

The Development of a Preliminary Training Framework for Local Authorities as Modern Slavery First Responders in England and Wales



In partnership with

**The Anti Trafficking
Monitoring Group**

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Executive summary

Modern Slavery (MS) is a serious and growing issue in England and Wales and Local Authorities (LAs) play a key role in identifying and supporting survivors. However, many LAs face challenges in fully adopting their legal responsibilities as First Responders (FRs). This report explores these challenges and opportunities, focusing on improving training, awareness, and collaboration to strengthen the local response to MS.

Why focus on local authorities?

LAs are responsible for housing, social care, education and safeguarding, services that survivors of MS often use and seek help from. However, research shows that frontline staff may lack the necessary training and awareness to recognise cases of exploitation and respond effectively. While the Modern Slavery Act 2015 sets out clear legal obligations for LAs to prevent, identify and offer support to these survivors, they often struggle with limited resources, inconsistent training and gaps in inter-agency collaboration.

What does this study do?

This research was conducted to better understand the role of LAs in tackling MS and to identify ways to improve their response. A multi-phase study was carried out, including:

- **Reviewing** modern slavery statements (MSSs) published by LAs.
- **Surveying** council specialist staff to assess their knowledge, training, and experiences.
- **Interviewing** MS Leads at the LAs to gain deeper insights into the challenges they face.

Key findings

The study identified several barriers and areas for improvement:

- 1. Limited awareness and training:** Many LAs staff are unaware of their role as FRs. Training, where available, is often inconsistent and not tailored to local needs. Some staff assume that only the police can deal with MS cases.
- 2. Fragmented responses:** While some councils have strong MS policies, others lack clear processes for identifying and supporting survivors. This results in an inconsistent approach across different regions.
- 3. Barriers to multi-agency working:** Effective MS response requires collaboration between LAs, law enforcement, and community groups. However, miscommunication, lack of trust, and unclear responsibilities hinder joint efforts.

- 4. Gaps in supply chain oversight:** LAs have a legal duty to monitor their supply chains for potential exploitation, but reporting is inconsistent and many councils lack the resources to conduct thorough checks.
- 5. Examples of good practice:** Some LAs have developed strong partnerships with community organisations, invested in specialist MS teams, and introduced innovative training approaches. These examples highlight what is possible with the right strategies in place.

Preliminary training framework and recommendations for improvement

Based on the findings and on previous tools in the sector, the report suggests several actions to strengthen the role of LAs as First Responders:

- **Standardise training:** Introduce a nationally recognised, three-tier training framework:
 - Tier 1** Basic awareness training for all staff (e-learning).
 - Tier 2** In-depth, face-to-face training for frontline workers and councillors.
 - Tier 3** Advanced training for specialist staff making National Referral Mechanism (NRM) referrals.
- **Enhance collaboration:** Improve partnerships between LAs, law enforcement, and community organisations to create a more coordinated response.
- **Increase resources:** Secure dedicated funding to support MS training and specialist teams within LAs.
- **Strengthen accountability:** Establish clearer processes for monitoring MS risks in supply chains and reporting on actions taken.
- **Improve communication:** Ensure all staff understand their FR responsibilities and provide clear referral pathways.

Why does this matter?

MS can happen anywhere and LAs are on the frontline of prevention and support and 2 million people work in Local Government. Strengthening their capacity to act as First Responders is critical to ensuring survivors receive the help they need. By improving training, collaboration, and accountability, LAs can play a vital role in tackling MS and protecting vulnerable individuals where there is sometimes distrust of other FRs like the Home Office or Police and others still like charities do not have the resources or national coverage to always respond effectively.

This report highlights the urgent need for action and provides practical recommendations to build a more effective, coordinated response. With the right support, LAs can lead the way in combating MS and making communities safer for everyone.

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Acronyms

ATMG	Anti-Trafficking Monitoring Group
FR	First Responder
HEIF	Higher Education Innovation Fund
HTF	Human Trafficking Foundation
LA	Local Authority
LGA	Local Government Association
MS	Modern Slavery
MSSs	Modern Slavery Statements
NRM	National Referral Mechanism
NGO	Non-Governmental Organization
NOC	No Overall Control (used in local government political control context)
SPOC	Single Point of Contact

1. Introduction

Local Authorities (LAs) in England and Wales are pivotal to implementing laws, policies, and best practices aimed at preventing Modern Slavery (MS) and to identifying and safeguarding survivors through support services. The 339 authorities of England and Wales are either direct suppliers of or contract out many services where cases of MS can potentially occur and can therefore be detected. These include housing provision, education, social care, refuse collection and parks/street maintenance.

In light of their key role on their territories, both directly and in network with the third sector,¹ LAs are exceptionally well-positioned to act as MS First Responders (FRs) and therefore, they are designated to act as such.² FRs are organisations which are authorised to identify, refer, and support potential survivors of MS into the National Referral Mechanism (NRM),³ for instance by providing housing, emergency accommodation, social services, financial assistance, and healthcare. Additionally, given limited government support to expand the number or capacity of third sector FRs, there have been calls for an increased role of LAs as FRs (ATMG, 2024). Against this background, and in response to both the legislative framework⁴ and voluntary sector's initiatives,⁵ many LAs are in fact developing strategies to confront MS more effectively and to be better equipped to act as FRs.

Despite the growing awareness and efforts, it has been found that many LAs frontline workers⁶ remain unaware that the responsibility as FRs falls within their remit. As an instance, previous studies have found that LAs staff may assume that only the police can handle MS cases, or feel they lack the necessary capacity, or have not been trained in referring individuals to the NRM (ATMG, 2024). In general, relatively little is known about how LAs shape and carry out these policies on the ground.

- 1 Third sector refers to organisations that are neither part of the public sector (government) nor the private sector (businesses). Organisations in third sector can include:
 - NGOs: operating independently of the government.
 - Charities: Organisations: providing help and raise money for those in need.
 - Voluntary groups: Organisations where individuals come together to offer their time and services voluntarily for various causes.
 - Community groups: Local groups focused on community improvement and engagement.Third sector organisations provide services, support, and advocacy for various social issues, complementing the work done by the public sector.
- 2 The list of First Responders is available here: <https://www.gov.uk/government/publications/human-trafficking-victims-referral-and-assessment-forms/guidance-on-the-national-referral-mechanism-for-potential-adult-victims-of-modern-slavery-england-and-wales>.
- 3 In this report, we adopt the term 'survivor', unless specific reference is being made to Home Office policy, where the language is mirrored, and the terms 'victim' or 'potential victim' are used instead. The NRM is a framework for identifying and referring potential victims of MS and ensuring they receive the appropriate support.
- 4 For example, Section 54(4) of the Modern Slavery Act (2015) requires large organisations to publish annual statements on supply chain transparency.
- 5 A notable example is the Co-operative Party's Charter Against Modern Slavery (2018), which over a hundred councils had adopted by November 2024.
- 6 LAs directly employ 1.18m people (LGA, 2024) as well as potentially hundreds of thousands of contract staff.

The project and this report

This research project was conceived and conducted in response to the existing gap in knowledge and practice regarding the pivotal role of LAs as MS FRs in England and Wales. A mixed-method, multi-phase design was adopted with the aim of exploring:

- a.** LAs' roles as FRs and how they build staff and local councillors' awareness and capacity to fulfil FRs' responsibilities;
- b.** How LAs have developed stakeholder collaborations and community involvement;
- c.** LAs' strategic governance and monitoring of their supply chains.

This report is structured in this way. **Section 2: Local authorities and modern slavery**, explores key challenges such as limited awareness, inconsistent training, and fragmented accountability. It also introduces the study's four research questions:

- 1.** How do LAs perceive their capacity to implement their FR responsibilities?
- 2.** How do they collaborate with NGOs, community groups, and law enforcement?
- 3.** How do they integrate legal obligations, particularly supply chain transparency, into governance?
- 4.** How can LAs develop or access a structured training framework?

As part of this section, a **Conceptual Framework** subsection introduces key theoretical perspectives, including *socialising accountability* and *intelligent accountability*. These perspectives provide insight into how LAs can move beyond compliance-driven approaches towards more dynamic, community-based responses to MS.

Section 3: Methods, details the study's three-phase approach: analysing MSS, conducting an online survey, and interviewing MS Leads.

Section 4: Findings, presents key insights from each research phase. The analysis of MSSs shows that while some LAs publish detailed commitments, many fail to provide transparent reporting or regular updates. Survey responses indicate that although most LAs recognise MS as a priority, training and awareness remain inconsistent. This leaves many frontline staff unsure of their responsibilities. Interviews with MS Leads further highlight issues such as unclear referral pathways, gaps in multi-agency coordination, and the underutilisation of community partnerships to enhance survivor identification and support. The findings suggest that while some LAs are making progress, responses to MS remain uneven across different councils.

Section 5: Preliminary Training Framework, proposes a three-tier model to strengthen staff preparedness, building on the findings of this study as well as the existing valuable tools for victims/survivors' identification and support (e.g., Anti-Slavery London Working Group, 2018a, 2018b & 2018c; Skills for Care, 2020). The first tier consists of basic awareness training for all LAs employees, delivered through accessible e-learning modules. The second tier provides enhanced, face-to-face training for frontline staff and councillors, using practical case studies and scenario-based learning to improve engagement. The third tier focuses on advanced training for specialist staff responsible for making NRM referrals, ensuring they develop expertise in survivor identification, safeguarding protocols, and legal obligations. The section also emphasises the need for continuous professional development, structured refresher courses, and a *Train the Trainer* approach to build internal capacity within LAs.

This framework is intended to constitute only as a preliminary working document, which is currently being shared with our study participants as well as more widely with LAs in England and Wales, MS third sector organisations, other relevant stakeholders and experts-by-experience. We are inviting them to provide feedback on its usefulness, applicability, feasibility, structure and delivery methods, and its development into a training curriculum.

The feedback form can be accessed on a website via the following [link](#). The link will be available until Monday 8th September 2025.

The feedback gathered will inform into the planned knowledge exchange event in summer 2025, where we aim to start co-developing the First Training Framework for Local Authorities as Modern Slavery First Responders in England and Wales.

The **Discussion (Section 6)** integrates findings from the study and is divided into three subsections; The **Main Results** highlight the disparity between LAs policies and frontline practice, with training gaps, unclear referral processes and limited cross-sector collaboration emerging as key barriers to an effective MS response. The **Limitations** section reflects on constraints such as the low survey response rate, potential selection bias in interview participants, and variations in how different LAs approach MS. The **Recommendations** outline practical steps for improvement, including implementing a nationally standardised training framework, strengthening multi-agency partnerships, improving supply chain monitoring, and ensuring dedicated funding for MS initiatives within LAs. Finally, the concluding note reinforces the urgent need for structural reforms to enable LAs to fulfil their responsibilities as FRs with the Devolution Bill and restructure of local government presenting an opportunity for these to be implemented. It emphasises that by investing in training, fostering collaboration, and embedding accountability mechanisms, LAs can play a leading role in protecting vulnerable individuals and preventing exploitation in their communities.

2. Local authorities and modern slavery

Local councils in England and Wales play a crucial role in addressing MS. As often the first point of contact for survivors of human trafficking, forced labour, debt bondage, child slavery, forced marriage or domestic servitude, they are responsible for coordinating local responses and leveraging their close connections with community stakeholders to identify and address issues (Page & Griffin, 2023). Moreover, MS legislation, such as the Modern Slavery Act (2015), imposes significant duties on councils to ensure corporate accountability and monitor supply chains (Jones & Comfort, 2022; Flynn & Walker, 2020; Rao et al., 2022; Redmond, 2020; Meehan & Pinnington, 2021; Gutierrez-Huerter et al., 2023; Rogerson et al., 2020). Despite these legislative mandates, weak enforcement mechanisms and overly aspirational corporate responses can limit their effectiveness.

A collaborative, community-based approach is essential. By working with law enforcement, community groups, and other local stakeholders, councils can overcome communication gaps, cultural barriers, and resource constraints (Page & Griffin, 2023; Gold et al., 2015; Gardner & Brewster, 2020). Councils are also well placed to tackle the root causes of MS, including poverty, vulnerability, and environmental degradation, by drawing on their local expertise (Jackson et al., 2020; Hobbs, 2023; Gardner & Brewster, 2020). Enhancing effectiveness further requires establishing local networks, comprising community officers, charities, police, and councillors, that facilitate systematic dialogue and collective accountability (Ahmad, 2023; Quayle et al., 2020; Crilly et al., 2015). However, challenges such as insufficient guidance, limited funding, and staffing constraints (Page & Griffin, 2023; Gardner & Brewster, 2020) underscore the need for greater national Government support.

