Atrium Health Human Trafficking Advocacy Team

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Agenda

- Introduce Our Healthcare Anti-trafficking Model
- Share Lessons Learned

Atrium Health Human Trafficking Advocacy Team

The Original Model Funded by the NC Human Trafficking Commission

2019

Carolinas Medical Center and Levine Children's Hospital

1 Advocate
2 Volunteer Providers

Education

Direct Bedside Consultation

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Building on the Lessons Learned

Lessons Learned

- “High stakes, low frequency”
- Education erodes quickly
- Lack of social work support
- Lack of storage for protocols/resources
- Forensic exams frequently declined
- Trafficking Specialists add value

CODE HOPE Program 2022

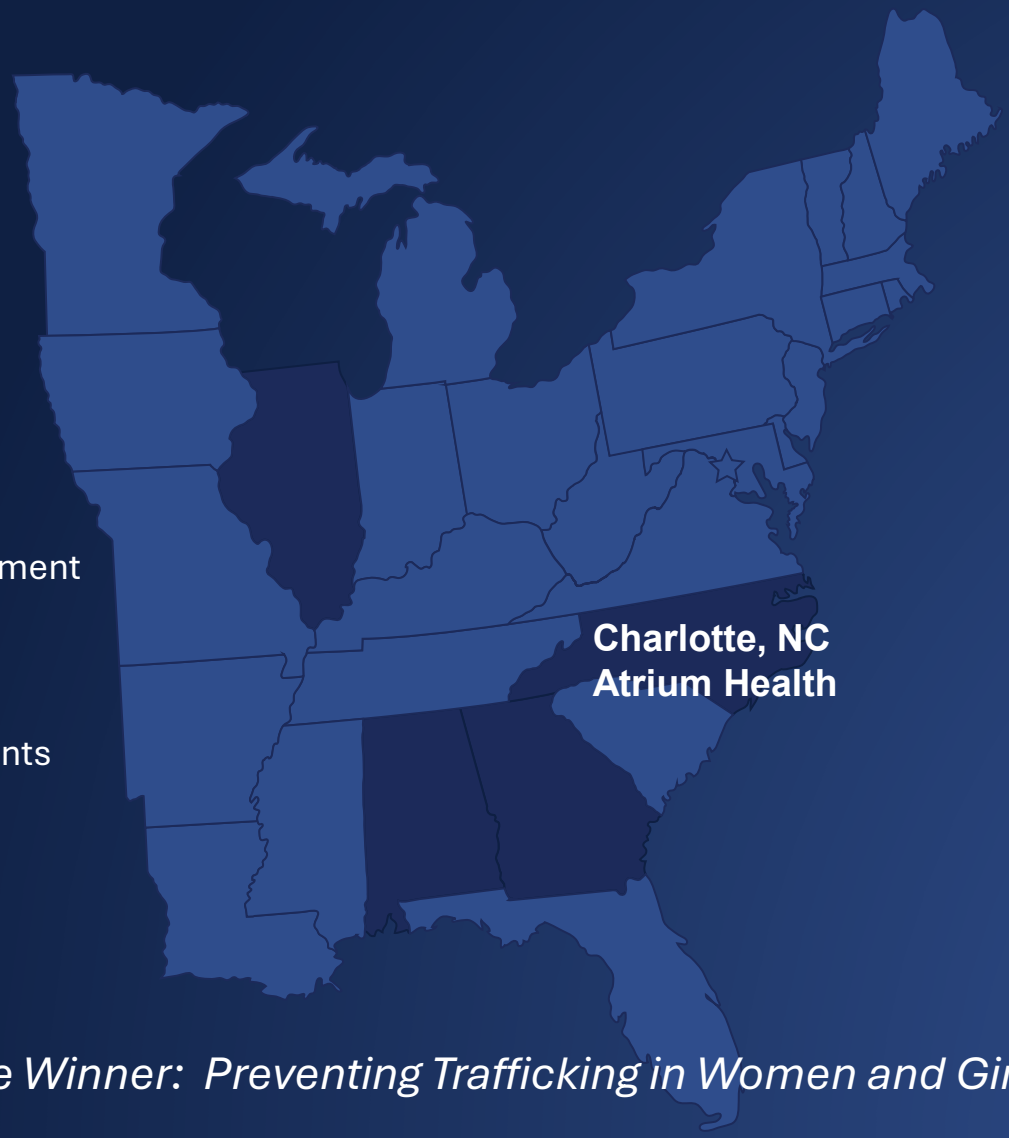
Atrium Health Human Trafficking Advocacy Team

CODE HOPE 2022 Leveraging Innovation and Technology

Human Trafficking Navigator Tool
- Embedded HT Protocol
- Secure Documentation System
- “Just-In-Time” Education

Education Expanded
- Annual Compliance Training Requirement
- CODE HOPE Modules

Virtual Consultation
- Available in 21 Emergency Departments



2022

CODE HOPE Network 2022

21
Emergency Departments

40K
Teammates

2 Advocates
2 Volunteer Providers
1 Project Manager

Phase One Innovation Challenge Winner: Preventing Trafficking in Women and Girls

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Building on the Lessons Learned

