, which she shared with other young women who also worked at the strip club, and brought her directly to work. She was not told how long she had to work there to pay off her debt. The total amount that she owed was not clear either because her traffickers deducted rent, transportation, and costume fees from her income.

One day, one of her roommates ran away, escaping from the apartment through a window, and went to the police. Her traffickers were arrested. Alena cooperated in the investigation of her traffickers, who were successfully prosecuted. She now has a T visa, is married, and is the mother of a young son.

*Compendium used with permission of Kiricka Yarbough Smith
Resources in Team Building and Collaboration

If viewing this Toolkit in electronic form, click the resource title to be taken to its webpage.

- **Building Comprehensive Solutions to Domestic Violence: Skills for Successful Collaborations**
  This is a curriculum that covers collaborative mindsets, interagency negotiation, meeting facilitation, among other things.

- **Building Stronger Sexual Assault Survivor Services Through Collaboration**
  Though this manual is aimed at Sexual Assault Response Teams (SARTs), much of the information could be useful in developing and maintaining RRTs (especially in cases of sex trafficking). Materials include needs assessment checklists, example memorandums of understanding, and self-evaluation resources.

- **The Collaboration Primer**
  Assists healthcare professionals in building collaborative efforts, and includes examples of existing partnerships, a checklist of things to consider before getting started, and more. The toolkit can be adapted for other disciplines.

- **Confronting Violence Against Women- A Community Action Approach** *
  Written for criminal justice professionals and community members alike, this guide offers step-by-step advice as to forming a coordinating council. This resource also includes examples of successful councils that combat violence against women. (*This guide is available via email from the National District Attorneys Association)*

- **Developing Effective Coalitions: An Eight Step Guide**
  While this guide is geared toward injury prevention coalitions, strategies can be applied to various issues. This tool helps agencies launch a coalition by providing tips on choosing members, keeping the coalition energy up, and conducting evaluations.

- **Gauging Progress: A Guidebook for Community Sexual Assault Programs and Community Development Initiatives**
  This guidebook encourages teams to think about the gauging progress of success and conceptualizing the evaluation of a multidisciplinary team. Though developed for SARTs, its points surrounding roles and responsibilities of team members would be helpful in any multidisciplinary team model.

- **Getting it Right: Collaborative Problem Solving for Criminal Justice**
  Developed for local criminal justice policy teams, this tool defines a practical approach for assessing the efficacy of current systems in place and in implementing necessary changes for teams that promote safety, prevent and solve crime, and hold offenders accountable.
Resources in Team Building and Collaboration, continued

- **Looking Back, Moving Forward: A Program for Communities Responding to Sexual Assault**
  This workbook helps interagency teams in developing a multidisciplinary, victim-centered protocol. While also geared toward SARTs, this workbook offers great resources like example media releases and meeting agendas.

- **OVCSART Toolkit**
  The SART Toolkit walks interested parties through the process of developing a Sexual Assault Response Team (SART). *This RRT Toolkit follows the outline of the OVC SART Toolkit.*

- **OVCS Strategic Planning Toolkit**
  This toolkit is a guide for organizations and programs throughout their strategic planning process.

- **OVCTraining and Technical Assistance Center**
  This center helps to coordinate services and strengthen the capacity of victim assistance programs across the US. The Training and Technical Assistance Center coordinates its activities through three core functions: needs assessment, capacity building, and evaluation.

- **Reshape Newsletter: Dual Coalitions**
  Offers teams a series of articles on how dual coalitions can address multiple service needs equitably- especially helpful for RRTs that are joining or co-convening with a SART or Domestic Violence multidisciplinary team or task force.