In short, LAs are uniquely positioned to lead in the fight against MS through their direct community engagement and legislative responsibilities. Their ability to drive corporate accountability and foster collaborative, localised responses is a key strength, but overcoming persistent challenges will require enhanced support from national authorities and the systematic development of local networks.

Conceptual background

Our preliminary training framework builds on Roberts' (2009) concept of 'socialising accounting', which emphasises dialogue, deliberation, and relational accountability among stakeholders (Yusuf, 2020; Castillo & Gabriel, 2020). This approach views accountability as a collaborative process, fostering inclusive decision-making and co-created mechanisms (Ferguson et al., 2011; Soobaroyen & Mahadeo, 2012). Additionally, 'intelligent accountability' promotes continuous learning and ethical governance (Yates et al., 2019; Helle & Roberts, 2023). While cultural barriers to reflection exist, these practices can enhance local councils' ability to address MS challenges (Thuy & Hoque, 2022; Khalifa, 2013).

Local authorities' first responder role and capacity building

LAs are vital to identifying and protecting MS survivors, yet their FR status is often underutilised (Page & Griffin, 2023; Meehan & Pinnington, 2021). Unlike local third sector organisations, FRs possess the advantage of national coverage. Their responsibilities in housing, emergency accommodation, education and social services place them in a strong position to support vulnerable individuals through the NRM process (Flynn & Walker, 2020). However, their effectiveness is hindered by misconceptions that, for example, investigations are solely a police matter (HMICFRS, 2017), limited training and resources.

Strengthening the capacity of FRs is crucial, particularly in underserved regions such as the North East of England, rural areas (Gardner & Brewster, 2020), where unclear FRs guidance contributes to fragmented responses (Meehan & Pinnington, 2021), and devolved nations, where coverage remains sparse. Potential victims, especially children, are often groomed in rural locations and trafficked to larger cities via County Lines, underscoring the need for proactive FR engagement. Additionally, survivors' distrust of law enforcement and immigration authorities discourages them from disclosing exploitation when statutory FRs are their only option. This reluctance has been exacerbated by recent legislative changes, including the Nationality and Borders Act (2022), which have reinforced exploiters' coercive control (Magugliani et al., 2024). Expanding NGO and LAs FR capacity is essential to ensuring that survivors feel secure enough to enter the NRM. However, there remains no formal process for new organisations to obtain FR status, and existing NGOs face resource constraints that limit their reach (ATMG, 2024).

To address these barriers, Roberts' (2009) concept of 'socialising accountability' suggests a framework. Rather than viewing FR responsibilities as a compliance task, LAs could foster a culture of dialogue, targeted training, clear referral pathways and cross-department collaboration (Ferguson et al., 2011; Yusuf, 2020). The notion of 'intelligent accountability' (Roberts, 2009; Helle & Roberts, 2023) promotes continuous process improvement based on frontline feedback (Aikins, 2011), addressing issues such as distrust of authorities (Flynn & Walker, 2020; Page & Griffin, 2023).

Maximising the FRs role requires political will, clear policy guidance and sustained financial support to enhance staff capacity, organisational clarity and enhanced regional scope (Gardner & Brewster, 2020). These factors shape how LAs perceive their ability to fulfil their FR responsibilities, leading to our first **Research Question 1 (RQ1)**:

RQ1: What do LAs in England and Wales perceive as their capacity to adopt and implement their FRs status? What are the internal and external factors (e.g., resource constraints, organisational culture, policy clarity) that most significantly shape their ability to identify, refer, and support potential victims through the NRM?

Intelligent accountability and community-based approaches

LAs increasingly coordinate multi-agency responses to MS, recognising that forced labour and exploitation require shared expertise and collaboration (Page & Griffin, 2023; Gold et al., 2015; Gardner & Brewster, 2020). Partnering with NGOs, community groups, and law enforcement enhances their reach, strengthens referral pathways, and improves survivor support (Gardner & Brewster, 2020; Meehan & Pinnington, 2021). In areas with limited NGO presence or survivors' distrust of police or Home Office FRs, LAs' convening power fosters more inclusive intervention strategies, ensuring that survivors are not left without access to support (Page & Griffin, 2023).

This multi-stakeholder approach aligns with Roberts' (2009) aforementioned concept of 'socialising accountability' where LAs create dialogic spaces, such as safety forums or task forces, to bridge communication gaps and address resource limitations (Ferguson et al., 2011; Mohamed et al., 2024). Moving beyond a compliance-driven model, relational accountability encourages shared responsibility among law enforcement, NGOs and grassroots organisations (Soobaroyen & Mahadeo, 2012; Coyte et al., 2013). By facilitating inclusive decision-making, LAs can enhance their legitimacy, build trust in marginalised communities, and improve survivor engagement, particularly in areas where fear deters survivor engagement (Crilly et al., 2015; Page & Griffin, 2023). Socialising accountability ultimately enhances local resilience and ethical governance (Roberts, 2009). Hence, our **Research Question 2 (RQ2)** is posed as:

RQ2: How do LAs collaborate with NGOs, community groups, and law enforcement agencies to promote accountability in a manner that influences the development of proactive, victim-centred strategies against MS, particularly in regions with sparse coverage?

Strategic governance and supply chain responsibilities

Under the Modern Slavery Act (2015), particularly Section 54 on supply chain transparency, LAs operate at the intersection of public governance and corporate accountability (Jones & Comfort, 2022; Flynn & Walker, 2020; Rao et al., 2022). They are responsible for overseeing third-party suppliers, contractors, and businesses, requiring clear policies, audits and oversight mechanisms to detect and prevent exploitation (Meehan & Pinnington, 2021; Redmond, 2020). By embedding ethical standards in procurement, training suppliers, and establishing whistleblowing channels, LAs act as both regulators and collaborators, thereby enhancing public trust and accountability (Rao et al., 2022; Gold et al., 2015; Crilly et al., 2015).

The concept of 'intelligent accountability' (Roberts, 2009; Helle & Roberts, 2023) is usefully applicable here too, as it promotes proactive learning and moral responsibility beyond mere compliance. Through risk assessments and regular reporting, LAs can adapt MS prevention strategies to shifting legal and social contexts (Flynn & Walker, 2020; Jones & Comfort, 2022). Multi-stakeholder collaboration further strengthens these efforts, ensuring that councils, businesses and community actors reassess supply chain vulnerabilities and improve intervention mechanisms (Rogerson et al., 2020). By embedding MS prevention into regional economies through transparent governance, LAs reinforce ethical oversight and long-term accountability. **Research Question 3 (RQ3)** is the following:

RQ3: How do LAs incorporate their legal obligations under the Modern Slavery Act (2015), particularly Section 54 on supply chain transparency, into their broader governance and accountability frameworks? These include mechanisms such as structured oversight, continuous learning, and community engagement, which collectively enhance their long-term efficacy in preventing MS and safeguarding vulnerable individuals at a regional level.

Preliminary training framework

Under the Modern Slavery Act (2015), they must also oversee supply chains to mitigate risks (Jones & Comfort, 2022; Flynn & Walker, 2020). However, inconsistent training, limited awareness, and a lack of structured guidance hinder their LAs FR duties, leading to fragmented survivor protection.

Valuable tools in relation to survivors' identification and survivors' support needs have been developed. In particular, the Slavery and Trafficking Survivor Care Standards, developed by the Human Trafficking Foundation (Human Trafficking Foundation, 2018), first published in 2014, updated in 2018, and currently under experts' consultation for further update, is the tool of reference for guiding principles and practical recommendations for supporting survivors. These Standards are government-endorsed, referenced in the Modern Slavery Victim Care Contract, and used by the Care Quality Commission to inspect, for example, safe houses and outreach services, ensuring a baseline of rights-based, trauma-informed, integrated support beyond the NRM's reflection period.

The HTF Care Standards have also informed the Skills for Care's Training Framework for the Identification, Care and Support of Victims and Survivors of Modern Slavery and Human Trafficking (Skills for Care, 2020). This training framework sets out nationally recognised training standards to ensure a consistent, quality response across the workforce. Developed in partnership with survivors, frontline practitioners, legal advocates and senior stakeholders (including the Independent Anti-Slavery Commissioner), it aligns with the Modern Slavery Act, the Slavery and Trafficking Survivor Care Standards and trauma-informed principles to improve survivor outcomes. This is a crucial training framework in the sector, with which the one developed within this study is set in tight dialogue (see more below, Section 5).

More recently, The Modern Slavery Core Outcome Set (MSCOS) for Survivor Recovery, Well-being and Integration (Paphitis et al., 2023), led by survivors and experts, has identified seven essential, interdependent outcomes,⁷ fundamental to the needs of any person who has suffered prolonged and repeated psychological, and often physical violence and subjugation in modern slavery.⁸

The Home Office's FR Training Programme (Home Office, 2024) covers MS legislation and potential victim identification but lacks practical relevance for LAs. The Shiva Foundation's (2022) self-assessment tool helps evaluate risks but does not provide structured frontline training.

7 The seven outcomes are: secure and suitable housing; safety from traffickers and other abusers; long-term, consistent support; trauma-informed services; purpose in life and self-actualisation; access to medical and healthcare services; and access to education – to be embedded across all survivor services, addressing the patchy, inconsistent delivery that survivors routinely report.

8 MSPEC. (15 November 2023). [Survivor support](#)

Other tools developed by the HTF, including with the Anti-Slavery London Working Group (LWG) which the HTF coordinates, and in collaboration with other partners, offer together a invaluable toolkit for strengthening the UK's modern slavery response and inform training and survivors' identification and support. With HTF, the British Institute of International and Comparative Law (BIICL) Identification Report offers a thorough analysis of legal definitions, NRM referral patterns, and Duty to Notify data, and recommends improved First Responder training and consent processes (Magugliani et al., 2024). The HTF Lived Experience-led Training Report (Human Trafficking Foundation, 2022) evaluates a survivor-consultant Train-the-Trainer programme, showing significant gains in professionals' confidence and skills in identifying and supporting victims.

Together with the LWG, HTF has produced several resources to help LAs improve their response to human trafficking and modern slavery, in particular the identification and support offered to adult survivors. The Local Authorities' Identification Protocol (Anti-Slavery London Working Group, 2018a) provides clear definitions, exploitation indicators and case examples to guide LAs frontline staff; this is a particular pertinent tool to our study as it outlines a process for LAs to identify potential victims, understand their statutory duties, and make referrals through the NRM. The protocol also includes guidance on definitions, indicators, and referral pathway. Other two relevant tools are the NRM Process Guide (Anti-Slavery London Working Group, 2018b) – which details Single Point of Contact roles, the five-day reasonable-grounds decision, the 45-day reflection period, and risk and needs assessment procedures – and the Statutory Duties Protocol (Anti-Slavery London Working Group, 2018c) which outlines adult safeguarding obligations under the Care Act, including anonymous Duty to Notify when referral consent is withheld.

Incorporating these tools into a structured, nationally recognised and updated training framework for LAs as MS FRs in England and Wales is needed. There is also a need to look beyond London, in fact, training gaps are even greater at the town and parish council level, where our analysis of how it is delivered suggests that it remains voluntary, inconsistent and generalised. While regional MS coordinators (Human Trafficking Foundation, 2025) enhance expertise, our study has shown that training deficit remain unresolved. A sustainable solution must integrate accountability (Roberts, 2009) and continuous learning to improve governance, survivor protection, and a coordinated national response. Therefore, **Research Question 4 (RQ4)** has been articulated as follows:

RQ4: How can LAs develop or access a robust, context-specific training framework for FRs that accounts for their unique operational contexts and fosters effective identification, prevention, and support for survivors of MS?

3. Method

Study design

The research was conducted by a team of academics at Middlesex University, London, in partnership with The Anti-Trafficking Monitoring Group (ATMG), a coalition of thirteen UK-based anti-trafficking organisations, and was funded by HEIF (Higher Education Innovation Funding), a UKRI fund, which is sponsored by the Department for Science, Innovation and Technology (DSIT).