Lessons Learned: Opportunities

- Teams preferred direct consulting
- Consults received with weak or no indicators
- Resources were difficult to update, no tracking

Wins

- EPIC integration expanded reach
- Model was scalable

CODE HOPE 2025

Advocate Enterprise Anti-Human Trafficking Task Force

Phase Two:

Advocate Enterprise Anti-Human Trafficking Response

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Advocate Health is

Advocate-Aurora Health in Illinois/Wisconsin and Atrium Health in North Carolina/Georgia/Alabama

1st in Community Benefit ($~6.2B)

2nd Largest with an Integrated Medical School

3rd Largest Not-For-Profit

Charlotte, NC
Headquarters

Wake Forest University School of Medicine
Academic Core

58
Emergency Dept

170K
Teammates

6M
Unique Patients

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Advocate Enterprise Anti-Human Trafficking Task Force

Forensic Nursing Teams
Illinois Wisconsin

Sexual Assault
Nurse Examiner Teams
Charlotte, NC

Atrium Health HT
Advocacy Team

Behavioral Threat Analysis
Team (B-TAM)

Consultants in Alabama
and Georgia

Anti-HT Healthcare Hybrid Event

Advocate Enterprise Protocol

Pathway and Updated Navigator

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3/17/2026 visit for Hospital Encounter

