Principles that underpin early support provision for survivors of trafficking

British Red Cross, the Human Trafficking Foundation, the Anti-Trafficking Monitoring Group, and Anti Trafficking and Labour Exploitation Unit (ATLEU). November 2018.
In October 2017, when the Government announced a number of reforms to the support available to survivors of trafficking within the National Referral Mechanism (NRM), they also committed to government-funded Places of Safety so that adult victims of trafficking leaving immediate situations of exploitation could be given assistance and advice for up to 3 days before deciding whether to enter the NRM. In doing so, the UK Government made a crucial step in acknowledging the need for the provision of publicly funded pre-NRM legal advice. We also encourage the Government to make the terms of reference and contract documents public and open to scrutiny, thereby upholding its commitment in the Open Government National Action Plan. Finally, Places of Safety should be subject to independent monitoring against performance indicators which are publicly available and should be developed well before their implementation. The success of any service delivery contract and/or organisation responsible for delivery should not be measured by the number of referrals made into the NRM, but by the measurement of outcomes for survivors.

In this document we set out 10 core principles which we believe should underpin the terms of reference for Places of Safety. Together, these principles are core to ensuring that within Places of Safety people are given the time, space and support they need to make informed decisions about their future. Incorporating these principles will require a change to the current law relating to legal aid in England and Wales to allow for the provision of publicly funded pre-NRM legal advice. We also encourage the Government to make the terms of reference and contract documents public and open to scrutiny, thereby upholding its commitment in the Open Government National Action Plan. Finally, Places of Safety should be subject to independent monitoring against performance indicators which are publicly available and should be developed well before their implementation. The success of any service delivery contract and/or organisation responsible for delivery should not be measured by the number of referrals made into the NRM, but by the measurement of outcomes for survivors.

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In addition, services need to be able to demonstrate competence. Together we have agreed 10 core principles upon which the definition of “competence” should be based. The 10 core principles are:

1. Freedom
2. Open access to all
3. Needs-based assessments
4. Meeting health needs
5. Meeting basic material needs
6. Early legal advice
7. High quality advice and support
8. Enabling choices and options for pathways of referrals and support
9. Confidential data management
10. Organisational transparency

The 10 core principles set out in this document, when taken together, are the minimum standards that are required if Places of Safety are to meet their intended purpose. The principles are complementary and each one is necessary in order to ensure that ‘informed consent’ is the foundation of support provision. The absence of any one of the principles puts at risk the victim-centred nature of any service.

Any organisation being considered as a provider of early support, including Places of Safety, should be able to demonstrate their ability to deliver against the 10 core principles – including evidence of policy and procedures that will stand up to external scrutiny – well before the service starts to operate. A detailed list of policies and procedures is attached at the end of this document. The primary principle document that forms the basis of the 10 Core Principles is The Human Trafficking Foundation’s Slavery and Trafficking Survivor Care Standards, 2018, endorsed by the First Independent Anti-Slavery Commissioner. The UK Government has committed to adopting these standards in the next Victim Care contract, and the revised version is available on the Human Trafficking Foundation’s website (www.humantraffickingfoundation.org). It is essential that any organisation embarking on support to survivors of trafficking and modern slavery will already be capable of following the Care Standards. The 10 core principles do not replace the Care Standards, but they set out what should be in place even at the earliest point of contact and before a referral to the NRM or identification process takes place.

For services considering whether to undertake this work it is vital that they understand the impact of traumatic experiences upon survivors’ lives and behaviours. They must strive to do no further harm by ensuring that all support is provided in a way that is respectful of the survivor’s need for safety, respect, and acceptance and is compliant with the Trauma-Informed Code of Conduct (TiCC) from the Helen Bamber Foundation. The partner organisations who have agreed this document are Anti-Trafficking and Labour Exploitation Unit (ATLEU), the Anti-Trafficking Monitoring Group, the British Red Cross and the Human Trafficking Foundation. Collectively we have experience of providing support to potential survivors of trafficking in the early stages, including provision of legal advice and ensuring increased accountability in provision of victim care. Finally, our work includes taking concrete steps to improve identification of, and protection and support for, survivors of trafficking and other forms of modern slavery through advocacy and research. We believe that in line with the Trafficking Survivor Care Standards, Government funded Places of Safety need to follow a set of core principles and that Places of Safety should be subject to a robust independent monitoring process.