Our study was structured into three phases, using a mixed-methods approach (Creswell & Creswell, 2018) in order to more comprehensively answer the study research questions and develop a training framework to better prepare LAs in the role as MS FRs. In Phase 1, we analysed LA's Modern Slavery Statements (MSSs); in Phase 2, we conducted an online survey of local authorities, containing both closed and open questions; in Phase 3, one to one, semi-structured online interviews with LAs MS leads were conducted. The study was performed collaboratively, however some research team members were more involved in certain phases of the study. Our partner the ATMG, consistently supported the research team throughout all the phases, including the writing of this report. The project's activities started in January 2023 and concluded in April 2024.

Phase 1. Online modern slavery statements

The first phase of our investigation focused on examining the textual content of the MSSs that LAs provided on their webpages. Some LAs published separate MSSs, while others created dedicated webpages to provide general information about MS and keep the public informed. We started this phase in January 2023 and completed it in July 2023. We analysed both the MSSs and the webpages addressing MS issues from the selected councils. Using the index devised in our previous studies for evaluating the MSSs of large organisations, based on Section 54 of the Modern Slavery Act 2015 (Parsa et al., 2022), the content analysis provides an understanding of if and how LAs communicate their compliance efforts, as well as the effectiveness of these communications in fulfilling legislative requirements (Hussein, 2009; Fielding, 2012). Phase 1 was led by Hettiarachchi, Brealy and Parsa.

To examine those reported, we randomly selected 15% (48) of the 339 councils in England (317) and Wales (22) using simple random sampling in Microsoft Excel. Among these, only 70% had a MSSs, which represents 10% of all councils. Our results, presented in Table 1, show that only half of the LAs reported annually, and their information was easily accessible. Reporting on MS was a relatively new concept for most LAs. A very small percentage of LAs (27%) had year-on-year statements, and even fewer provided a record of their previous statements online.

Table 1. Modern slavery reporting practices by LAs

Information categories	LAs reporting (%)
Reporting annually	52
Reporting on Financial Year End	42
Improves MSSs year-on-year – a live document	27
Maintains old MSSs online: progress can be monitored	6
Include a link on their MSSs in a prominent place on its homepage	55
Statement signed by a senior member; providing their post & name	61
Statement included a date of signature	55
Information about MS: its types, prevalence & signs on a separate webpage	64

Phase 2. Online survey

The second phase involved conducting a structured survey across LAs to collect both quantitative and qualitative data. This approach aimed to provide insights into the practices employed and the challenges faced by LAs in addressing MS (Hendren et al., 2018).

A survey questionnaire was designed with three sections: Prevention of MS, Identification of Potential Victims and Supporting Survivors. It was targeted at the MS Leads within LAs. Where no formally recognised MS lead existed, the most senior manager responsible for MS-related issues, such as Safeguarding or Community Safety Managers, was invited to participate. Participants were asked about their own LA's organisational awareness, prevention and safeguarding measures, training opportunities and gaps, delivery methods, frequency, content and scope of training, FR capacity and survivor support services.

A total of 339 LAs in England and Wales were invited to participate. Contact details for the Chief Executive of each authority were obtained from a database purchased from Oscar Research, a UK public sector intelligence company. This database also included key information on each authority, such as its tier, political control, size, annual revenue, areas of responsibility, and other relevant characteristics.

The survey was distributed via email invitation in summer 2023, including a direct link to the questionnaire. To improve response rates, additional recruitment methods were employed, such as leveraging local government networks and snowball sampling. Follow-up reminder emails and phone calls were made to non-responding LAs by October 2023, with a particular focus on individuals identified as Modern Slavery Leads or those working in related fields such as community safety.

The survey was conducted anonymously online using Momentive software. Participants were asked about their own LA's organisational awareness, prevention and safeguarding measures, training opportunities and gaps, delivery methods, frequency, content and scope of training, FR capacity, and survivor support services. While some questions required free text responses, most used a Likert scale to gauge participants' level of agreement with various statements related to MS prevention, potential victim identification, and survivor support.

In total, 36 surveys (10.5%) were completed by different LAs. The responses were systematically analysed to identify patterns in awareness levels, training provision, organisational capacity, and survivor support mechanisms. Phase 2 was led by DO and JB.

Phase 3. Online interviews

The third phase of the study employed a fully qualitative approach that allowed us to delve into various perspectives, experiences and roles in shaping and enforcing MS policies. The interviews were conducted to obtain richer narrative insights, offering a deeper understanding of the political, administrative and operational dimensions of MS governance within LAs.

Phase 3 was conducted collaboratively, with Parsa, Ozarow, Lazzarino and Pizzolato jointly leading the interviews. Fais and CH played a significant role in data analysis and interpretation, contributing to the identification of key themes and insights.

A combination of convenience and snowball sampling was used in addition to a purposive approach that aimed to ensure variety in LAs MS leads' geographical location, authority size, tier of local government, rural/urban setting and political control. Recruitment was guided by a list of LAs MS leads' contacts consolidated during the online survey in Phase 2, where survey's respondents were re-contacted and invited for the interview. One interviewee proved crucial in supporting the recruitment of additional interviewees, by circulating the invite among their professional networks. Recruitment occurred via email: potential participants were contacted, and upon expressing interest, they received further information and ethics documents before e-interviews were scheduled. Inclusion criteria required participants to be a MS lead in their LAs.

Semi-structured interviews were conducted between July and November 2023 via Zoom. The interview guide was divided into three sections. In the first section, questions were asked about occurrence of MS in the area, the measures in place to prevent and monitor cases, and how these could be strengthened. The second section focused on identification, in particular covering training and how competent their LAs was perceived to act as FR. The third section was devoted to discussing survivors support, looking at the work in partnership with the third sector and understanding about the Duty to Notify. Probing questions such as 'could you elaborate on this' and 'would you mind

giving an example' encouraged participants to expand their responses. Interviews, lasting between 35 and 70 minutes, were audio-video recorded and transcribed using an automatic tool. Two team members at the time conducted each interview, so to increase team familiarity with the data and speed up the subsequent analysis process, to enhance the multidisciplinary perspective and the research rigour (see below). Five members analysed either the audio files or the anonymised transcripts, allocated to them, with two researchers double-analysing 20% of the data to ensure consistency in the coding book.

Thematic analysis was performed via a dialogic, collaborative process, guided by a pragmatic process to address the research questions (Paulus et al., 2008). A hybrid approach (Fereday et al., 2016) was adopted, whereby we initially divided the data based on themes established deductively from the sections and questions in the topic guide. Following that, we allocated three or four of these initial themes, with relative corresponding data, to each of the five researchers involved in the data analysis. Each researcher thematically analysed their set of data across all the 15 interviews. If necessary, based on the data, researchers modified the initial themes and/or created new ones, and input their analysis, including the identification of significant quotes, into a shared Excel file. Regular team meetings compared and, if relevant, further modified or merged the themes of the individual researchers. As the analysis progressed iteratively, themes evolved and consolidated through collaborative dialogue until a final consensual thematic codebook was established. Analysis of findings and emerging themes took place in July 2024.

Ethics, rigour and positionality

This study sought approval only for Phase 2 and 3, the online survey and interviews, involving the collection of personal data. The study has received full ethical clearance from the Middlesex University Research Ethics Committee (APPROVAL ID 25688/26th May 2023), who reviewed the study.

Before completing the questionnaires and interviews, participants had to review a detailed Participant Information Sheet about the purposes of the research, its terms and conditions and their own role within it. Informed consent to take part was agreed to by selecting this option upon submission. They were also informed of the option to withdraw at any time, with an assurance that personal data would be anonymised.

Potential interviewees were sent a project information and consent form via email, where the scope of the study, the voluntary nature of their participation and the handling and storage of their data, among others, were clarified. These documents were discussed at the beginning of the interview, and consent was taken verbally and on record. All documentation was anonymised, except for the audio-video interview recordings, which were stored securely on a university OneDrive platform using encryption and password protection.

Rigour and trustworthiness within the study were assured by employing a combination of methodologies and data sources, facilitated by the multi-disciplinary research team. This design incorporated a robust triangulation framework, assessing methodology, data sources, investigators, and theories. Frequent team meetings helped to ensure the study's ethical and methodological rigour.

This study brought together colleagues from a diverse set of backgrounds, perspectives, and experiences to address the role of LAs as FRs and their training needs in this important capacity. This research initiative was a collaborative effort between ATMG frontline practitioners and an academic team. The team's varied cultural and linguistic backgrounds, along with a mix of gender identities and ages, enriched the research process. The research team included members from diverse disciplinary backgrounds, such as anthropology, management, social accounting, social policy, and two frontline practitioners from the research partner, ATMG, as well as one member who had several years' experience as a local councillor. Our collective commitment to inclusivity and representation ensured that the research was conducted with sensitivity and respect for the participants involved. By valuing the diverse experiences and perspectives of both the research team and participants, we aimed to contribute to meaningful solutions to better equip LAs MS leads and LAs staff in general to act as MS FRs. By maintaining an ongoing dialogue with participants, and between the academic and practitioners' team, the team demonstrated their commitment to valuing community input and acting on identified areas for improvement.

4. Findings

Online modern slavery statements

Overview

Under Section 54 of the Modern Slavery Act 2015, large commercial organisations with a turnover of £36m or more, including some LAs, are required to publish annual statements detailing their efforts to combat MS and human trafficking within their operations and supply chains. In reality, under the legislation, they currently face no sanction for failing to publish such a statement, although many comply because of a genuine desire to tackle the problem or because it would be poor public relations were they not to do so. Although the Act suggests a number of areas for disclosure, the percentages in Table 2 indicate the proportion of LAs in England and Wales in our sample that have reported on five key areas (as recommended under Section 54 of the Modern Slavery Act 2015).

According to Table 2, LAs are still in the early stages of reporting, providing limited to no information on various aspects of MS since the Modern Slavery Act first came into effect in 2015. The highest level of reporting was by 40% of LAs and concentrated on 'Training and Collaboration', suggesting that LAs prioritised equipping their staff with essential skills and strengthening partnerships with their stakeholders. This highlights their recognition of training and collaboration as key factors in addressing MS. Additionally, 'Risk Assessment' (36%) was the second highest reported category, indicating that LAs acknowledged the importance of identifying potential risks of MS occurring within their communities. Furthermore, 'Codes of Conduct' (31%) also received significant attention, reflecting LAs' commitment to establishing ethical guidelines and operational standards to ensure responsible practices in addressing MS. However, 'Supply Chain Organisation' was the most under-reported category, with only 20% of LAs addressing it in their statements, which limits transparency and accountability within their supplier networks. Similarly, 'Due Diligence' (28%) remained weak, suggesting that while policies exist, many councils lack practical enforcement mechanisms such as audits and supplier engagement, increasing the risk of overlooking forced labour in their supply chains.

Table 2. Reporting on key aspects related to MS

Information categories	LAs reporting (%)
Organisation and Structure of Supply Chains	20
Due Diligence	28
Risk Assessment	36
Codes of Conducts	31
Training and Collaboration	40

For the purpose of this report's objectives, we further explored the reporting category Training and Collaboration.

Training and collaboration

A closer look at Training and Collaboration, presented in Table 3, revealed more encouraging reports from LAs. Notably, 88% provided training, demonstrating a widespread awareness that staff require foundational knowledge. Most councils relied on internal training (70%), while 39% also used external resources to benefit from specialist expertise. To ensure long-term impact, 58% had ongoing training initiatives, including refresher courses.

Table 3. Training and collaboration

Information categories	LAs reporting (%)
Provides MS training to staff	88
Uses internal training	70
Ongoing training & awareness, including refresher and new courses.	58
Training all relevant decision-makers on risks, policies and standards	58
Collaborates with external actors (e.g. Electronics Watch, Ethical Trading Initiative, CIPS)	55
Training employees to identify signs of MS	55
Training for recruitment staff to detect signs of MS	48
Training employees to respond to suspected cases of MS	42
Uses external training	39
Collaborates with other organisations in same sector	27
External help available for survivors of MS	24
Frequency of training (i.e., annually) and its effectiveness via feedback from participants	15
Training suppliers to escalate potential MS issues to relevant people within their own organisation	9
Identification of suppliers who received training/capacity-building due to particular risks of their operations	3
Training groups at risk to make them aware of their rights.	3

Despite efforts, significant gaps remain. Supplier training is extremely low at 9%, even though engagement in high-risk operations could prevent exploitation. Only 3% train at-risk groups on their rights, a crucial step in preventing forced labour. While 42% train staff to handle suspected cases and 48% educate recruiters on forced labour risks, only 15% assess the effectiveness or frequency of training, limiting continuous improvement.