ANNOTATED IMAGES
Annotated Images

DRUG/SEXUAL/SOCIAL HISTORY
History

HT INDICATOR TOOLS
Minor Indicators

HT SCREENING TOOLS
Minor SSTS
Modified TVIT

PATIENT FOLLOW-UP
Safe Phone Num…
Follow-up Needs…

PATHWAYS
Pathways

ⓘ Launch AgileMD Pathways

Pathways

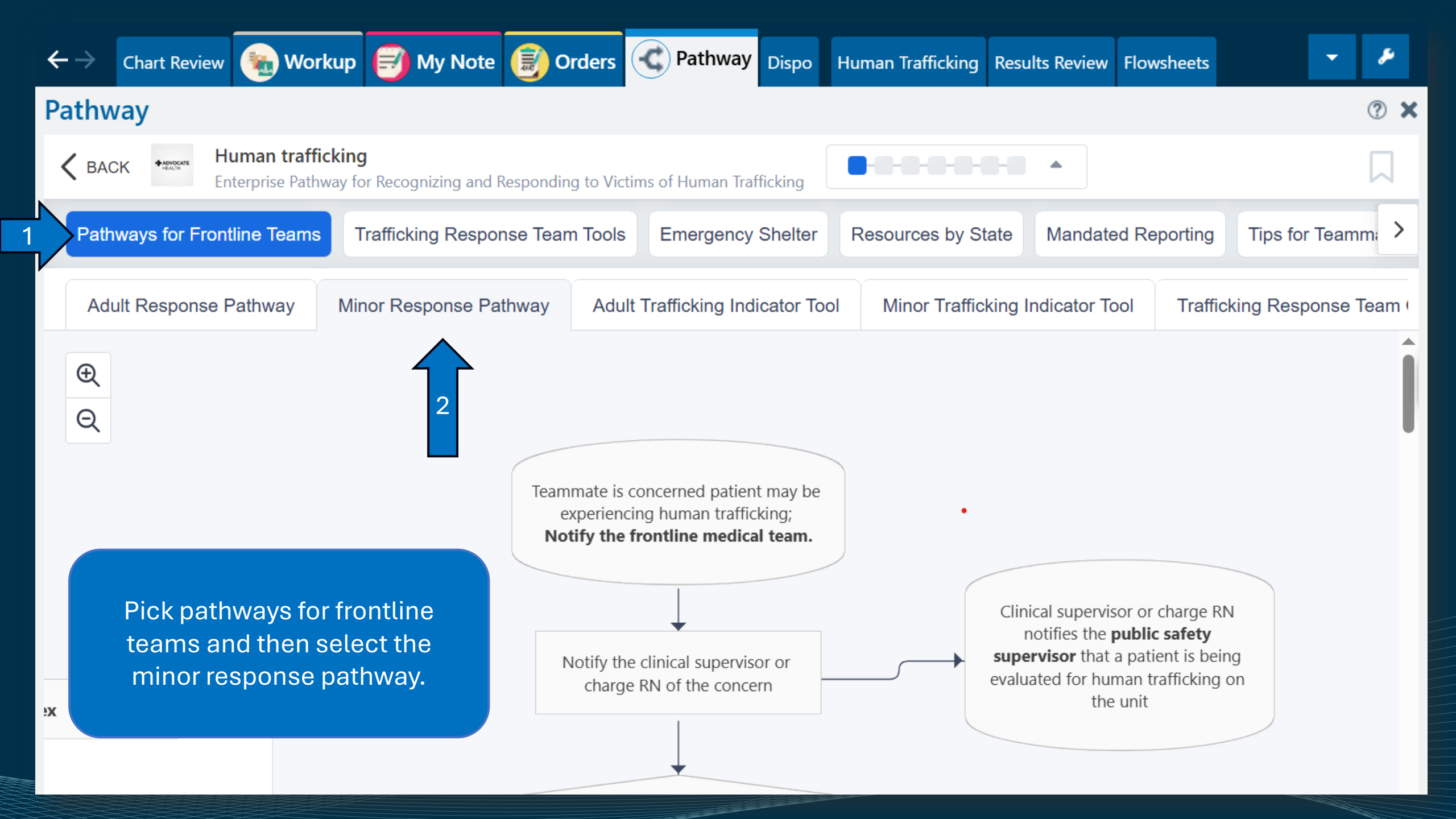
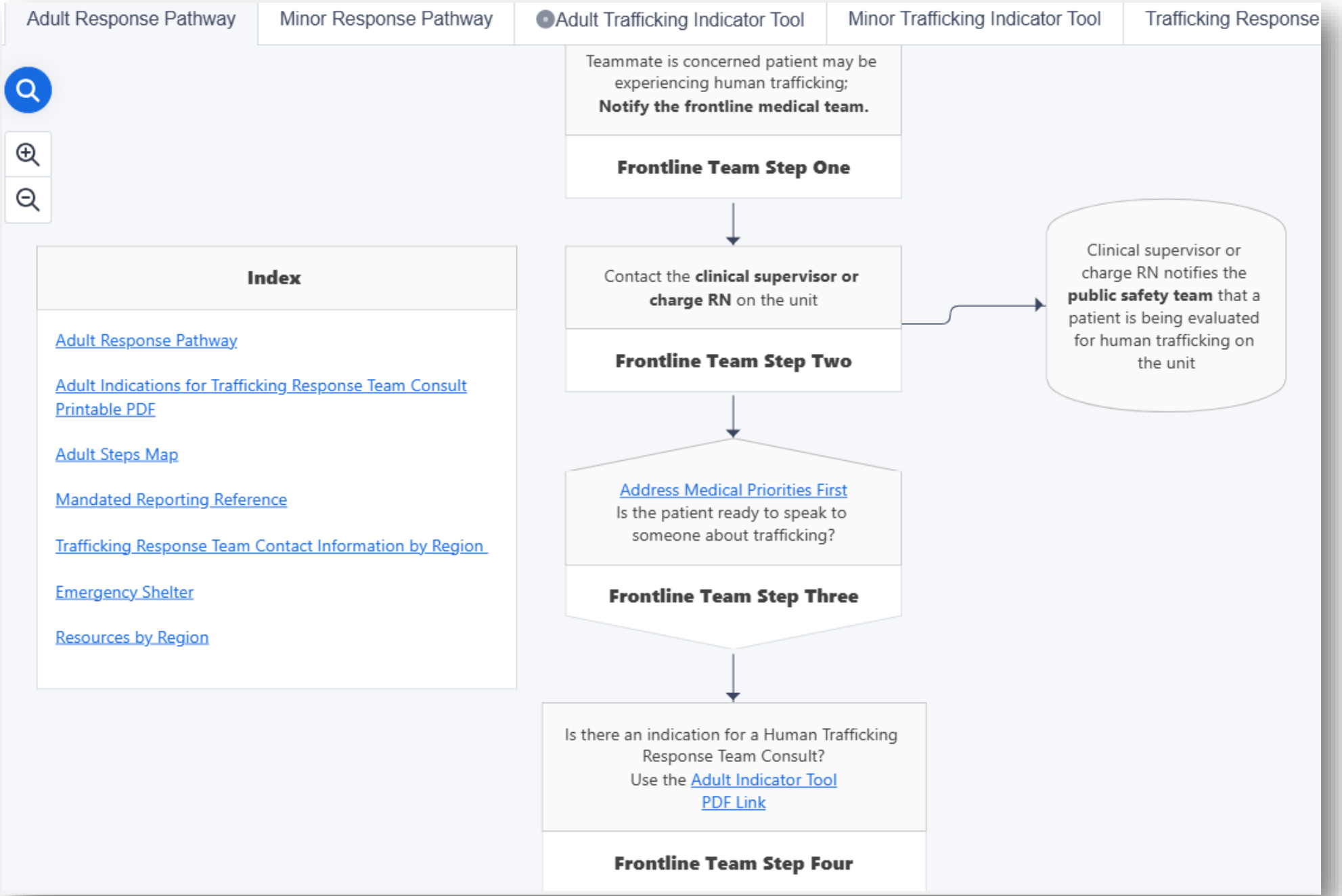
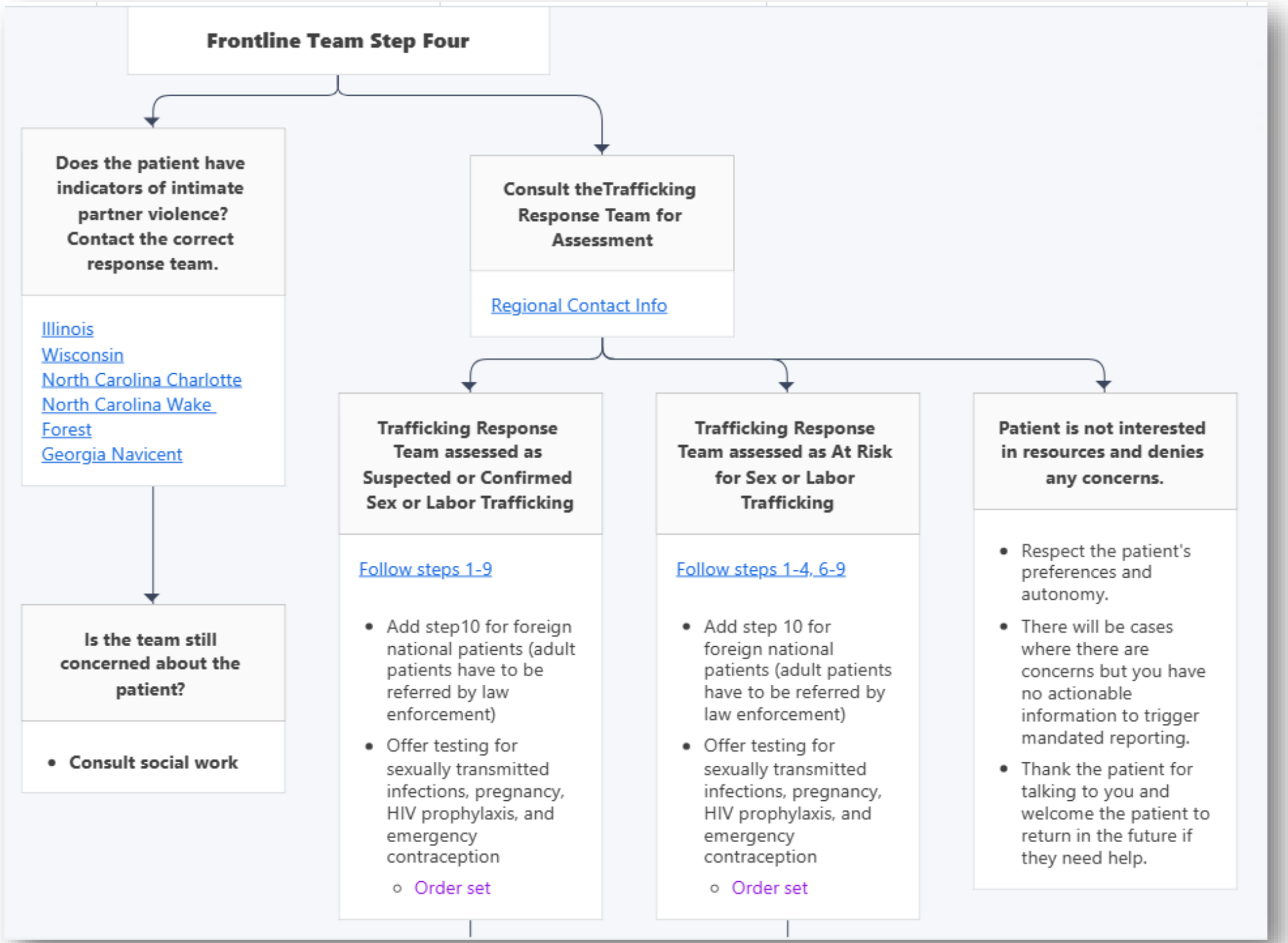
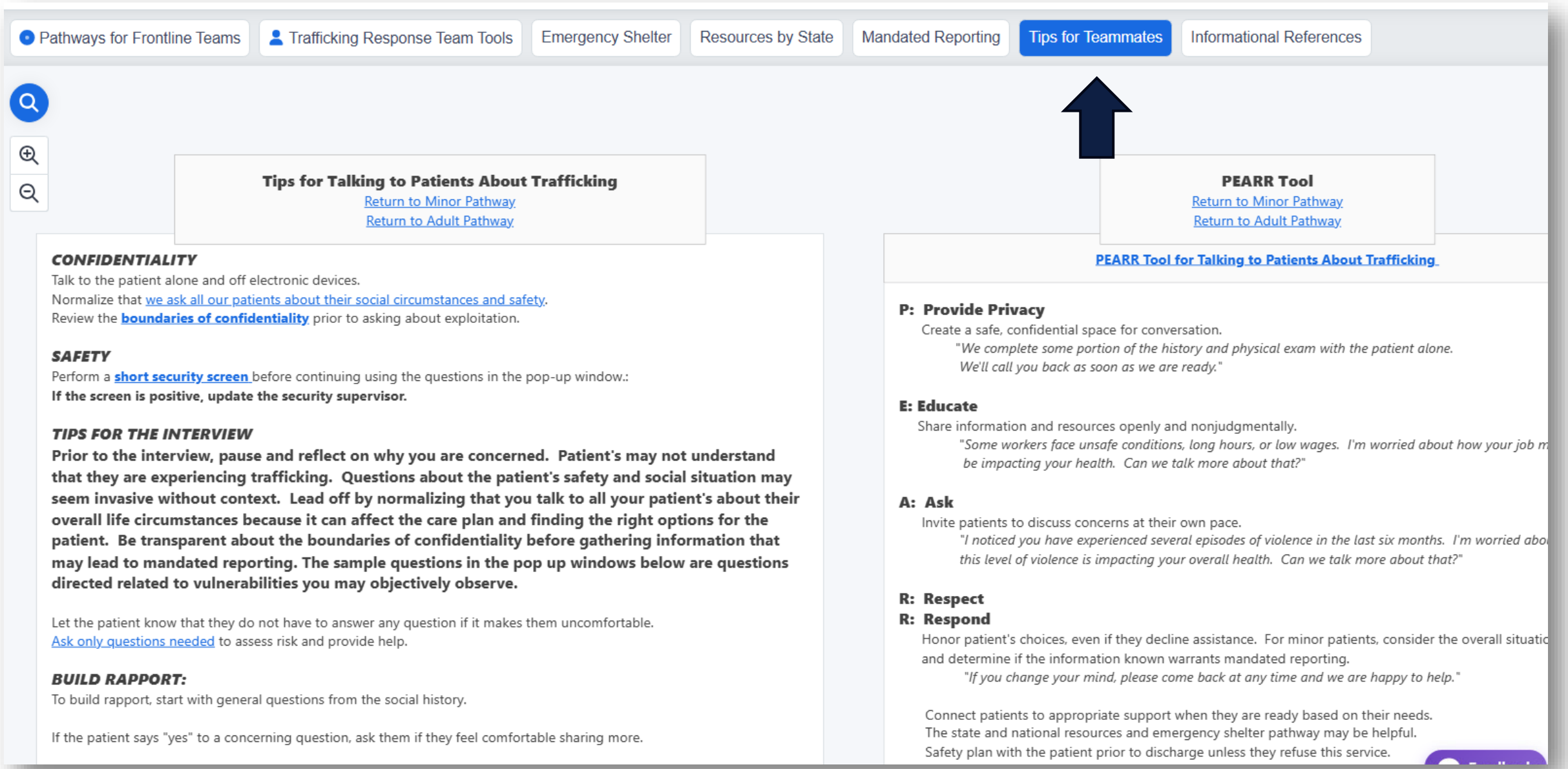