- **Revisiting the Critical Elements of Comprehensive Community Initiatives**
  This tool explains effective outreach and how to tackle issues like sustaining levels of involvement, being respectful of victim’s cultural backgrounds, and collaboration.
Human Trafficking Resources

Books (Alphabetically):

- A Crime So Monstrous: Face-to-Face with Modern-Day Slavery
  E. Benjamin Skinner, 2008; buy it on Amazon [here].
- Disposable People: New Slavery in the Global Economy
  Kevin Bales, 2004; buy it on Amazon [here].
- For Sale: Women and Children
  Igor Davor Gaon & Nancy Forbord, 2005; buy it on Amazon [here].
- Girls Like Us: Fighting for a World Where Girls are Not for Sale, an Activist Finds Her Calling and Heals Herself
  Rachel Lloyd, 2011; buy it on Amazon [here].
- Half the Sky: Turning Oppression into Opportunity for Women Worldwide
  Nicholas D. Kristof, 2008; buy it on Amazon [here].
- The Johns: Sex for Sale and the Men Who Buy It
  Victor Malarek, 2011
- A Long Way Gone: Memoirs of a Child Soldier
  Ishmael Beah, 2007; buy it on Amazon [here].
- Not For Sale: The Return of the Global Slave Trade- and How We Can Fight It
  David Batstone, 2007; buy it on Amazon [here].
- Renting Lacy
  Linda Smith, 2009; buy it on Amazon [here].
- The Slave Next Door: Human Trafficking and Slavery in America Today
  Kevin Bales, 2007; buy it on Amazon [here].
- Walking Prey: How America’s Youth are Vulnerable to Sex Slavery
  Holly Austin Smith, 2014; buy it on Amazon [here].

Films/Documentaries (Alphabetically):

- Amanda’s Story
  Abolition International; watch it [here] on vimeo.
- Call + Response, 2008
  Madeleine Albright, Daryl Hannah- Fair Trade Pictures; learn more [here].
- Cargo: Innocence Lost, 2008
  Michael Cory Davis; buy or watch it [here].
- A Dance for Bethany, 2007 (r)
  Robin Lively; watch a trailer [here], or read more about it via IMDB [here].
- Dreams Die Hard
  Free the Slaves, learn more about Free the Slaves and Made by Survivors [here].
  Additionally, see other Free the Slaves Documentary Videos [here].
- Flesh: The Movie
  Kristin Ross Lauterback, Christine Lee Storm; purchase a copy [here].
- Half the Sky: Turning Oppression into Opportunity, 2012
  Buy it on Amazon [here]; learn more about the Half the Sky movement [here].
h. Human Trafficking: NCCAHT- Endorsed Materials, continued

Human Trafficking Resources

- Nefarious Documentary Trilogy (Nefarious I: Merchant of Souls, 2011).
  To learn more, click here.
- Not For Sale II: Join the Fight, 2010 (Updated version of Not For Sale: The Documentary)
  View the Not For Sale Film website here.
- Not Today, 2012 (r)
  See a trailer and learn more here.
- Rape for Profit, 2013
  Jada Pinkett Smith; Learn more here.
- Trade, 2007
  Kevin Kline; watch a trailer here.
- Tricked: A Shocking Look Inside America’s Sex Trade, 2013
  Jane Wells, 3 Generations; Learn more here.
- Very Young Girls, 2007
  Girls Educational & Mentoring Services (GEMS), Rachel Lloyd; learn more about GEMS here.
- Whistleblower, 2010
  Rachel Weisz; Inspired by actual events; learn more here.

Websites and Organizations (local, state, federal, and international; click for more information):

- United States Department of Justice
- US Department of State Trafficking in Persons (TIP) Report 2013
- The Polaris Project
- Not For Sale Campaign
- Girls Educational & Mentoring Services (GEMS)
- Half the Sky: Turning Oppression into Opportunity for Women Worldwide
- International Rescue Committee
- Abolition International
- Carolina’s Women’s Center (UNC)
- Salvation Army
- World Relief

i. Forms to Use

While it is suggested that your team collaborate to create some of these essential documents, we realize that this process takes time. Here are example forms- from Rapid Response Teams across the state, and even other multidisciplinary teams across the country, to use in the meantime. Team names or jurisdictional information has been removed and forms have been rotated as necessary to make these pages easier to scan and begin using right away!
### Rapid Response Team Attendance Sheet