2. These principles take into account the Slavery and Trafficking Survivor Care Standards and therefore we ask that these also be adopted in the next Victim Care Contract.
1. FREEDOM

Supporting survivors to regain trust in their own ability to control their lives is a crucial step towards reducing their vulnerability and preventing re-victimisation. The ability to move freely and make their own decisions is integral. It is not empowering to end support for survivors before they are ready or to push them to take decisions without advice, support and information. Many survivors who have traumatic histories suffer mental health difficulties which makes disclosing information, particularly challenging and often distressing. It is essential that they can make an informed choice in disclosing information and in permitting it to be shared with other professionals and services. This is the only way in which they will be able to provide informed consent. For Places of Safety to be able to truly inform the decision of whether to enter the NRM personal information about survivors who enter Places of Safety should not be shared with the government for immigration purposes.

Services should promote and provide:

- Freedom to leave at any time;
- Access to free legal advice;
- Face to face independent, specialist and needs-led support;
- Casework management systems and dedicated case-workers for advocacy support;
- Advice and information on rights and entitlements, including but not limited to information about the NRM, in a language that people understand;
- Multi-agency collaboration and reliable referral pathways; and
- Organisational processes to ensure that informed consent is at the centre of the service.

All adults have the right to be involved in, and informed about, decisions that affect their lives. Consent is a process, not a one-off event, and survivors need to have the opportunity to continually re-evaluate consent.

“If a person is deemed incapable of giving informed consent under the Mental Capacity Act (2005) by a person who is trained to carry out capacity assessments, a best interest decision should be made. This might include support providers and any advocate. If a decision needs to be made urgently a temporary decision may be made by a social worker appointed for this purpose. The individual should still be placed at the centre of the decision-making process.”

Slavery and Trafficking Survivor Care Standards, 2018. Human Trafficking Foundation, Section 2.2.3 Capacity (page 46).

2. OPEN ACCESS TO ALL

Identification, protection, care and support should be equally accessible to all survivors of trafficking and modern slavery regardless of characteristics of their race, nationality, ethnic origin, language, age, disability, gender including gender reassignment, pregnancy, religion and belief, marital status and sexual orientation. Places of Safety support must be based on need and survivors should not be rushed into making any decision that can affect their access to legal advice or entitlements. All Places of Safety should include a minimum level of support for 3 working days, which needs to be longer if referral in to the service occurs on a Friday or over the weekend when legal advice is not available.

Services should:

- Be open 24 hours a day, 7 days a week;
- Be flexible to allow support beyond 3 working days according to individual need;
- Enable access to legally aided lawyers;
- Be transport accessible and, if the Place of Safety is in a rural area, providers should ensure that the survivor is supported back to a place of their choosing should they wish to leave;
- Be accepting of self-referral;
- Be accessible to those who have been historically trafficked;
- Be accessible to all regardless of complex needs;
- Promote equality and diversity;
- Be able to signpost to pastoral care or religious support if requested, but not engage in proselytization or seek to persuade someone to join a religion, cause or group; and
- Treat all survivors fairly and with dignity.