Chart Review
Workup
My Note
Orders
Pathway
Dispo
Human Trafficking
Results Review
Flowsheets
Pathway
BACK
Human trafficking
Enterprise Pathway for Recognizing and Responding to Victims of Human Trafficking
1
Pathways for Frontline Teams
Trafficking Response Team Tools
Emergency Shelter
Resources by State
Mandated Reporting
Tips for Teamm
Adult Response Pathway
Minor Response Pathway
Adult Trafficking Indicator Tool
Minor Trafficking Indicator Tool
Trafficking Response Team
2
Teammate is concerned patient may be experiencing human trafficking; **Notify the frontline medical team.**
Notify the clinical supervisor or charge RN of the concern
Clinical supervisor or charge RN notifies the **public safety supervisor** that a patient is being evaluated for human trafficking on the unit
Pick pathways for frontline teams and then select the minor response pathway.


Adult Response Pathway
Minor Response Pathway
Adult Trafficking Indicator Tool
Minor Trafficking Indicator Tool
Trafficking Response
Teammate is concerned patient may be experiencing human trafficking; **Notify the frontline medical team.**
Frontline Team Step One
Contact the **clinical supervisor or charge RN** on the unit
Frontline Team Step Two
Clinical supervisor or charge RN notifies the **public safety team** that a patient is being evaluated for human trafficking on the unit
Address Medical Priorities First
Is the patient ready to speak to someone about trafficking?
Frontline Team Step Three
Is there an indication for a Human Trafficking Response Team Consult?
Use the Adult Indicator Tool PDF Link
Frontline Team Step Four
Index
Adult Response Pathway
Adult Indications for Trafficking Response Team Consult Printable PDF
Adult Steps Map
Mandated Reporting Reference
Trafficking Response Team Contact Information by Region
Emergency Shelter
Resources by Region


Frontline Team Step Four
Does the patient have indicators of intimate partner violence? Contact the correct response team.
Illinois
Wisconsin
North Carolina Charlotte
North Carolina Wake Forest
Georgia Navicent
Is the team still concerned about the patient?
Consult social work
Consult theTrafficking Response Team for Assessment
Regional Contact Info
Trafficking Response Team assessed as Suspected or Confirmed Sex or Labor Trafficking
Follow steps 1-9
Add step10 for foreign national patients (adult patients have to be referred by law enforcement)
Offer testing for sexually transmitted infections, pregnancy, HIV prophylaxis, and emergency contraception
Order set
Trafficking Response Team assessed as At Risk for Sex or Labor Trafficking
Follow steps 1-4, 6-9
Add step 10 for foreign national patients (adult patients have to be referred by law enforcement)
Offer testing for sexually transmitted infections, pregnancy, HIV prophylaxis, and emergency contraception
Order set
Patient is not interested in resources and denies any concerns.
Respect the patient's preferences and autonomy.
There will be cases where there are concerns but you have no actionable information to trigger mandated reporting.
Thank the patient for talking to you and welcome the patient to return in the future if they need help.