Meeting Date: __________

<table>
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<tr>
<th>NAME</th>
<th>AGENCY</th>
<th>POSITION</th>
<th>EMAIL</th>
<th>NEW TO RRT?</th>
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## Case Log

<table>
<thead>
<tr>
<th>Case Number</th>
<th>ID #</th>
<th>Gender</th>
<th>Age Range</th>
<th>If minor, does client have history with child welfare program(s)? If so, which?</th>
<th>Type of Trafficking</th>
<th>Classification: Domestic/International</th>
<th>Trafficked in NC?</th>
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<td>Case Number</td>
<td>ID #</td>
<td>Industry</td>
<td>If sex trafficking, was internet solicitation involved?</td>
<td>Is this case gang affiliated?</td>
<td>Trafficking Country of Origin</td>
<td>Area of Trafficking within US, if more than one state involved</td>
<td>T/U Visa Status</td>
<td>Law Enforcement Certification?</td>
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<td># of People in House</td>
<td>Case Manager</td>
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<td>Location when Identified</td>
<td>Current Location</td>
<td>Referral Source</td>
<td>Law Enforcement Agency</td>
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iii. Confidentiality Agreement

_________________ Rapid Response Team Confidentiality Agreement

By signing this document I agree to abide by the following:

1. All members of the ___________ Rapid Response Team must sign the Confidentiality Agreement.
2. Identifying information (Examples- actual may vary depending on the case: name, age, country of origin, etc.) about victims or their families will not be shared.
3. Members will make every effort to avoid sharing extraneous case information that may lead to the identification of victims by other team members.
4. Case information learned through the team will not be discussed outside the meeting room except as directly pertinent to providing services, and with permission of the victim.
5. Membership in the ___________ RRT is an agency wide membership, and representatives from the agency do not need individual memberships. However, case information discussed in meetings is not to be shared with an individual’s home agency except as appropriate and necessary for case specific needs.
6. No written material with case information will leave the meeting room. Should any such documentation exist, the conveners of the team will collect all documents and shred them immediately upon leaving the meeting. Team members will not take any notes pertaining to cases during meetings.
7. Each team member retains the responsibility to maintain confidentiality as required by their agency/discipline.
8. Everyone has a duty to report in cases where there is suspected:
   - Child abuse and/or neglect and/or dependency by a parent, guardian, custodian or caretaker.
   - Abuse, neglect or exploitation of a disabled or elder adult by their caretaker.
   - Physicians and hospitals must report to law enforcement certain kinds of wounds, injuries or illnesses- injuries caused by weapons (guns in every case, knives and sharp objects in suspected criminal cases), poisoning (in every case) and grave bodily harm or illness (due to suspected criminal violence).
9. Where possible and appropriate, before discussing information about a case- whether or not the case is identified by name- victims/survivors must be given clear, specific releases of information with the option to participate. This may not apply in instances of law enforcement investigation, or trafficking related tips. (See Consent to Release)

Signature of Agency Representative: ____________________________ Date:______________
Printed Name: ______________________________________________
Agency: _____________________________________________________
iv. Consent to Release

___________ Rapid Response Team Consent to Release

Please Read: Before deciding whether or not you are comfortable with _________________ (agency) sharing information about your case with the _________________ (team name) Rapid Response Team please note that it is the duty of _________________ (agency) to discuss the purpose of RRT case reviews, the benefits of sharing your case information, and any potential repercussions. If after this discussion you feel comfortable with discussion of your case for RRT case review purposes, please complete the form below.

I understand that _________________(agency) must keep my personal information, identifying information, and records confidential. I also understand that I can choose to allow _________________(agency) to release some of my personal information to certain individuals or agencies.

I, _________________ (name) authorize _________________ (agency) to share case related information with the _________________ (team name) Rapid Response Team for the purposes of case review. This information will only be shared in person.