Someone who has experienced exploitation or trafficking may take a long time to come to terms with their past. An event in their life may trigger a disclosure or desire to find out more about their options, and this could be at any point. Every survivor, is different and Places of Safety must be non-judgemental and accept individuals who seek support.
3. NEEDS-BASED ASSESSMENTS

For every survivor there should be an appropriate pathway for provision which considers, and is tailored to, their specific individual risks and needs. This includes those individuals who have a high level of need and require specialist services. Integrated, appropriate support should be provided in collaboration with each individual and protect and enhance all aspects of their psychological, physical, spiritual, financial, legal and social well-being. Survivors should be placed at the centre of any decision-making process and support prioritised in accordance with their individual needs as identified by the individual.

**Services should ensure:**

- At point of entry, the initial assessment is about needs and risk; people should not be interviewed or expected to provide details about the trafficking or exploitation they have suffered;
- Staff are suitably trained to ensure safeguarding needs are assessed and managed according to organisational safeguarding policies;
- Basic needs are met immediately (for example, emotional support, access to culturally appropriate food, private safe room, washing facilities, clean and appropriate clothing);
- Medical needs are met, including maternal and mental health assessments and referrals, and urgent medical care provided without delay;
- Emotional support is provided by appropriately trained staff;
- There is flexibility for the person to move away from the area if they do not feel safe;
- If needed, people are able to access housing or community care solicitors.

Someone might be eligible to access support from the Local Authority, but there may be barriers to accessing it. If the person would like to access support via this mechanism, then Places of Safety should be able to refer them to a legal representative, or to support organisations outside of the NRM with a good understanding of the benefits system, housing and community care, who can advocate for the individual to access support in line with their entitlements.

It may be necessary to contact a community care solicitor. The person should be informed as to how they can enter the NRM at a later date if they so wish.

4. MEETING HEALTH NEEDS

Urgent medical needs should be dealt with as a priority when a person enters a Place of Safety, but there may be other, on-going, health care needs that require attention; these should be addressed as part of a personalised and confidential needs assessment (for example mental health, dental treatment, allergies, prescriptions, contraception, sexual health, pregnancy and post-natal care), and referrals onward where needed.

**Services should ensure:**

- Provide access to medical assistance when needed;
- Provide the necessary time and space for survivors to rest;
- Ensure survivors are escorted, transported and supported appropriately to attend appointments as and when required;
- Ensure staff have First Aid training;
- Ensure medical referrals are recorded while face to face with the survivor; and
- Ensure referral pathways are available for trauma and mental health care support.

For a survivor of trafficking to be able to focus on information about their options and consider their next steps, it is vital that they are well cared for and able to access medical services. Without feeling well, a survivor of trafficking should not be expected to make a decision about their future. Places of Safety should have good links with medical care providers.

Principles that underpin early support provision for survivors of trafficking.
5. MEETING BASIC MATERIAL NEEDS

Services should promote well-being, and enable people to begin to rebuild their sense of self and autonomy in a positive way, by providing different types of material assistance. If basic material needs are not met, survivors will be unable to work towards sustained, long-term recovery and pursue justice. This is a particularly significant issue for survivors of trafficking, due to the strong link between circumstances of poverty and the risk of re-trafficking and further exploitation.

Meeting basic material needs of survivors, services should provide:

• Mobile phones, SIM cards and top-up credit, as well as appropriate locations for making calls in privacy;
• Appropriate clothing including warm coats, comfortable shoes, underwear and clothes, including those needed for religious observance;
• Access to a hygienic bathroom, which can be locked, with a shower, a toilet and clean towels;
• Gender appropriate toiletry packs;
• Spectacles or lenses and associated products;
• Special packs for parents with children of different ages, including nappies and books or age appropriate activity packs;
• Special packs for supporting women who are pregnant and for breastfeeding mothers, including maternity bras;
• Access to computer, Wi-Fi, photocopier, scanner and printer, in confidence and free of charge;
• Parental support including access to safe space with toys and educational and reading materials for children of different ages. Access to cots, baby food, age appropriate baby formula and feeding bottles, as well as sterilization equipment and the means to safely prepare food and formula, should be provided;
• Separate sleeping arrangements for parents with children; and
• Cash allowance for subsistence to cover specific food, additional hygiene needs, haircuts and travel costs, including appropriate forms of travel (i.e. accessible for people with disabilities, or those travelling with young children).