Pathways for Frontline Teams
Trafficking Response Team Tools
Emergency Shelter
Resources by State
Mandated Reporting
Tips for Teammates
Informational References
Tips for Talking to Patients About Trafficking
Return to Minor Pathway
Return to Adult Pathway
CONFIDENTIALITY
Talk to the patient alone and off electronic devices.
Normalize that we ask all our patients about their social circumstances and safety.
Review the boundaries of confidentiality prior to asking about exploitation.
SAFETY
Perform a short security screen before continuing using the questions in the pop-up window.:
If the screen is positive, update the security supervisor.
TIPS FOR THE INTERVIEW
Prior to the interview, pause and reflect on why you are concerned. Patient's may not understand that they are experiencing trafficking. Questions about the patient's safety and social situation may seem invasive without context. Lead off by normalizing that you talk to all your patient's about their overall life circumstances because it can affect the care plan and finding the right options for the patient. Be transparent about the boundaries of confidentiality before gathering information that may lead to mandated reporting. The sample questions in the pop up windows below are questions directed related to vulnerabilities you may objectively observe.
Let the patient know that they do not have to answer any question if it makes them uncomfortable.
Ask only questions needed to assess risk and provide help.
BUILD RAPPORT:
To build rapport, start with general questions from the social history.
If the patient says "yes" to a concerning question, ask them if they feel comfortable sharing more.
PEARR Tool
Return to Minor Pathway
Return to Adult Pathway
PEARR Tool for Talking to Patients About Trafficking
P: Provide Privacy
Create a safe, confidential space for conversation.
"We complete some portion of the history and physical exam with the patient alone.
We'll call you back as soon as we are ready."
E: Educate
Share information and resources openly and nonjudgmentally.
"Some workers face unsafe conditions, long hours, or low wages. I'm worried about how your job m
be impacting your health. Can we talk more about that?"
A: Ask
Invite patients to discuss concerns at their own pace.
"I noticed you have experienced several episodes of violence in the last six months. I'm worried abo
this level of violence is impacting your overall health. Can we talk more about that?"
R: Respect
R: Respond
Honor patient's choices, even if they decline assistance. For minor patients, consider the overall situatic
and determine if the information known warrants mandated reporting.
"If you change your mind, please come back at any time and we are happy to help."
Connect patients to appropriate support when they are ready based on their needs.
The state and national resources and emergency shelter pathway may be helpful.
Safety plan with the patient prior to discharge unless they refuse this service.