- I understand that I do not have to sign a release form and I do not have to allow _________________(agency) to share my information. This is completely voluntary and will not affect services.
- I understand that releasing information about me could give another agency or person information about my location and confirm that I have been receiving services from _________________ (agency).
- I understand the risks and benefits of releasing my information to the _________________ (team name) Rapid Response Team for the purposes of case review.
- I understand the specific information that will be shared and how it will be shared.
- I understand that _________________(agency) and I may not be able to control what happens to my information once it has been shared with the _________________ (team name) Rapid Response Team, and that the agency or person getting this information may be required by law or practice to share it with others.
- I understand that I can rescind my permission at any time, making this agreement void.

This release is valid for a period of 6 months. If additional time is necessary to meet the purpose of this release I will need to sign a new release form.

Release Expires: Date _______________ Time____________________

I understand that this release is valid when I sign it and that I may withdraw my consent to this release at any time either verbally or in writing.

Signature: ___________________________________ Date: __________________

Printed Name: _________________________________

Witness: _____________________________________
Rapid Response Team Intake Assessment

Section I. Identifying Data

Client
Name:
Nickname:
Name on Documents:

<table>
<thead>
<tr>
<th>Date of Birth</th>
<th>Age</th>
<th>Sex</th>
<th>Country of Origin</th>
<th>Legal Status in U.S.</th>
<th>Country/ Countries of Citizenship</th>
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</thead>
</table>

Current Location, Address and Telephone Number(s):

Marital Status and Location of Spouse/Partner/Significant Other, if applicable:

Children and Location, if applicable:

May we contact you by phone?  [ ] Yes  [ ] No

Alternate Contact Method and Information:

Home Country Contact:
Safe to Contact?  [ ] Yes  [ ] No

Name: ____________________________  Relation to Client: ____________________________

Address: ____________________________  Tel: ____________________________

Languages Spoken: ____________________________

English Proficiency:  [ ] Basic  [ ] Intermediate  [ ] Advanced

Interpreter Needed?  [ ] Yes  [ ] No

Interpreter Name: ____________________________  Tel: ____________________________
Section II. Reason for Seeking Services

CLIENT
What happened to bring you here today? Did you come on your own?

How were you referred to this agency?

What fears or worries do you have right now, if any?

What questions do you have right now, if any?

CASE MANAGER

Has the client been referred for legal services?
   Yes  No
Name of Attorney/contact information:

Has the client been screened for human trafficking?
   Yes  No
Screened by:

Based on the initial screening for trafficking, does the client meet the federal definition of a victim of a severe form of trafficking?
   Yes  No

Has the client been referred to law enforcement?
   Yes  No

Branch:

If certified:
What is the client's date of certification?

Additional Comments:
Section III. Needs Assessment

1. Food, Clothing, Basic Necessities

When was your last meal and what was it?

__________________________________________________________________________

How have you been obtaining food (if at all)?

__________________________________________________________________________

How many times a day, and days per week, are you able to eat a meal?

__________________________________________________________________________

What clothing do you have, other than what you are wearing?

__________________________________________________________________________

Are you in need of any personal items or basic necessities? If so, what?

__________________________________________________________________________

2. Safety

Has the trafficker or employer ever threatened or abused you?

☐ Yes ☐ No

Do you know if the trafficker or employer has tried to find you since you got away?

☐ Yes ☐ No ☐ Don’t Know

Have you had any contact with the trafficker or employer since you got away?

☐ Yes ☐ No

Could you possibly run into the trafficker or someone from the trafficking ring?

☐ Yes ☐ No ☐ Don’t Know

Are you from the same geographic area, ethnic or religious community as the trafficker or employer?

☐ Yes ☐ No ☐ Don’t Know

If yes, which geographic area, ethnic or religious community?

__________________________________________________________________________

Are there any places where you don’t feel safe? If so, where (including ethnic/religious communities)?

__________________________________________________________________________

__________________________________________________________________________
v. Intake Assessment, continued

Are you in contact with anyone who may be associated with the trafficker or employer?