Collaboration is also inconsistent. Just 55% engaged external partners, such as community safety groups, while only 27% collaborated with other councils, restricting the exchange of best practices. The provision of support for survivors was particularly low at 24%, highlighting gaps in frontline response.

Although many LAs acknowledge the importance of training and collaboration, efforts remain fragmented. Stronger frameworks, clearer reporting, and a greater emphasis on supplier engagement, cross-sector collaboration, and training evaluation are essential. While some LAs comply with the Modern Slavery Act 2015, increased disclosure and transparency are needed. Strengthening due diligence, risk assessments, and training initiatives would enhance accountability and reinforce LAs' roles in eradicating forced labour.

Online survey

Overview

In total, 40 responses were received, four of which were from respondents from the same LA. Therefore, once these were discounted, 36 LAs participated in our nationwide survey, including 33 in England and 3 in Wales, a response rate of 10.5% of all councils. A total of 75% of respondents had worked in their post or in a similar position in the organisation for over 5 years. Of the sample that took part, these were dispersed around the country (Figure 1) and offered a varied sample in relation to type of authority (unitary, county, district), size, political leadership, urban/rural settings. The survey results are structured around three findings, representing the most comparable and significant observations, ensuring a clear presentation of these alongside their corresponding analysis. Each observation highlights notable trends, inconsistencies and gaps in policy implementation, which were further explored during the interview stage of the research. The quantitative findings are illustrated through charts generated using Momenive software, providing a visual representation of key aspects such as organisational awareness, training coverage and challenges in survivor protection.

Key finding 1: Low organisational awareness versus high policy prioritisation

Survey respondents were the designated MS experts within their LAs, yet their assessments of organisational awareness varied significantly. While 53% held positive views regarding their council's awareness of human trafficking, domestic servitude, forced labour, and sexual exploitation, 47% expressed concerns. This suggests either a genuine lack of significant MS occurrences or, more likely, based on later qualitative findings, an inability to detect such cases due to inadequate tools and mechanisms.

Despite this variability in awareness, the majority of respondents indicated that their councils formally recognised MS as a priority. Notably, 88% agreed or strongly agreed that their local authority prioritised MS within training and policy. Additionally, 82% agreed or strongly agreed that some measures were in place to monitor MS.

This apparent contradiction, whereby MS is institutionally acknowledged yet inconsistently detected, suggests a gap between policy commitments and operational effectiveness. While councils may have frameworks in place, their practical implementation remains limited, reducing the capacity to identify and respond to cases.

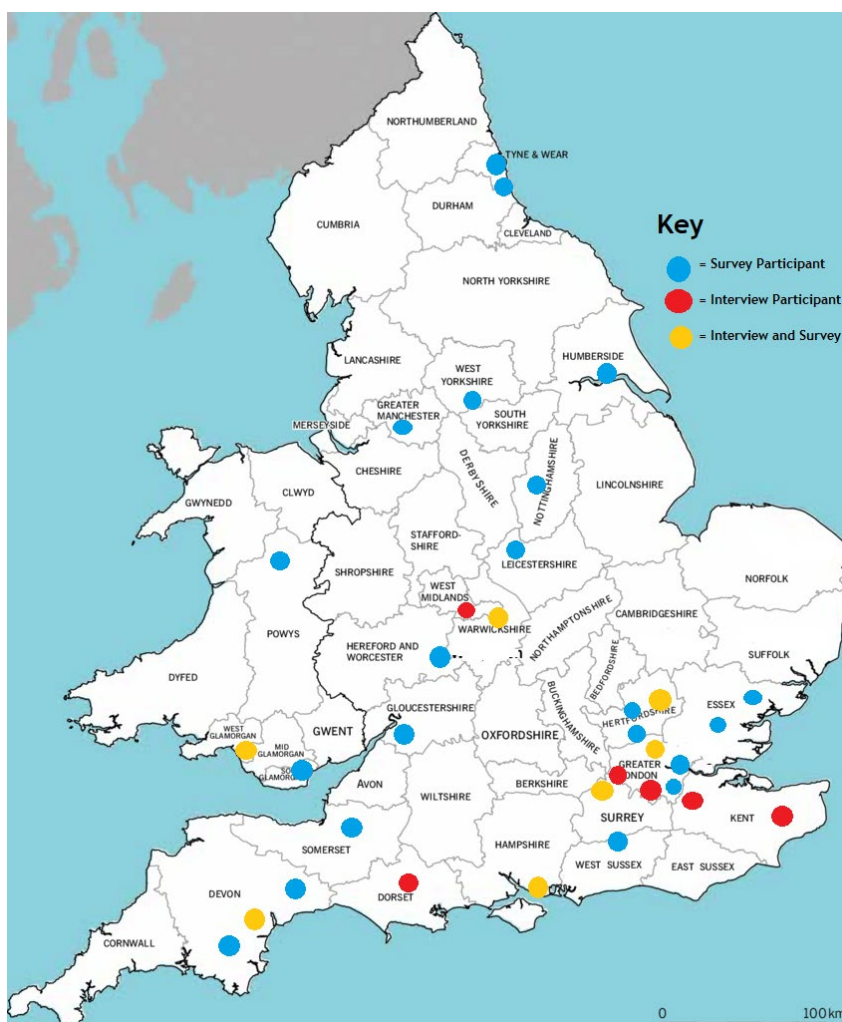


Figure 1.
Geographical
Location of Local
Authorities staff
members who
took part in the
online survey and/
or the interviews.

Survey participants provided additional commentary on the relevance of MS within their LAs. A number of key terms, excluding 'modern' and 'slavery', emerged from the responses. These are visualised in Figure 2.

Figure 2. Word cloud from participants' views about how ms could be prevented in their local authority



Figure 2 indicates respondents' desire for more coherence and awareness across their organisations, including staff and councillors. Thus, it is possible that greater access to MS training for a broader range of employees would improve the lack of organisational awareness and improved quality of specialised training programmes for strategic actors within the LAs would improve policy delivery.

Key finding 2: Gaps and inconsistencies in MS training: coverage, accessibility, and effectiveness

While 80% of surveyed LAs report offering some form of training, significant weaknesses remain in terms of accessibility, frequency, uptake, and quality. This inconsistency is reflected in the MSSs, where 88% reference training, but actual provision varies widely.

Key issues in training provision

Training provision across LAs remains inconsistent, with 20% of LAs providing no training at all. Even where training exists, it is often not mandatory as only 43% of councils require staff to complete it. This closely aligns with the 44% of councils that report on training in their MSSs. Furthermore, training frequency is inadequate, with 74% of LAs offering it only at induction, annually, or sporadically. Thus, more effort is needed to embed MS awareness into continuous professional development. This lack of regular training creates significant risks. Infrequent sessions mean that council staff and managers may miss critical legal updates, reducing their ability to handle cases effectively. Additionally, the absence of routine training signals a lack of organisational priority, undermining employee engagement in MS prevention efforts.

Exclusion of key stakeholders

Survey respondents highlighted the limited reach of MS training as a major concern. Many indicated that key figures who are well-positioned to detect and prevent exploitation are either overlooked or receive inadequate training. Notably, only 17% of councils provide training to contractors, despite supply chains being a high-risk area for MS. Additionally, one-third of councils do not train elected councillors, even though they frequently serve as first points of contact for residents reporting suspicions. Given their regular engagement with local businesses and homes, potential sites of forced labour, cuckooing, or domestic servitude, this gap significantly weakens early detection efforts. Furthermore, 47% of councils do not provide training to managers, reducing organisational buy-in and discouraging frontline employees from actively prioritising MS prevention. These gaps highlight the need for more comprehensive and inclusive training to strengthen overall safeguarding efforts.

Training responsibility and best practices

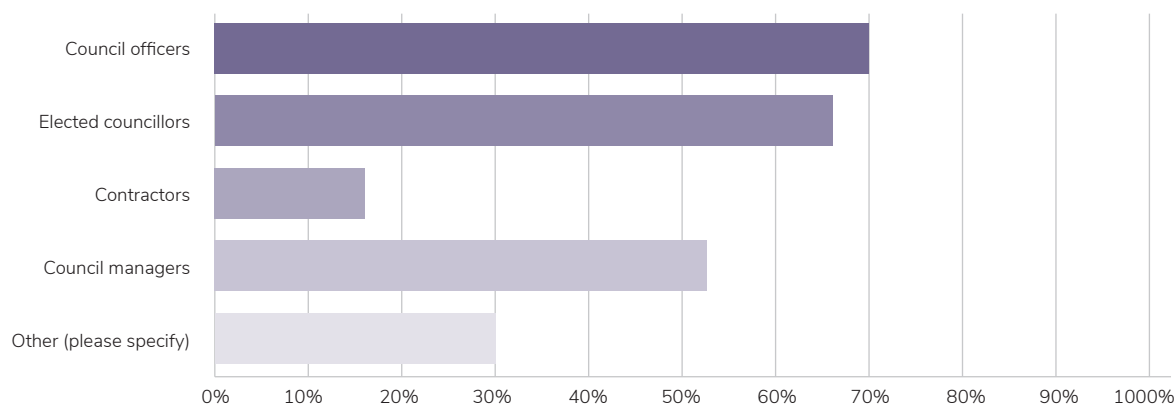
Survey responses revealed a recurring justification for not training contractors: LAs often expect private firms to take responsibility for their own training. Similarly, some councils limit training to frontline staff, overlooking the broader value of raising awareness across all levels of the organisation. A few respondents highlighted best-practice examples where training was extended to schools and local businesses; two sectors where child exploitation and forced labour are often identified. Expanding training to these groups, respondents suggested, could significantly strengthen local detection and prevention efforts.

Training of modern slavery leads

A key issue emerging from the survey responses is the insufficient training provided to MS Leads, who play critical roles in prevention, identification, and response. Significantly, as shown in Figure 3, 57% received less than two hours of training annually, and 77% had fewer than four hours. Given that these individuals are expected to possess an advanced understanding of legislative developments, safeguarding protocols, and best practices for service provision, this limited training appears inadequate. Without sufficient professional development, MS leads may struggle to effectively disseminate knowledge and implement robust strategies within their authorities.

Inconsistencies in training delivery

Survey data show considerable variation in how LAs deliver MS training. Over a third outsource to external agencies, while others develop in-house training or use online modules. Some combine methods, with one council dedicating an officer one day per week to countering MS. LAs responsibilities differ by classification (e.g., Unitary, County, Metropolitan, or District councils) and MS prevalence varies between urban and rural areas. Training content and methods must therefore be adaptable to local needs and organisational objectives.



**Figure 4. Chart representing survey's answers to the question:
'Who do local authorities provide training for?'**

Training content and gaps in first responder preparedness

Survey respondents indicated that where training is provided, it generally covers essential topics comprehensively. Between 90% to 100% of LAs included key areas such as identifying indicators of MS, understanding its various categories, referral pathways and support organisations, the NRM, reporting procedures for suspected cases, and the Duty to Notify. This suggests that the content of training is not the primary issue; rather, the main concern lies in who receives the training and whether it effectively reaches key stakeholders.

A particularly pressing issue is the preparedness of staff to act as First Responders. 40% of LAs fail to provide sufficient training in this area (Figure 4). While 27% strongly agree and 33% agree that their training equips them for this role, 30% disagree, and 10% remain uncertain, indicating significant gaps in confidence and competency. This lack of preparedness highlights the urgent need for targeted training to ensure that frontline staff can effectively identify, report, and respond to suspected cases of MS, and so strengthen overall safeguarding efforts.