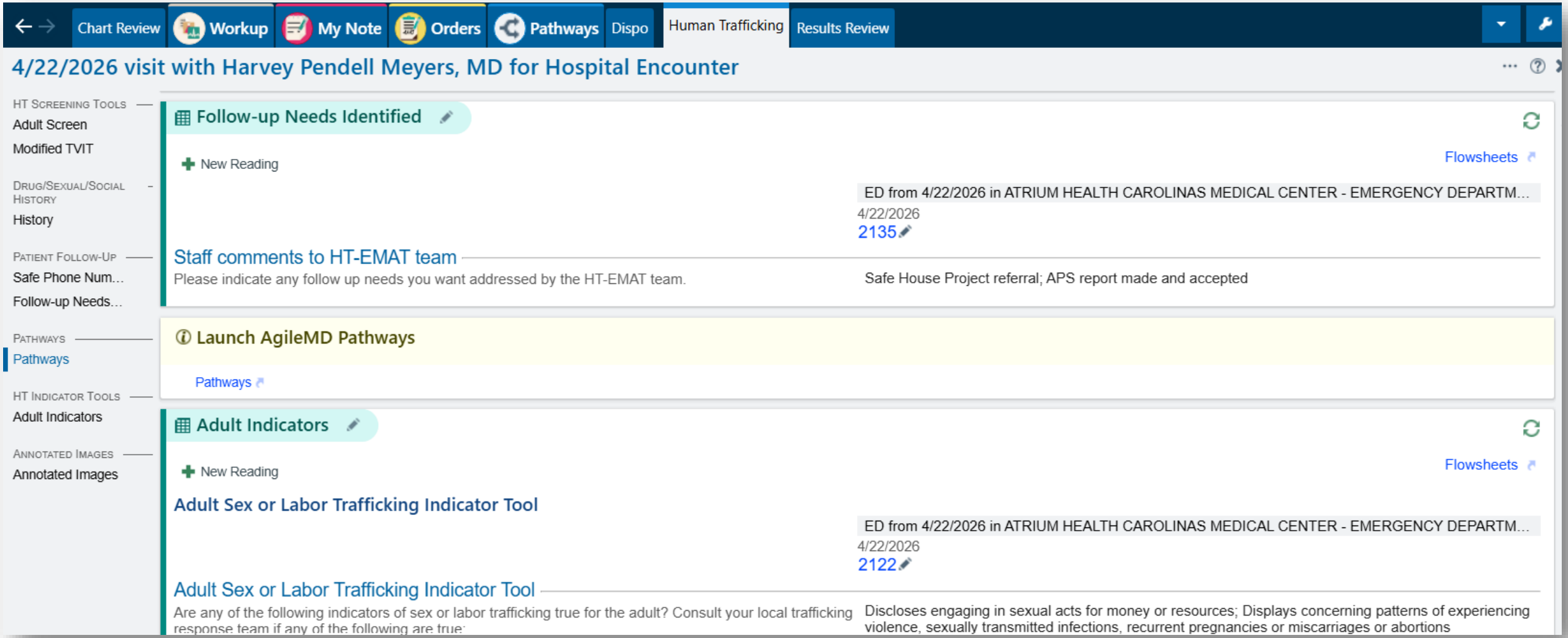


Chart Review
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Results Review
4/22/2026 visit with Harvey Pendell Meyers, MD for Hospital Encounter
HT Screening Tools
Adult Screen
Modified TVIT
Drug/Sexual/Social History
History
Patient Follow-Up
Safe Phone Num...
Follow-up Needs...
Pathways
Pathways
HT Indicator Tools
Adult Indicators
Annotated Images
Annotated Images
Follow-up Needs Identified
New Reading
Flowsheets
ED from 4/22/2026 in ATRIUM HEALTH CAROLINAS MEDICAL CENTER - EMERGENCY DEPARTM...
4/22/2026
2135
Staff comments to HT-EMAT team
Please indicate any follow up needs you want addressed by the HT-EMAT team.
Safe House Project referral; APS report made and accepted
Launch AgileMD Pathways
Pathways
Adult Indicators
New Reading
Flowsheets
Adult Sex or Labor Trafficking Indicator Tool
ED from 4/22/2026 in ATRIUM HEALTH CAROLINAS MEDICAL CENTER - EMERGENCY DEPARTM...
4/22/2026
2122
Adult Sex or Labor Trafficking Indicator Tool
Are any of the following indicators of sex or labor trafficking true for the adult? Consult your local trafficking response team if any of the following are true:
Discloses engaging in sexual acts for money or resources; Displays concerning patterns of experiencing violence, sexually transmitted infections, recurrent pregnancies or miscarriages or abortions

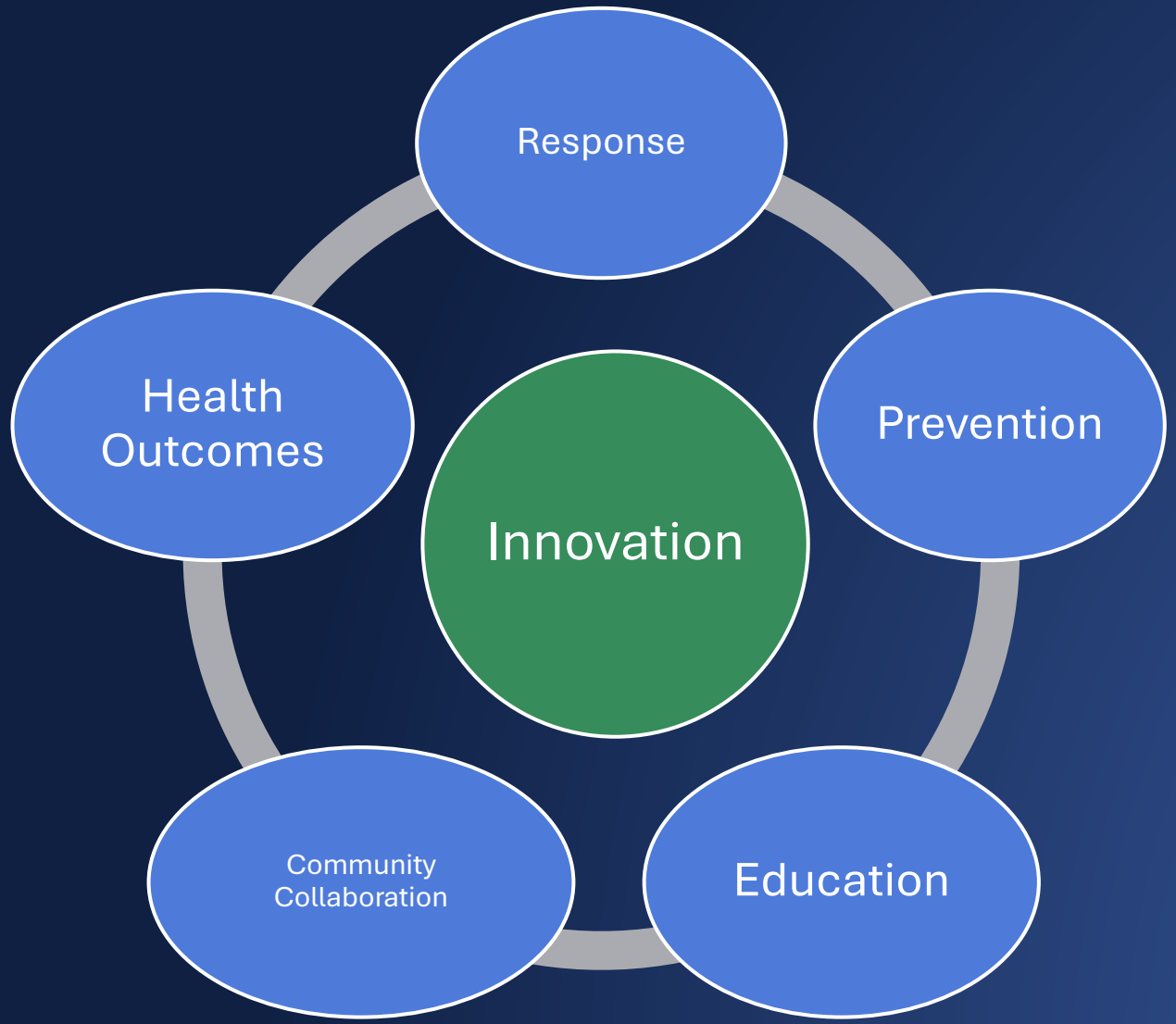
Questions?