[ ] Yes  [ ] No  [ ] Don’t Know

*If yes, who?*

___________________________________________

Have you contacted any of your family members since you got away?

[ ] Yes  [ ] No

Does the trafficker or employer know where your family lives?

[ ] Yes  [ ] No  [ ] Don’t Know

*If yes, has the trafficker or employer contacted any of your family members?*

[ ] Yes  [ ] No  [ ] Don’t Know

Would you feel safe returning to your home town/country?

[ ] Yes  [ ] No

3. Shelter/Housing

Where and with whom are you staying tonight? Do you feel safe there?

___________________________________________

What is your current living situation?

___________________________________________

Are you sleeping well?

[ ] Yes  [ ] No

Do you need:

[ ] Temporary Housing

[ ] Transitional Housing

[ ] Permanent Housing

Are there cities you would like to live in? Are there any locations you would like to avoid?

___________________________________________

4. Medical/Dental/Vision

Do you have any emergency medical or dental needs to be addressed? If yes, please explain.

___________________________________________

___________________________________________
v. Intake Assessment, continued

Are you taking any medications, and if so, do you need a refill?

When was the last time you saw a doctor?

_________________

<table>
<thead>
<tr>
<th>General:</th>
<th></th>
<th></th>
<th>Need</th>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>OBGYN:</td>
<td></td>
<td></td>
<td>Need</td>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Dental:</td>
<td></td>
<td></td>
<td>Need</td>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Vision:</td>
<td></td>
<td></td>
<td>Need</td>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

Do you have Health Insurance?  | Yes  | No

5. Mental Health Screening: Trauma History

   - Have you ever experienced physical violence, sexual violence and/or verbal abuse?
   - Have you ever witnessed physical violence, sexual violence and/or verbal abuse to others?

6. Transportation

   How did you get here today?

   __________________________

   How do you usually get around from place to place?

   __________________________

7. Social/Community

   a. Language

   Do you feel comfortable reading in your own language?

   - Yes  | No

   Do you feel comfortable writing in your own language?

   - Yes  | No

   Can you read and write in English?

   - Yes  | No
v. Intake Assessment, continued

Section IV. Personal History

1. School and Educational History
   Describe your history of school functioning, including areas of success and difficulty, academic strengths, and learning disabilities.

____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Name (printed): _________________________________________________

Signature: _______________________________________________________

Date: ____________________________________________________________
In recent years, there has been growing awareness of human trafficking issues in the United States, and in North Carolina. Human trafficking is the commercial exploitation of individuals through sex, labor, or both where force, fraud, and/or coercion are brought to bear in keeping victims locked into slavery. Victims are United States' citizens and foreign nationals; they are female and male; they are adults and children. North Carolina has been identified by the National Human Trafficking Resource Center (NHTRC) as 10th in the nation for human trafficking based on the calls they receive.

In order to respond to the growing number of identified victims, the North Carolina Coalition Against Human Trafficking (NCCAHT) has developed rapid response teams that utilize existing systems to respond to human trafficking victims during the first 72 hours following identification. The ____________ Rapid Response Team is a collaboration between law enforcement and service providers in ___________ County. The mission of the ___________ Rapid Response Team is to identify and to connect recently liberated victims to needed services in the community as quickly and efficiently as possible within the first 72 hours after identification. During this period, victims have many needs and often do not understand or are frightened by the systems in place to help them. By working together with multiple agencies to get victims' needs met, we hope to minimize this fear and engender victims' trust, so that they ultimately continue to work with service providers and law enforcement through the recovery process.