It is essential that catering for food respects religious and cultural differences whilst being nutritious and plentiful. No-one should go hungry because there is nothing that is suitable for them, especially young children accompanying adults.

6. EARLY LEGAL ADVICE

To ensure that adult victims of trafficking and slavery are able to give informed consent to a referral into the NRM, potential victims should be entitled to up to five hours of legally aided immigration advice prior to making a decision as to whether to enter the NRM. Services providing early support, including Places of Safety, should secure links with independent legal advisors that have experience of working with this client group and can offer specialist knowledge in face to face sessions. Legal aid is not automatically available in England and Wales pre-NRM for immigration advice, but a straightforward amendment to the operation of the existing legal aid scheme would enable this advice to be delivered.

To ensure genuine informed consent, services should provide:

• Access to specialist, face to face, independent, legally aided legal advice based on the different needs of survivors;
• Immigration legal advice before making an NRM referral, for all survivors of trafficking and modern slavery who are not British citizens;
• Access to legal advice on housing, community care, compensation and criminal matters for all survivors of trafficking and modern slavery;
• A funds allowance to cover any travel necessary to see a legal representative; and
• Registered interpreters and language support.

“Early legal advice will mean that issues are more likely to be resolved early on, potentially preventing cases ending up in costly litigation and unnecessary trauma”.

7. HIGH QUALITY ADVICE AND SUPPORT

For every survivor there should be an appropriate pathway for provision which considers, and is tailored to, their specific individual risks and needs. Services should empower and enable survivors to be placed at the centre of any decision-making process and support must be prioritised in accordance with their individual needs. Places of Safety should be given enough resource to ensure they are able to provide this level of advice and support.

**Services should:**

- Be staffed by qualified professionals with appropriate training and knowledge (including case management, advocacy experience and trauma training);
- Be able to provide advice quickly and efficiently on a range of matters, not only advice about the NRM process;
- Have the ability to give, or facilitate access to, one-to-one non-legal advice in a confidential setting;
- Provide access to 24/7 interpreting services;
- Provide printed materials accessible in different languages;
- Provide information and advice pathways accessible for people with disabilities;
- Provide advice on entitlements and options including alternatives to the NRM, employment opportunities and the options for returning home; and
- Check systems to ensure that onward referrals are only made with the survivors informed consent.

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8. ENABLING CHOICES AND OPTIONS FOR REFERRAL PATHWAYS AND SUPPORT

A duty of care does not end when there is a referral to the NRM, equally an NRM referral is not always the only pathway to support. Survivors should be enabled to explore and understand both NRM and non-NRM pathways of support to be able to provide their informed consent. Entering the NRM does not oblige the person to consent to receiving support, they may value having a trafficking decision made without wishing to take up the support offer. The right of the person to choose if they want to enter the NRM must be respected. Services should be able to understand and provide alternative referral pathways based on an individual assessment of need and the survivor’s freedom to choose. If the NRM is the chosen option First Responders need to inform the victim of the government’s privacy policy as part of ensuring people are fully aware of the consequences of entering the NRM. Survivors also have a right to be told they can enter and leave the NRM at any time and this should be made explicit in all verbal and written communication.

**Services should:**

- Identify immediate needs based on a personalised risk assessment and communicate to the survivor what support and options are available to them both within the NRM and outside of it (including employment opportunities, medical, food, clothing, accommodation, hygiene, children, pregnancy care, and the importance of being located within a geographical area to maintain treatment, support networks, schooling etc, or of being moved away from risk etc);
- Only make an onward referral with informed consent, and have systems in place to ensure this can be updated over time should they change their mind;
- Make the onward referral in person, all details of which - including but not limited to a disclosure - must be stored on a database that can be accessed by the survivor at a later date. At this stage any disclosure may be only partial, and it should be noted if the referral made under difficult circumstances and therefore may include inaccuracies; and
- Provide clear written details for the survivor about their referral, so that they can keep all their personal information and records (if it is safe to do so). This should be offered electronically and in hard copy and include the date and time of the referral and the name and contact details of the referrer.