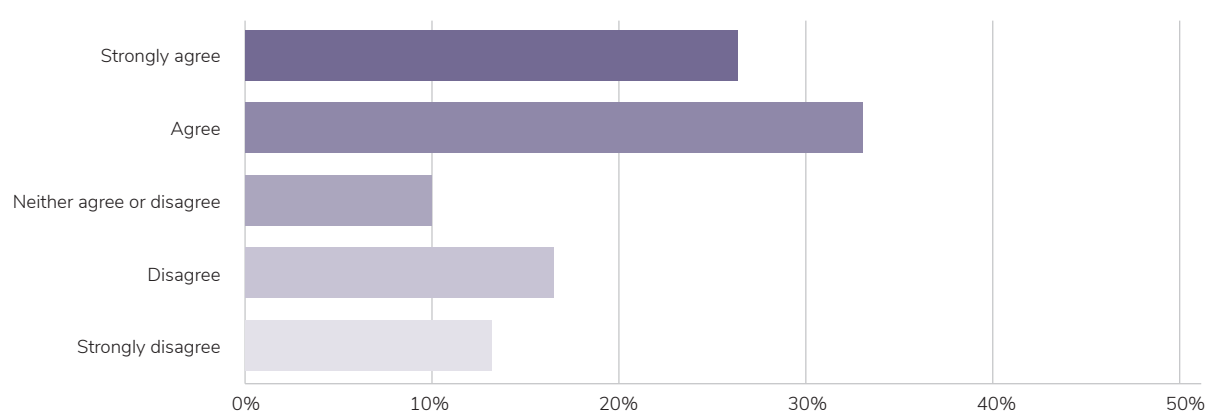


Figure 5. Chart representing survey participants' answers to the statement: Your local authority provides sufficient training on how to act as a first responder.

Key finding 3: Challenges in the identification and ongoing protection of survivors (beyond first contact)

A third key finding from the survey is that LAs face significant challenges in identifying potential victims of MS, particularly among individuals accessing their services. Even when survivors are identified, referred to the NRM, and provided with support, authorities struggle to prevent their re-exploitation. This highlights critical gaps in long-term protection measures.

Survey data underscores these concerns, with 53% of LAs reporting that their identification processes are not fit for purpose, while 36% feel that survivors are not sufficiently protected. Many respondents also express uncertainty about the effectiveness of existing measures. Additionally, 56% lack confidence in the safeguards that are designed to prevent the re-exploitation of survivors under their care, raising concerns about the adequacy of post-identification support.

This issue highlights the urgent need for improved monitoring mechanisms following initial identification. Many MS Leads perceive survivor safeguarding as the responsibility of other agencies, such as the police or specialist charities, rather than that of their own authority. However, they also recognise that enhanced partnership working is essential for more effective potential victim identification and long-term protection. While collaborative and partnership efforts are generally successful, expanding these initiatives could significantly strengthen survivor support systems and improve outcomes for survivors. Multi-agency collaboration remains critical to addressing these gaps and ensuring sustainable protection measures.

The role of multi-agency collaboration

Collaboration with external agencies has been largely beneficial for LAs authorities in tackling MS. Nearly 60% of councils already engage in partnership working and 97% of those involved report it as a positive experience. The specifics of these partnerships require further investigation through qualitative research. However, 30% of respondents were uncertain whether such collaborations even existed within their authority, a notable ambiguity that warrants further exploration.

Local authorities' capacity to address modern slavery

There is also uncertainty regarding the overall capacity of LAs to effectively respond to MS cases. Only 10% of respondents "strongly agree" that their authority is well-equipped, while a further 55% "agree". However, a third of respondents either disagreed or were unsure, indicating a lack of confidence in existing structures and resources.

Interviews

Overview

We interviewed the MS leads in 15 LAs across England and Wales (see Figure 1 above). All interviewees held key positions in the coordination of organisational MS strategy in their respective authority. Details of the interviewees and their LAs are provided in Table A in the Appendix. Out of the 15 LAs, only five had a dedicated MS role or team. Where the data is available, the average number of years that participants had served as MS leads is five. The remainder had well-informed staff members, whose MS role was conducted alongside their other responsibilities. Participants flagged that the lack of a dedicated MS role or team resulted in limited resources and capacity for their LAs to focus on and deliver a robust MS response. However, the lack of appropriate resources was also raised by those LAs with a dedicated role or team, who considered their resources insufficient to appropriately address the issues that they were facing in relation to MS. Awareness and knowledge of MS among councillors and staff were inconsistent, limited and fragmented in six LAs, while four LAs a stronger grasp of the issue – based on what they expressed in the interviews. MS and county lines emerged as the most prevalent forms of exploitation reported across the LAs. There is little information on funding, but among those who mentioned it, there is an even split between those councils that provide internal funding for MS roles or work, and those that are funded by external agencies, such as the Home. The thematic analysis yielded the identification of three overarching themes, and sub-themes. These are presented below, accompanied by some exemplary quotes.

Theme 1: First Responder Awareness and Training

LAs play a crucial role in addressing MS, yet training gaps, resource constraints and inconsistent implementation weaken their effectiveness. Limited budgets, competing priorities and a lack of standardised frameworks result in uneven staff preparedness and survivor support. This section examines key barriers, including inadequate resources, inconsistent training, low engagement, and the need for stronger collaboration.

Capacity and resource constraints and strategic action

Limited training capacity and inadequate resources such as staff numbers, funding, and operational support, hinder first responders' ability to address MS and human trafficking. Budget constraints and competing priorities make it difficult for LAs to allocate sufficient time and funding for training (1B; 3E; 4L; 5Ex; 8Pa; 10LKC; 14C). As a result, curricula are shortened, fewer workshops are offered and staff are overburdened, struggling to attend or engage fully (4L; 5Ex; 7NPT; 8Pa). One participant explained:

“We don’t do enough duty to notify referrals. [...] professionals don’t have time or capacity, and if they can’t see that there’s an outcome for the individual, it’s not something they’re going to prioritise. [...] I used to be a social worker. I didn’t have any time.” (10LKC)

Resource limitations, particularly in the voluntary sector, often hinder collaboration. Strategic planning, such as developing online referral systems, can improve efficiency as LAs can share resources and hence enhance synergy (14C). One participant noted:

“X and Y are the 2 biggest cities in Z ... we can essentially halve the workload and halve the training costs.” (14C)

Regular dialogue with key stakeholders (6LL; 7NPT; 13STb) and ongoing engagement with local voluntary organisations (4LE; 5E; 12STa) build trust and streamline processes. For example, frequent countywide meetings with the Third Sector (14C) strengthen connections.

Overall, these limitations in training capacity and resource constraints significantly reduce the impact of MS training initiatives on frontline practice. However, robust collaboration across public services, voluntary organisations, and communities creates sustainable support systems. Strategic leadership, specialised teams, effective intelligence-sharing and ongoing training empower partners to prevent exploitation, protect vulnerable individuals and build safer, more cohesive communities, several participants underlined.

Inconsistent approach to training

MS training within LAs varies widely, creating a fragmented approach. Some councils manage it through Safeguarding teams, while others assign it to Public Health or Community Safety. This leads to differences in priorities, content, and quality (4L). This inconsistency affects first responders’ preparedness and training frequency (11SA; 13STb).

Without a standardized framework or clear accountability, ensuring that staff acquire essential skills remains a challenge, resulting in uneven survivor support across local structures (4L; 5Ex; 11SA). One participant noted:

“Every single local authority works completely differently. So, [...] having a standardised approach in those minimum standards around their training and expectations [is crucial], because [ultimately] it is a duty on every local authority that they need to meet. I [believe that this] will change a lot, with the supply chains as well. So, where that’s moving to local authorities being mandated to complete a modern slavery statement. Right now, it’s voluntary.” (11SA)

Challenges with engagement and accountability in training

One core challenge is that MS training is often treated as a “tick-box” exercise rather than a meaningful learning experience. Given the complexity and sensitivity of MS issues, training needs to go beyond abstract presentations and incorporate practical scenarios, case studies, and immersive, scenario-based learning (3E; 7NPT). When staff view training as merely a bureaucratic requirement, they fail to fully engage or grasp its real-world implications. This disengagement is worsened by the absence of external oversight, such as accountability measures from a governing body like the Home Office, to ensure that training leads to improved frontline practices. One participant expressed:

“Time commitment is often an issue. [...] sometimes you only have 5 or 6 people in the training, so if we have enough interest, we ask them to register and then find an external provider. We don’t offer any internal training aside from safeguarding; for modern slavery, we rely on the police to deliver the training.” (3E)

Without mechanisms to evaluate and reinforce outcomes, enhancements in detection, reporting, and survivor support remain limited, ultimately hindering progress in combating MS (11SA).

Recommendations for improvement and collaboration

A “Train the Trainer” program could decentralise MS training, enabling local champions to deliver sector-specific sessions while ensuring consistency (1B). Multi-agency collaboration, modelled after domestic abuse response strategies, could enhance information sharing, streamline referrals, and strengthen inter-agency coordination (13STb).

Additional recommendations include appointing an MS lead in each council, implementing standardised annual training, and considering legislative revisions to improve prosecution. These measures aim to create a responsive, accountable, and victim-centred framework that translates training into meaningful frontline improvements (13STb). One participant stated:

“We will start a train-the-trainer session for some of our modern slavery points of contact [...] so that with the turnover of staff that information isn’t then being lost.” (1B)

Overall, enhancing MS training requires prioritising resources, standardisation, and accountability. “Train the Trainer” programmes and appointed MS leads can ensure a consistent, victim-centred approach that equips frontline staff to combat MS effectively, participants indicated.

Theme 2: Collaboration and networking: police, community, and other authorities

Addressing MS and enhancing community safety require structured, multi-agency collaboration. Three key areas have emerged from the interviews.

Strengthening multi-agency collaboration and sustainable partnership

Effective multi-agency collaboration is crucial for addressing MS and ensuring community safety. Coordinated efforts among public services, such as the police, fire services, housing authorities, and voluntary organisations, are essential. Partnerships, including Community Safety Partnership (CSP) boards (1B; 3E; 5E; 13STB), which are common statutory bodies across local areas, as well as broader collaborations (1B; 11SA; 14C) connect public and third-sector organisations (1B; 3E; 5E; 6LL; 7NPT; 8Pa; 10LKC; 11SA; 12Sta; 13STB; 14C; 15KT) and support inter-council initiatives (14C). Importantly, CSPs are widely used governance structures and do not, on their own, identify a specific Local Authority or participant. However, resource scarcity in the voluntary sector often leads to organisations closing due to funding challenges. For example, one participant expressed:

“In the Community Safety Partnership board, created 3 years ago [...] we ask every member to allocate a modern slavery lead and attend our Level 2 modern slavery workshop. But we also have to respond when the modern slavery concern comes up and we have a multi-agency response needed.” (1B)

To ensure sustainability, it is essential to raise awareness among partners about the support available from the voluntary sector. This approach fosters efficient resource use, prevents duplication, pools expertise and builds communities of practice. As one participant described:

“We also have a good partnership with the police, which works with the housing associations and fire service. For example, they conduct ‘well and safe’ visits and are trained to look for signs of modern slavery. In terms of community groups, we have many supporting survivors, although they rely on volunteers due to limited staffing.” (3E)

Maintaining relationships and supporting one another, especially within the voluntary sector (1B; 3E; 5E; 7NPT; 8Pa; 9Pb; 10LKC; 15KT), remains challenging. Limited resources exacerbate these difficulties, making support for under-resourced charities (9Pb) and bridging referral gaps (15KT) essential.