If any of you are aware of such activities happening around your community, please do not hesitate to contact the National Human Trafficking Resource Center (NHTRC) at 1-888-373-7888. These matters are confidential and not everyone has the same comfort level to discuss this sensitive issue; the NHTRC is a 24/7 hotline that has trained professionals to answer questions and list a concern. There are also local agencies and organizations, such as _________________ and ______________________ who can assist with concerns if you think you have come into contact with a survivor. Thank you for your interest as a concerned community member, and we hope that we have introduced awareness which will make our communities a safer place.
Information Regarding Membership to the ___________ Rapid Response Team

Membership Criteria

Each applicant membership will be considered on a case-by-case basis based on several criteria including, but not limited to, (a) the extent to which the services that the organization provides falls within the mission of the Rapid Response Team, (b) the applicant organization's service area, and (c) the organization's demonstrated commitment to serving victims of trafficking in a safe and professional manner.

Membership Requirements

Attend at least ___% of scheduled meetings (__ of the __ held annually). In the event of an emergency, a Member may send a representative from their organization.

Member Agreement

The undersigned agrees to adhere to the stated membership criteria and requirements described above. Member also agrees not to speak on behalf of the Rapid Response Team or advertise in the Team’s name without the permission of the Rapid Response Team members.

______________________________________
Member Signature & Date

Application Process

Please return the completed application to _________________. We will consider your application at the next meeting of the Rapid Response Team. We may have additional questions regarding your application and will follow up by e-mail.
### RAPID RESPONSE TEAM MEMBERSHIP APPLICATION

**APPLICANT ORGANIZATION INFORMATION**

<table>
<thead>
<tr>
<th>Organization Name:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Primary Contact Person:</td>
<td>Position:</td>
</tr>
<tr>
<td>Phone(s):</td>
<td>Email:</td>
</tr>
<tr>
<td>Alternate Contact Person (optional):</td>
<td>Position:</td>
</tr>
<tr>
<td>Phone(s):</td>
<td>Email:</td>
</tr>
<tr>
<td>24-hour phone number (optional):</td>
<td></td>
</tr>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>City:</td>
<td>State:</td>
</tr>
</tbody>
</table>

**Member Type (Please circle)**
- Law Enforcement
- Emergency Shelter
- Medical/Mental Health Services
- Legal Services
- Direct Services
- Other: Please describe ________________________________

**State or Federal Licensure/Credentials (Please describe)**

**Type of assistance your organization can offer victims of trafficking (Please describe)**

**My organization would like basic training on the issue of human trafficking. Yes/No**

**My organization would like advanced training on the issue of human trafficking. (Please describe)**

**My organization is available to provide advanced training to the Rapid Response Team (Please describe)**

*Membership Application originally developed by the RRT of the Triangle (Used with permission of Coordinators 5/15/2014)*
CREATING A MEMORANDUM OF UNDERSTANDING

In designing an MOU your Rapid Response Team, including statements that reflect philosophical agreement may save confusion later on in the process.

Example A:

d Human Trafficking is a crime in which perpetrators recruit, harbor, move, and/or otherwise obtain a person by means of force, fraud, and/or coercion to exploit that human being for means of labor exploitation, sexual exploitation, and/or domestic servitude. Being trafficked is never the fault of the victim-survivor. We will work together to improve our response to victim-survivors, hold perpetrators accountable, and to extinguish the roots of human trafficking in our community.

Example B:

This MOU is designed to improve the response of the community to human trafficking, and to send a consistent community message that we will work together to end the occurrence of human trafficking in our community.

An MOU is about the relationship between agencies, defining the parameters and expectations between them. It is important that the development of an MOU is a collaborative process among all the members of the collaboration.

When designing your MOU, you may want to include:

a. Purpose of having an MOU
b. Description of services you will provide
c. How cases will be processed (or not processed) internally
d. Process of referral from your agency to others
e. How and what information will be exchanged
f. Frequency with which exchange of information will occur
g. How confidentiality of victims will be addressed
h. Length of time the MOU will be in effect
i. How and when evaluation of its effectiveness will be reviewed (if you are trying something new, evaluate it in 4-6 months to allow room for “tweaking”)  

Depending on the issues addressed, establishing parameters can be a process, and may take time. Be patient!

Adapted from:
Wisconsin Coalition Against Domestic Violence
Wisconsin Coalition Against Sexual Assault, Inc.2009.
References


References, continued