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National Referral Mechanism (NRM)

- If a referral to the NRM is made, this should be done together with the survivor, in person, so they are able to read the content of the NRM form and accompanying narrative in a language they understand before they sign the form; consent can only be obtained after they have understood and agreed to the content;
- First Responders must explain their own privacy note prior to ‘processing data’ and explain the Home Office’s policy prior to completing and submitting any personal data;
- All survivors should be provided with a copy of the NRM form at the point it is submitted and know they can request copies in the future;
- All survivors should be able to get copies of any associated paperwork; for example, correspondence about the referral that may arise after it, or supplementary documents that are sent in (before the NRM Reasonable Grounds decision), and the consideration minutes accompanying any decision;
- Access to any NRM related documents should be easy for the client if asking directly or if requested by any representative or third party who has the appropriate consent (i.e. a consent form) and should not be by way of a subject access request or require a fee to be paid;
- Staff acting as First Responders to the NRM need to be fully trained and able to demonstrate their knowledge of what happens with different authorities after an NRM referral when taking consent. This includes communicating that if a person chooses to enter the NRM, the NRM form will be shared with the Competent Authority, and then with the police force local to the exploitation, who may conduct an investigation, regardless of whether the survivor wish to report the crime – but that this does not mean they have to engage with police;
- Advocates or caseworkers within the Places of Safety and NRM First Responders may be contacted in the future to assist with the case, so it is essential that accurate notes are kept, following organisational policy and Data Protection guidelines.

9. CONFIDENTIAL DATA MANAGEMENT

Survivors of trafficking and slavery are vulnerable persons. Their vulnerability may not be immediately obvious or visible. Therefore, it is essential that policies and procedures are in place which set limits for safe, acceptable and effective behaviour by those who support and work with them. The personal information and history of each survivor is extremely sensitive to them and it carries implications for their legal status in all respects, and therefore for their ongoing and future safety. Data confidentiality does not mean that an organisation or service should not be subject to external scrutiny, transparency or accountability mechanisms, see Core Principle 10.

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"If the person is a vulnerable adult they may still be entitled to other forms of support from the local authority, both under international legislation (Council of Europe Convention on Action Against Trafficking in Human Beings (ECAT), the European Convention on Human Rights (ECHR), the EU Anti-Trafficking Directive and domestic law (Care Act and guidance, Localism Act, Housing Act and Homelessness Code). The ‘Modern Slavery Protocol for Local Authorities’ on statutory duties and powers has more detail on these provisions”

Adult Modern Slavery Protocol for Local Authorities; Statutory duties and powers, Human Trafficking Foundation (2018)
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- Ensure that they explain their professional duty of confidentiality to survivors at their initial meeting, and that this is re-emphasised and explained throughout the course of the professional relationship;
- Ensure that staff explain to all survivors their professional duty of safeguarding the individual and what information will be shared if they have to raise a safeguarding concern;
- Manage any personal and background information provided by survivors in such a way that it is only disclosed to third parties or agencies with their prior informed consent; well-constructed consent forms should be sufficient to avoid the future burden of ‘Subject Access Requests’. This duty relates to information that is held on paper, computer, visually or audio-recorded or held in the memory of the professional;
- Ensure any information-sharing agreement specifies who the information can be shared with and specifically which information will be shared. It should not be a blank authorisation for information to be shared with other parties to be decided at a later time, and
- Share the necessary information with the appropriate authorities as a matter of priority in any situation where there is a concern that a child is at risk of harm.