Please Save the Date!
2nd Annual Anti-Trafficking Healthcare Symposium at the Pearl in Charlotte or via live broadcast

September 8, 2026

Appendix

CODE HOPE Model: Other Important Changes



Administrative Order

- Collaboration on Adolescent Cases
- Specific Agencies
- Mecklenburg County

Coordinated Law Enforcement Recovery to Hospital

- Standard operating procedure
- Ensured health outcomes with or without forensic data collection

Substance Withdrawal Mitigation

- Standard order set accessible through the HT navigator

Longitudinal Care:

Creating the Continuum in Communities

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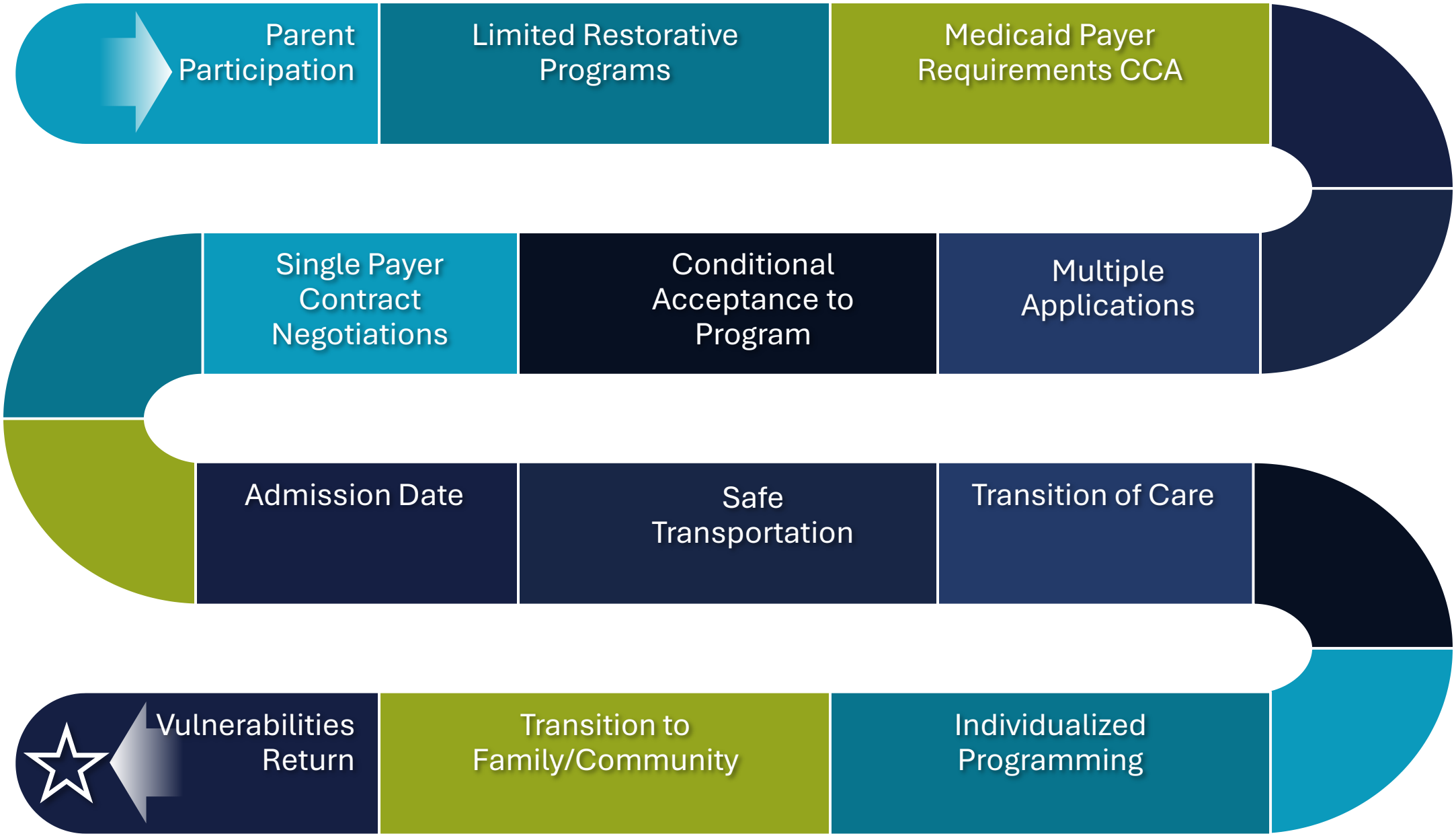
Parent Participation
Limited Restorative Programs
Medicaid Payer Requirements CCA
Single Payer Contract Negotiations
Conditional Acceptance to Program
Multiple Applications
Admission Date
Safe Transportation
Transition of Care
Vulnerabilities Return
Transition to Family/Community
Individualized Programming

- Long Hospital Lengths of Stay
- Unpredictable Duration of Treatment
- Loss of Therapeutic “Deep Work”
- Perception of Stalled Progress
- Loss of Trust in the System