Strategic coordination and planning

Strategic coordination is vital for multi-agency collaboration. Centralised leadership within councils is essential to manage partnerships effectively, as evidenced by the call for a dedicated lead role (13STB; 14C; 11SA; 1B). This leadership facilitates a strategic approach to response planning and resource alignment (1B; 6LL; 11SA; 13STB; 14C). One participant explained:

“I created the Modern Slavery steering group to have a better idea of what type of referrals we make [...] there needs to be some kind of consensus [on where modern slavery sits], and the roles, the shared roles and responsibilities of a local authority [...]” (6LL)

Specialised teams and local expertise are also critical. MS teams and regional specialists (1B; 5E; 6LL; 8Pa; 10LKC; 12Sta) bring essential knowledge and skills, while local insights enhance understanding of community-specific needs (10LKC; 5E). Regarding the value of local knowledge, one respondent noted:

“[Local knowledge] is irreplaceable. We discuss where for example, sex is being sold, [...] we do some data collection locally, [...] a lot of it is Metropolitan Police data, [...] and we also have 13 partners locally that share anonymous data...” (10LKC)

Specialised teams, training, and intelligence sharing

Developing and deploying specialised teams, such as MS units, is crucial for tackling complex issues. Intelligence sharing within and among these teams (1B; 6LL; 7NPT) supports a coordinated approach, while maintaining accurate records (6LL; 12STA) underpins informed decision-making. One participant stressed the importance of data and partnerships:

“What Data tells us is an issue – every year we do a stage assessment. We work well with key partners like Rescue and Response in London [...] and the Home Office Funded project. We try to link with charities and other organisations [...] We need more awareness mapping.” (6LL)

However, challenges around confidentiality (8Pa) and the lack of clear guidelines for information sharing (7NPT; 14C) must be addressed to build trust. Improvements in team consistency were also highlighted:

“In the past, we just had random police professionals allocated to cases with no consistency [...] That changed when we got our exploitation teams [...] there's the local one in [our county] for county-based issues and the central one for more complex cases.” (14C)

Training is another cornerstone of collaboration. Developing resources like toolkits (11SA) and raising awareness among frontline public-sector workers (13STb) ensures preparedness. Participation in continuous learning forums (5E; 6LL; 10LKC; 11SA) and outreach efforts (13STb) supports a robust, adaptive approach to tackling MS.

Theme 3: Regulations and governance

This theme is related to how LAs protect their operations and supply chains from exploitation by leveraging existing legal frameworks, embedding ethical principles in everyday processes, and ensuring robust oversight. By applying the law effectively and fostering ethics-driven decisions, safeguarding becomes a continuous, integral part of organisational practice.

Regulatory compliance and legal coherence

Interviewees viewed existing legal frameworks, such as the Modern Slavery Act, as robust when properly enforced (2D; 7NPT; 15KT). Rather than seeking new amendments, strict adherence to current regulations is key to maintaining compliance (2D).

As legal requirements evolve, continuous learning becomes essential. LAs must update their knowledge and adapt policies to meet changing standards (2D; 8Pa; 3E). Under Procedural Compliance, safeguarding statements and structured internal processes ensure alignment with legal obligations (3E). One participant explained:

“There is a process to follow in that [preparing Modern Slavery Safeguarding] document... In terms of procurement, we always send out questionnaires and pre-questionnaires to contractors, and then carry out the checks.” (3E)

Efforts to prioritise compliance are also evident in contractual relationships. LAs embed legal expectations into agreements with suppliers and third parties, ensuring compliance throughout the supply chain (8Pa). As one respondent noted:

“Modern slavery is actually quite a high priority in the sense that it needs Council as the starting point from which we work on our ethical, employment and contracting arrangements... We’ve tried to approach it in a sort of pragmatic way... ensuring we are not complicit in modern slavery.” (7NPT)

In summary, understanding and enforcing existing legislation, combined with ongoing training and structured internal processes, are key to maintaining effective procedural compliance, participants suggested. This approach would help LAs stay informed about evolving legal requirements and embed compliance into their operational practices without the need for additional legislation.

Integration with procurement and ethical practices

LAs are aligning legal expectations and moral imperatives in employment, contracting, and vendor relationships. The legal department often coordinates procurement to ensure third-party engagement meets all legal standards. This includes using questionnaires and pre-questionnaires to scrutinise contractors, functioning as a preliminary audit that identifies compliance gaps before contracts are finalised (3E). Such compliance measures are critical to preventing MS by verifying suppliers and contractors, ensuring procurement practices align with both internal policies and overarching legal frameworks (3E). One respondent stated:

“We have a modern slavery safeguarding statement. This was driven by a few incidents [...] there is a process to follow in that document if there is an issue. In terms of procurement, we always send out questionnaires and pre-questionnaires to contractors, and then carry out the checks.” (3E)

In essence, ethical practices in employment and contracting are integral to creating an environment that respects human rights at every operational level (7NPT; 9Pb).

Governance measures

LAs are maximising resources, enhancing prevention, and maintaining oversight to combat MS, some participants believed (8Pa; 7NPT). They proactively monitor third-party contracts to safeguard human rights, treating compliance as an ongoing process. Many also invest in training third-party staff to strengthen MS prevention (9Pb). Expanding these standards internationally promotes ethical practices across borders. Regular audits and targeted responses to emerging intelligence ensure that governance remains both systematic and adaptable (7NPT). Another respondent remarked:

“We always ensure that the rights in respect of our contracts are built in such a way as to allow us to request any information necessary to audit arrangements... We’ve tried to address these [shortcomings] by implementing annual audit checks... But it’s incredibly difficult, because often these things will be well hidden... we just try to protect it and embed it as much as we can within contracts.” (7NPT)

Proactive measures highlight the dynamic fight against MS, requiring ongoing improvements in governance, policies, and training (9Pb). One participant emphasised the need for intelligent questioning in international recruitment to ensure ethical practices.

Triangulation of findings: modern slavery statement reporting, surveys, and interviews

The findings from the three phases of this study provide complementary insights into how LAs address MS. While MSSs indicate policy intent, the survey reveals implementation gaps and the interviews highlight practical challenges, but also good practice, remarkable commitment and exemplary initiatives. Together, the findings expose gaps between commitments and practical obstacles, stressing the need for stronger enforcement, consistent training delivery and collaboration. However, it is also important to recognise the dedication and expertise of staff leads who work diligently within these constraints. Acknowledging their efforts while addressing systemic weaknesses ensures a constructive and solution- focused approach.

Policy commitments vs. operational reality

LAs are still developing MS reporting, with 40% covering training, 36% risk assessment, and 31% codes of conduct. While this suggests awareness, 53% of respondents found LAs awareness adequate, while 47% raised concerns about detection. Despite 88% prioritising MS in training and policy and 82% having monitoring mechanisms, interviews highlight resource constraints, inconsistent training, and competing priorities. Many MS leads lack dedicated teams or funding. Supply chain oversight is weak, with only 20% reporting on supply chain structures, the lowest category.

Weaknesses in potential victim identification and survivor protection

Although 36% of LAs' report on risk assessment, 53% state potential victim identification is inadequate. Even when potential victims are identified, 56% lack confidence in preventing re-exploitation, highlighting sub-optimal survivor protection. Interviews reveal fragmented responsibilities, with some LAs being unable to confidently handle survivors care. While 60% engage in partnership work, 30% are unsure if such collaborations exist, showing poor coordination. Survivor support remains limited, with only 24% providing external help, despite survivors' vulnerabilities. Without housing, financial aid and legal support, the risk of re-exploitation remains high, emphasising the need for long-term intervention.

Training gaps and needs for improvement

Training remains inconsistent. While 88% claim to provide MS training, only 80% actually do, leaving 20% without any training. Only 43% mandate participation. Most training is not continuous, with 74% offering it only at induction, annually, or sporadically, which reduces awareness. Only 17% train contractors, despite supply chain risks, and one-third do not train elected officials, who engage directly with communities. Interviews confirm these gaps, with 57% of MS leads receiving under two hours of training annually and 77% under four hours, despite their key role. Governance structures remain inconsistent, creating unclear responsibilities for MS policies, which further hinders training implementation. Only 15% of training programmes undergo evaluation, making progress tracking difficult. Additionally, resource shortages and competing priorities mean that MS responsibilities are often managed alongside other tasks. Without regular, high-quality training and clear accountability frameworks, LAs remain ill-equipped to detect and address MS cases.

In conclusion, despite recognising MS as a priority, LAs face persistent gaps in training, survivor support, and supply chain oversight, which weaken policy enforcement. Addressing these issues requires stronger collaboration, enhanced survivor support, and risk assessments. To ensure a consistent and effective response, LAs need a structured and standardised training framework.

5. Preliminary training framework

The section on the Preliminary Training Framework is dedicated to exploring the critical role of comprehensive, context-specific training in enabling Local Authorities (LAs) to effectively serve as Modern Slavery (MS) First Responders (FRs). LAs are entrusted with a wide range of responsibilities, from housing and social care to safeguarding and emergency support, which uniquely position them to identify and respond to cases of MS. However, current training provisions are found to be inconsistent, under-resourced, and often not aligned with the practical challenges faced by frontline staff.

The proposed preliminary framework

The proposed training framework for LAs stemming from the results of this study should therefore be structured around a three-tier system.

- **Tier 1: Basic awareness training for all staff** (mainly e-learning to save costs)
The first tier, basic awareness training, should be delivered to all staff through accessible e-learning modules. This foundational level would cover the key indicators of MS, basic legal obligations under the Modern Slavery Act 2015, and the essential steps for making referrals under the NRM. The aim here is to ensure that every employee, regardless of their role, is equipped with the basic knowledge to recognise potential signs of exploitation.
- **Tier 2: In-depth, face-to-face training for frontline workers and local councillors** (face-to-face)
The second tier should focus on enhanced training for frontline staff and local councillors. Given their direct contact with the public and the likelihood of encountering vulnerable individuals, these groups require more in-depth, face-to-face training sessions. Such sessions should incorporate interactive case studies, role-playing scenarios, and practical exercises that simulate real-life situations.

Emphasis should be placed on inter-agency communication and the development of clear internal referral pathways, ensuring that staff are not only aware of their responsibilities but also confident in the steps to take when a potential case is identified.

- **Tier 3: Advanced training for specialist staff who make NRM referrals**
(face-to-face)

The third tier is aimed at specialist staff, who are directly responsible for making NRM referrals and managing complex cases of exploitation. This advanced training should be delivered in a face-to-face format and focus on developing specialised skills such as comprehensive risk assessment, detailed case management, and strategic coordination with external agencies. Moreover, the curriculum should be designed to foster continuous learning and adaptation, incorporating the latest legal updates, emerging best practices, and feedback from previous training sessions.

A 'Train the Trainer' programme could be embedded at this tier to decentralise MS training, empowering selected staff to deliver sector-specific sessions while ensuring consistency across departments.

Preliminary training framework

Tier 1: Basic awareness training for all staff (E-learning)

Purpose

- Equip all LAs employees with a fundamental understanding of MS, including its forms, indicators and associated risks.
- Ensure that staff can recognise potential signs of MS and understand their role in responding effectively.
- Clarify legal obligations related to MS.
- Establish a consistent baseline of knowledge across all departments.

Objectives

- Introduction to MS: Definitions, forms and real-world examples.
- Recognising Key Indicators: Risk factors, signs of exploitation, and high-risk environments.
- Legal Framework: Overview of Modern Slavery Act 2015, NRM and key policies.
- Reporting and Referral: Steps to take if a case is suspected and how to escalate concerns.

Delivery methods

- E-learning modules for flexibility and cost-effectiveness.
- Short videos and interactive quizzes to reinforce learning.
- Pre- and post-training assessments to evaluate knowledge gains.

Tier 2: In-depth, face-to-face training for frontline workers and councillors

Purpose

- Provide practical training for frontline workers and councillors who engage directly with vulnerable populations.
- Ensure they are equipped to confidently identify, respond to and refer potential cases of MS.
- Strengthen multi-agency collaboration between LAs, law enforcement and community organisations to ensure coordinated action.

Objectives

- Advanced Identification Skills: Recognising complex forms of exploitation.
- First Responder Training: Steps to take when encountering potential victims.
- NRM Referral Process: A step-by-step guide for reporting cases.
- Legal and Procedural Responsibilities: Understanding supply chain risks and compliance requirements.
- Collaborative Working: Strengthening partnerships with law enforcement, NGOs, and other agencies.
- Multi-Agency Coordination: Inspired by domestic abuse models, better collaboration can improve information sharing, referrals, and safeguarding.

Delivery methods

- Face to face workshops featuring role-playing and the analysis of real-life case studies.
- Simulation exercises designed to enhance confidence in applying referral procedures.
- Expert-led sessions focused on safeguarding strategies and victim-centred approaches.

Tier 3: Advanced training for specialist staff making NRM referrals

Purpose

- Equip specialist staff with the expert knowledge and skills needed to handle complex cases and make NRM referrals.
- Strengthen case management, risk assessment and victim support mechanisms.
- Reinforce accountability by ensuring clear processes for monitoring MS risks in supply chains and reporting actions taken.