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“Exceptional circumstances in which the duty of confidentiality may be overridden should be set out clearly in each service’s policies and procedures and explained clearly to each person. They include cases in which provision of information to others is necessary to safeguard an individual(s), or is in the public interest, or where there is a legal duty to do so, for example a court order. The question of whether a disclosure is in the public interest is not a decision to be taken lightly. Solid justification is required before individual rights are set aside and specialist or legal advice should be sought before the information is disclosed.”

Slavery and Trafficking Survivor Care Standards, 2018. Human Trafficking Foundation, Section 1.3 Duty of Confidentiality (Page 28)
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10. ORGANISATIONAL TRANSPARENCY

Trafficking and modern slavery is a serious crime that violates basic human rights and has a devastating impact upon victims. Support should never be contingent upon a survivor’s ability or willingness to cooperate with the authorities. Support should always be offered on an informed and consensual basis, respecting survivors’ choices and human dignity and promoting their rights. In order to ensure that Places of Safety are working in line with the principles a certain level of transparency is required, and Places of Safety have to be open to scrutiny and it should be clear who will be held accountable if there are failings.

Services should be able to demonstrate:

- Clear accountability;
- That they are open to inspection and regular audit reporting;
- A steering group made of service users and those within the sector;
- A mechanism for regular reporting and service user feedback;
- Policies for the recruitment of staff that are based on the skills and competencies suitable for the job. All staff should have undergone an enhanced DBS check;
- Staff and volunteer training and development as an ongoing process and regularly reviewed in line with changing trends, legislation and UK policy;
- Complaint and whistleblowing procedures; and
- Staff and volunteer welfare policies that work to prevent and respond to vicarious traumatisation and/or burnout.

Providing support to survivors of trafficking is an important job, the impacts of which can be life changing. Creating a safe space and building trust with a survivor isn’t easy and professionals need to be appropriately supported to ensure survivors are given the suitable care.

Children

Any unaccompanied or separated child under the age of 18 years must be immediately referred to the Local Authority. Those referred to the Local Authority need to be accompanied by a specialised advocate or designated Independent Child Trafficking Advocate’s (ICTA) or Guardians. At the time of writing this, ICTAs are not nationally available therefore trained staff must accompany and support children to ensure children are safeguarded. Young people whose stated age has been disputed should have the opportunity to access qualified legal aid providers with expertise on age assessments to ensure they receive the correct advice if they are not happy with their age determination.

From time to time adults accompanied by their own child or children will be referred into an adult Place of Safety and services need to ensure they fully comply with their legal duties and safeguarding obligations to the child, and not just the adult. Services should be able to provide tailored support and referral pathways for children of all ages, including infants and older school age children. The practical aspects of this go far beyond having a child safeguarding policy and a play area. Planning for children needs to be addressed in more details beyond what is covered within the 10 Core Principles.

Child safeguarding policies and procedures should be robust and promoted throughout the service irrespective of the parenting capacity of the adult. Where there is a risk of harm or an immediate child protection issue there must be referral to the police without delay.
Each organisation or service should adopt policies and procedures which are centrally held and utilised in the training of all staff. At minimum these should cover the items below, and their implementation should be recorded and monitored.

- Equality, Diversity and Non-discrimination
- Health and Safety
- Referral and exit policies
- Informed consent
- Disclosure and Confidentiality
- Data Protection and GDPR compliance
- Professional boundaries
- Risk Identification and Management
- Supporting and safeguarding vulnerable adults and children – including but not limited to requests for capacity and child in need assessments
- Working with service users with complex needs
- Recruitment
- Staff Support, Supervision and Development
- Staff Training
- Working with Interpreters
- Outreach
- Lone Working Policy
- Stress Management Policy
- Volunteer Policy
- Complaints procedures
- Whistleblowing procedures

Slavery and Trafficking Survivor Care Standards, 2018.
Human Trafficking Foundation, Section 1.4 Internal Policies and Procedures (Page 29)

With special thanks to Christine Beddoe