Objectives

- **Comprehensive Risk Assessments:** Advanced techniques for identifying survivor vulnerabilities.
- **Case Management and Long-Term Support:** Ensuring ongoing assistance for survivors.
- **Strategic Coordination:** Collaborating with law enforcement, social services, and NGOs to manage cases effectively.
- **Supply Chain Oversight & Ethical Procurement:** Monitoring contractor compliance and preventing exploitative practices.
- **Accountability & Reporting:** Strengthening internal monitoring systems and ensuring transparent reporting mechanisms.
- **Leadership & Oversight:** An MS lead in each council ensures oversight and strategic focus.
- **Legislative Readiness:** Staff should know about possible legal changes affecting MS work.

Delivery methods

- Intensive training workshops featuring in-depth case studies.
- Train-the-Trainer Model: Selected staff will become internal trainers to ensure knowledge retention.
- Scenario-Based Learning: Real-life crisis response simulations.

Common considerations:

- **Enhance Collaboration:** Improve partnerships between LAs, law enforcement, and community organisations to create a more coordinated response.
- **Increase Resources:** Secure dedicated funding to support MS training and specialist teams within LAs.
- **Strengthen Accountability:** Establish clearer processes for monitoring MS risks in supply chains and reporting on actions taken.
- **Improve Communication:** Ensure all staff understand their FR responsibilities and provide clear referral pathways.

Training framework context and further reflections

Our study indicated that many training programmes are currently delivered as one-off sessions, often during induction or sporadically thereafter, resulting in a 'tick-box' approach that fails to embed MS awareness into continuous professional development. Existing training initiatives and tools (see above, [page 14](#)), such as the Home Office's First Responder Training Programme (Home Office, 2024), the Skills for Care's Training Framework for the Identification, Care and Support of Victims and Survivors of Modern Slavery and Human Trafficking (2020), and various self-assessment tools provided by voluntary organisations (e.g., Shiva Foundation et al., 2022) should be built upon and feed into a consistently delivered, standardised training specifically targeting LAs as MS FRs.

As mentioned in Section 2 above, the Skills for Care's Training Framework for the Identification, Care and Support of Victims and Survivors of Modern Slavery and Human Trafficking (Skills for Care, 2020) is a crucial training framework in the sector, with which the one developed within this study is set in tight dialogue. As said, this training framework is a nationally recognised, survivor-informed standard co-produced by experts from social care, health, legal advocacy, law enforcement, education and civil-society. It aligns directly with the Modern Slavery Act 2015, the 2018 Slavery & Trafficking Survivor Care Standards and trauma-informed practice, setting out six core subjects—from "What is Modern Slavery?" and "Legal Frameworks" through "Person-Centred Victim Care," "Care & Support Needs," "Risk Reduction" and "Reflective Practice"—each with clear, measurable learning outcomes framed around Bloom's Taxonomy. The Framework defines three tiers of competency — Tier 1 (basic awareness for any professional), Tier 2 (practical victim-care skills for First Responders and direct-support roles) and Tier 3 (advanced advocacy, psychosocial interventions and leadership for specialists) — so that knowledge, skills and behaviours build progressively to meet different roles and contexts. By emphasising experiential, work-based and reflective learning, and allowing local adaptation, it helps organisations map, deliver and evaluate training efficiently, reduce duplication and embed consistent, compassionate, rights-based support for survivors across health and social care, justice, education and beyond.

The preliminary training framework proposed in this report builds on several influential initiatives developed to support FRs in identifying and assisting survivors of modern slavery. Key among these are the Slavery and Trafficking Survivor Care Standards (Human Trafficking Foundation, 2018), which have shaped rights-based, trauma-informed approaches across health and social care; the Modern Slavery Core Outcome Set (Paphitis et al., 2023), which outlines essential recovery and wellbeing goals for survivors; and the Skills for Care Training Framework (2020), which provides tiered training levels based on Bloom's Taxonomy and co-produced with survivor and practitioner input. While these frameworks represent important progress, they are not designed to address the specific statutory responsibilities, institutional arrangements

and operational challenges facing LAs. This report addresses that gap by proposing a bespoke, evidence-informed training model specifically for LAs as FRs under the Modern Slavery Act 2015.

1. Institutional focus and primary audience

Unlike existing cross-sectoral training frameworks, the model presented here is explicitly tailored to the legal and governance responsibilities of LAs in England and Wales. This preliminary training framework is designed to strengthen LA-specific accountability and capacity in modern slavery response. In contrast, the Skills for Care (2020) framework, for example, is aimed at a broader professional audience—spanning health, social care, education, the voluntary sector and law enforcement and does not address the structural context or coordination challenges faced by LAs in identifying and referring potential victims.

2. Methodological foundation and data sources

This preliminary training framework is grounded in a robust, three-phase research process comprising a review of Modern Slavery Statements, a national survey of LA Modern Slavery leads and qualitative interviews with fifteen professionals from statutory and third-sector organisations. These methods generated detailed, context-specific insights into how modern slavery training is delivered, understood and enacted within local government. Key findings highlight inconsistent provision, low levels of councillor involvement and minimal evaluation of training effectiveness. By contrast, the Skills for Care framework, while co-produced with experts and survivors, was primarily developed through expert consultation and draws on existing evidence and care standards. It is not underpinned by empirical research focused specifically on local authority operations or governance.

3. Structure, co-production and application of the training model

This report presents a three-tier training structure aligned with the internal roles and functions of local government. Tier 1 offers accessible e-learning for all LA staff to build foundational awareness; Tier 2 provides targeted, scenario-based training for frontline practitioners and councillors; and Tier 3 delivers advanced, face-to-face sessions for those with lead responsibility for modern slavery cases and NRM referrals. The model also incorporates a 'train-the-trainer' component to support sustainable delivery and local adaptation. While Skills for Care (2020) also adopts a tiered model, its structure is organised around sector-neutral professional competencies and designed for national standardisation across agencies. The framework developed in this report, by contrast, responds to specific gaps identified through primary research, including a lack of training for councillors and parish-level staff, insufficient survivor-led content tailored to LA contexts, and a need for improved governance oversight in referral and safeguarding processes.

Collaboration between LAs and external specialist organisations is a vital component of this preliminary training framework. By partnering with bodies that have expertise in MS, LAs can ensure that their training programmes are both current and tailored to the specific challenges of their local contexts. Such partnerships can provide access to external trainers, updated resource materials, and opportunities for cross-agency workshops that reinforce a unified approach to MS prevention.

In addition, a model of multi-agency collaboration, similar to approaches used in domestic abuse response (e.g., Standing Together Against Domestic Abuse, 2024), could significantly improve inter-agency communication, streamline referrals and strengthen collective safeguarding efforts. The appointment of a designated MS lead within each council would further ensure accountability and continuity of expertise. Standardised annual training, legislative revision to support prosecution and clearer mechanisms for evaluation are also recommended to create a responsive, victim-centred framework for intervention.

It is also crucial to implement a robust evaluation mechanism. Regular assessments should be integrated into the training programme to measure not only the uptake of knowledge but also its practical application on the ground. This could involve periodic refresher courses, post-training feedback surveys, and a formal review process to ensure that training content remains relevant and responsive to the evolving landscape of MS. By systematically evaluating the outcomes of training programmes, LAs can identify gaps in knowledge, adjust training methods, and ultimately enhance the overall capacity of their staff to act as effective First Responders.

In summary, a comprehensive and context-specific training framework is needed for LAs aiming to fulfil their crucial role in MS prevention. Through a structured, three-tier approach, 'Train the Trainer' programmes, designated MS leads, enhanced inter-agency collaboration, and continuous evaluation, LAs can build sustainable capacity that not only meets legislative requirements but also delivers tangible improvements in frontline practice. Such a framework is essential for transforming MS training from a perfunctory exercise into a dynamic, ongoing process that genuinely equips staff to protect vulnerable individuals and respond effectively to the challenges of MS.

As already mentioned above, the training framework proposed here is based on the findings of this exploratory study. This framework is intended to constitute only as a preliminary working tool, which is currently being shared with our study participants as well as more widely with LAs in England and Wales, MS third sector organisations, other relevant stakeholders and experts-by-experience. We are inviting them to provide feedback on its usefulness, applicability, feasibility, structure and delivery methods, and its development into a training curriculum.

The feedback form can be accessed on website via the following [link](#). The link will be available until Monday 8th September 2025.

The feedback gathered will feed into the planned knowledge exchange event in the Summer 2025, where we aim to start co-developing the First Training Framework for Local Authorities as Modern Slavery First Responders in England and Wales.

6. Concluding notes

Main findings

The study's findings reveal that while LAs in England and Wales acknowledge MS as a policy priority, there exists a significant disconnect between policy formulation and practical implementation. The analysis of MSSs, combined with survey data and interviews, highlights that although over 80% of councils recognise the importance of MS, fewer than half have implemented comprehensive training programmes. Most training sessions are limited to induction or sporadic refresher courses, and only a minority of authorities have adopted a structured, multi-tier training approach. Furthermore, frontline staff and MS Leads frequently report a lack of clarity regarding their roles and responsibilities. This ambiguity often stems from resource constraints and an over-reliance on external agencies for specialised training. The data indicates that only a small percentage of LAs provide training to key stakeholders, including councillors and contractors, which is particularly concerning given their potential role in identifying cases of exploitation. Importantly, the findings resonate across multiple data sources, with financial statement analysis underscoring the uneven allocation of resources to MS initiatives, thereby exacerbating the inconsistencies observed in training coverage and inter-agency collaboration.

Limitations

Despite the richness of the data collected, several limitations constrain the generalisability and depth of the study's findings. First, the response rate to the online survey was relatively low, with only 10% of councils participating, which may not fully represent the national landscape. The limited number of responses raises questions about potential selection bias, as councils with more robust MS practices may have been more inclined to participate. Additionally, the qualitative data derived from interviews, while detailed, involved a relatively small sample of MS Leads. This restricted sample size means that the insights gleaned might not capture the full diversity of experiences across all LAs. Moreover, variations in organisational structure and resource availability across different types of councils (unitary, county, district) could further skew the findings. Another limitation concerns the reliance on self-reported data regarding training efficacy and operational readiness, which may be subject to respondent bias. Lastly, the rapid evolution of MS legislation and policy means that the findings reflect a snapshot in time, and ongoing changes in government funding and legal frameworks could alter the current landscape.

Recommendations

Based on the findings and the limitations outlined, several recommendations emerge to strengthen the capacity of LAs as MS First Responders.

Standardisation of Training Programmes: A key recommendation is the development and implementation of a nationally recognised, tiered training framework, which targets LAs as FRs and which builds upon and adapts previous identification, support and training tools. This framework should be delivered consistently, and be mandatory for all staff, with additional modules for frontline workers and specialist personnel. A standardised approach would ensure consistency across all LAs, reduce the current patchwork of training methods, and facilitate the sharing of best practices.

Enhanced Inter-Agency Collaboration: LAs should establish formal partnerships with external specialist organisations and other public agencies. Regular multi-agency workshops and joint training sessions can help build a cohesive network of support, ensuring that all stakeholders, ranging from councillors to contractors, are adequately informed and capable of recognising MS indicators. Such collaboration is essential for real-time information sharing and coordinated responses to emerging cases.

Resource Allocation and Funding: It is imperative that LAs receive dedicated funding to support MS training and operational activities. The study's financial analysis indicates that inconsistent resource allocation is a major barrier to effective training. Therefore, national and local funding bodies should prioritise MS initiatives to ensure that LAs are not constrained by budgetary limitations.

Role Definition and Accountability: There is a pressing need for clearer delineation of responsibilities within LAs. MS Leads and frontline staff should receive explicit guidance on their roles in the identification, referral, and support of survivors. Establishing clear accountability measures will help ensure that training translates into effective operational practices.

Enhance Communication and Knowledge Sharing: Finally, further research should be conducted to evaluate the long-term impacts of training initiatives on the efficacy of MS responses. Establishing a central repository for case studies, best practice guides, and evaluation reports would allow LAs to learn from each other's experiences, thereby continuously refining their approaches.

The publication of the English Devolution White Paper (HM Government, 2024) marks a pivotal moment for rethinking how LAs approach MS prevention and training. As powers are transferred from central government to newly established Strategic Authorities and elected Mayors, LAs will gain greater autonomy in shaping local responses to complex social issues, including MS. This structural shift presents an opportunity to embed the proposed three-tier training framework within new governance models, ensuring that MS training is not only standardised but also locally adapted. As devolution progresses, some areas may move toward more streamlined local governance structures.

This presents an opportunity to integrate the proposed training framework more effectively across services and geographies, aligning First Responder preparation with broader local priorities such as safeguarding, housing, and community safety. However, in view of the study's findings, it will be important to ensure that MS roles, training obligations and collaborative arrangements between key stakeholders are formally built into any new governance structures. Without clear accountability and continuity plans, there is a risk that MS commitments may become diluted or inconsistently applied, as has been observed in existing fragmented responses. Moreover, devolution offers a platform for innovation, enabling regions to pilot tailored training initiatives, such as 'Train the Trainer' programmes or joint agency workshops, based on the specific needs of their communities. Ensuring these pilots are institutionally supported and sustained across governance transitions will be essential. By integrating MS awareness into the fabric of evolving local governance, LAs can move beyond fragmented training efforts and towards a consistent, place-based approach that reflects both legislative duties and the unique characteristics of local contexts.

In conclusion, while LAs have made commendable strides in recognising the importance of MS prevention, significant work remains to ensure that training and operational practices are uniformly effective. By standardising training programmes, enhancing collaborative efforts, allocating dedicated resources and fostering continuous professional development, LAs can bridge the gap between policy and practice. Such measures are not only vital for improving the immediate response to MS but also for building resilient, accountable systems that protect vulnerable individuals in the long term.

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Appendix

Table A. Details of interviewees and their LAs

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
1B	Community safety coordinator for MS, violence against women and girls, and hate crime/MS officer (within LA)	3	No	Strategic lead for MS MS violence against women and girls and hate crime officer NRM Child devolved decision-making pilot coordinator	Awareness: Fragmented/scarce Nature of training: Level 1 online training (mandatory) Level 2 training (one for adult and one for children): non-mandatory, but recommended to frontline workers	Prevalence of child criminal exploitation through county lines	Region: London Category: Unitary, London Borough Size (expenditure): Medium Size (population): Medium Control: Conservative (since 1998) Urban
2D	Community Safety Business Manager	3	No	Oversees public protection initiatives, coordinates multi-agency collaborations, manages Domestic Homicide Reviews, and raises awareness of modern slavery and serious violence within the local authority.	Awareness: Fragmented/scarce Nature of training: Core mandatory training and additional separate modules specific to each Directorates offered on a monthly basis	Prevalence of Child criminal exploitation through forced criminality and labour, including county lines Cannabis production moving from residential to rural areas (bigger operations require more space) Cuckooing for adults experienced in some areas	Region: South West Category: Unitary Size (expenditure): Large Size (population): Medium Control: Conservative (since 2019) and currently Lib Dem Rural

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors'/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
3E	Policy and community safety officer	8	No	Responsible for developing and implementing policies related to community safety and well-being.	Awareness: Reportedly good Nature of training: mandatory safeguarding training, but do not have specific training on MS	Prevalence of criminal exploitation through cuckooing and county lines	Region: South East Category: Non-MET District Size (expenditure): Small Size (population): Small Control: NOC (since 2016) and currently Lib Dem Urban
4LE ^a	Head of service for safeguarding adults and children's partnership arrangements, quality assurance and community services Social worker/ safeguarding and quality	6 10	Yes	a) Social Workers assess and support vulnerable individuals, develop care plans, and collaborate with agencies, while Safeguarding and Quality Control Officers ensure compliance, oversee safeguarding practices, and provide quality assurance. Both roles are key to protecting vulnerable populations within the local authority. b) The Head of Service for Safeguarding leads multi-agency collaboration, policy oversight, and quality assurance to prevent modern slavery. They enhance frontline responses, shape policy, and promote victim-centred interventions within the local authority.	Awareness: Reportedly good Nature of training: Home Office training specific to Devolved Decision making panels as well as internal offer See text below the table for good practice on training offer	Prevalence of labour exploitation and county lines for young adults (18-25 years old)	Region: London Category: Unitary, London Borough Size (expenditure): Large Size (population): Medium Control: Labour (since 2002) Urban

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors'/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
5E	Community safety, safeguarding and quality and diversity policy officer	6	No	The Community Safety, Safeguarding, and Equality & Diversity Policy Officer develops policies to protect vulnerable groups, promote inclusion, and enhance community safety through stakeholder collaboration within the local authority.	Awareness: Unclear, reading interview appears limited Nature of training: Access to external e-learning on children, child safeguarding, and then a separate module on adult safeguarding. At the time of interview, they were developing internal online training to make mandatory for all staff.	Unknown	Region: South West Category: Non-MET District Size (expenditure): Small Size (population): Small Control: Labour (since 2012) Urban
6LL	Community safety Manager/ Community sports officer (within LA)		No	Develops and implements safety strategies, coordinates multi-agency efforts, engages communities, and oversees programs addressing issues like youth violence and anti-social behaviour within the local authority.	Awareness: Reportedly good around essential response and very good in procurement services Nature of training: No mandatory training. Staff is encouraged to do Home Office e-learning training and the in- house one which is similar to the Home Office one.	Prevalence of county lines in children (95%)	Region: London Category: Unitary, London Borough Size (expenditure): Large Size (population): Medium Control: Labour Urban

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors'/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
7NPT	Head of Legal and Democratic Services	14	No	Leads legal compliance, provides counsel, and ensures effective democratic processes. Drives inclusive procurement practices and supports informed governance for local economic and social growth.	Awareness: unknown Nature of training: Council Induction programme – mandatory, online Individual training for frontline workers, mainly safeguarding Training from a commissioning and procurement perspective. Corporate training has to be repeated every 18 months/ 2 years	Unknown	Region: Wales Category: Unitary Size (expenditure): Medium Size (population): Medium Control: NOC (since 2022) Rural
8Pa and 9Pb ^b	8Pa: Community safety strategy and partnerships manager and Safety Partnership for 15 years (within LA) 9Pb: Social Worker	8 unknown	No	8Pa: develops and implements safety strategies, coordinates multi- agency partnerships, oversees crime prevention initiatives, ensures statutory compliance, and engages communities to enhance public safety within the local authority. 9Pb: support vulnerable individuals by conducting assessments, developing care plans, and collaborating with agencies to ensure safety and well- being within the local authority. 8Pa coordinated the <i>Health and Well-being Board</i> , integrating various aspects of modern slavery as represented by different Board members, including 9Pb.	Awareness: Reportedly bad engagement from councillors Nature of training: 3 Tier of Training for Children's social workers E-learning for housing officers and those working as enforcement officers	Instances of MS are not reported clearly, so there are challenges around gathering accurate data to know the prevalence of MS in our area. Presence of county lines, but not most prevalent form of exploitation.	Region: South Category: Unitary Size (expenditure): Large Size (population): Large Control: NOC (Lib Dem lead) Urban

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors'/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
10LKC	Bi-Borough strategic lead for MS related issues as well as Exploitation Coordinator	10	Yes	Leads strategic initiatives on anti- slavery issues across two large boroughs.	<p>Awareness: Reportedly good for frontline staff</p> <p>Nature of training: no overall mandatory training.</p> <p>There is only one mandatory e-learning training for those who work in regulatory services</p> <p>MS lead runs free multi agency training at least once a quarter of 2 and a half hours. This is usually attended by people from housing, different council teams, health, sexual health, sometimes some very small organizations.</p> <p>Some had hoc training to different teams like a quarterly Children's child trafficking training (3 hours sometimes online, sometimes in person).</p> <p>Some co-delivered training with the Met police</p>	<p>Prevalence of child criminal exploitation through county lines</p> <p>Prevalence of domestic servitude cases amongst adults, especially Filipino nationals</p> <p>Sexual exploitation is the area is not as visible as in other areas of London and often people don't identify as survivors of sexual exploitation</p> <p>Organised crime like pickpocketing and forced begging may affect some marginalised community like Roma</p>	<p>Region: London</p> <p>Category: Unitary, London Borough</p> <p>Size (expenditure): Large</p> <p>Size (population): Medium</p> <p>Control: Conservative Urban</p>

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors'/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
11SA	Strategic lead and program manager prevention of MS, human trafficking and exploitation and MS NGO for 20 Years	5	Yes	The Strategic Lead and Programme Manager develops and implements anti-modern slavery strategies, coordinates multi-agency partnerships, raises awareness, enhances survivor support, and aligns council efforts with legislation to prevent exploitation and support survivors.	Awareness: unknown Nature of training: External MS frontline organisation delivering training until recently Mandatory awareness raising session on MS (during induction) and ad hoc sessions on specific issues	Labour exploitation is the most prevalent form of exploitation	Region: West Midlands Category: Metropolitan Borough/ District Size (expenditure): Large Size (population): Medium Control: Labour (since 1979) Urban
12STa and 13STb	12STa: Head of Service for Community Advice and Support/Safety Manager. 13STb: Partnership development officer for the domestic abuse service/Domestic abuse support workers.	Just changed role at time of interview	No	12STa: The Head of Community Advice & Support manages services for vulnerable residents and multi- agency collaborations, while the Safety Manager oversees health and safety compliance and risk management within the local authority. 13STb: The Partnership Development Officer fosters multi-agency collaboration, coordinates domestic abuse services, and raises awareness, while the Domestic Abuse Support Worker provides direct support, case management, and advocacy for survivors within the local authority.	Awareness: Fragmented/scarcely amongst staff Nature of training: training offered on induction and then every 2 years. There is no mandatory training, but there is a session co- delivered with police that everyone can join.	People brought here to marry or already married, but then exploited for domestic servitude	Region: Eastern Category: Non-MET District Size (expenditure): Medium Size (population): Small Control: Labour (since 2023) Urban

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors'/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
14C	MS lead/NGO and Frontline work with survivors for 5 years	6 months	Yes	The Modern Slavery Lead coordinates policies, multi-agency collaboration, and training to combat exploitation, ensure compliance, and support survivors, reinforcing the council's commitment to tackling modern slavery.	<p>Awareness: Fragmented/scarse</p> <p>Nature of training: at the time of the interview, they were developing a 3-tier training programme.</p> <p>Level 1 for all staff (40 minutes e-learning)</p> <p>Level 2 – early response to MS</p> <p>Level 3 – will cover the NRM and ongoing safeguarding duties</p> <p>Each team will be assigned the levels on the basis of their roles</p>	<p>Prevalence of males exploited and majority adults. High number of children too.</p> <p>Prevalence of criminal exploitation</p> <p>Instead, since MS lead joined (at some point in 2023) there has been a shift in profile of survivors and types of exploitation recorded, with a more even split between man and women and a prevalence of labour exploitation over criminal exploitation</p>	<p>Region: West Midlands</p> <p>Category: Metropolitan Borough/District</p> <p>Size (expenditure): Large</p> <p>Size (population): Medium</p> <p>Control: Labour (since 2023)</p> <p>Urban</p>

Interviewees*	Job title/ professional background (where known)†	Years in current role	Dedicated MS role/team	Roles including MS tasks within Local Authority	Reported councillors'/staff awareness and nature of training	Reported types and cases of MS	Local Authority features
15K	MS and Human trafficking Coordinator and Police officer for 15 years	5 weeks	Yes	The MS and Human Trafficking Coordinator develops and implements strategies, collaborates with agencies, raises awareness, and ensures a coordinated response to MSHT within the local authority.	<p>Awareness: Inconsistent across teams</p> <p>Nature of training:</p> <p>E-learning platform, but training is not mandatory</p> <p>Looking at rolling out a 3-tier approach</p>	Largest proliferation of County lines in the country, but main type of exploitation is labour exploitation (care sector, construction, nail bars, car washes). Labour exploitation seems to be affecting mainly adults.	<p>Region: South East</p> <p>Category: County</p> <p>Size (expenditure): Large</p> <p>Size (population): Large</p> <p>Control: Conservative (since 1997)</p> <p>Rural</p>

Notes:

*They were well-informed about how MS issues were dealt within their LA. For two regions, we secured interviews with two LAs.

† Different categories of LAs oversee various aspects of service delivery. For example, among our survey respondents, 90% of District Councils and Unitary Authorities covered key areas for modern slavery identification, such as Housing, Licensing, and Environmental Health. However, only 50% had responsibilities in Social Care and Education, which are typically managed by County Councils, Combined Authorities, or Unitary Councils.

^a Two interviewees attended the same call.

^b Separate interviews were conducted with two interviewees from the same LA.



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