Study One Protocol

Study title:

A survey to measure NHS professionals' knowledge, experience and training needs regarding the identification, referral and care of trafficked people

Background:

Evidence on current and potential health sector responses to human trafficking is scarce. A limited number of studies have indicated the varied health risks associated with human trafficking and the range of physical and psychological problems among trafficked people (1-11). A small number of international studies also highlight trafficked people's low use of health services and providers' poor preparedness to care for trafficked people (12-14). In the UK, there is little understanding of NHS professionals' experiences with trafficked people or professionals' preparedness to provide care. We are aware of only one small study (n=7) of NHS professionals' knowledge and experience, in which professionals reported difficulties building trafficked women's trust and coping with the emotional burden of women's needs and experiences (15). Anecdotal reports suggest difficulties referring trafficked people for care and low levels of identification and referral by NHS professionals.

The study aims to describe NHS professionals' experience, knowledge and training needs regarding the identification, referral and care of trafficked adults and children. The objectives of the research are:

1. To document NHS professionals' experiences, knowledge and opinions about trafficked people's health care needs
2. To provide recommendations and training materials to support NHS professionals to identify, refer and care for trafficked people and to participate in the UK response to human trafficking

Methods:

Study design: Cross-sectional survey

Study population: NHS professionals (clinicians, specialists, administrative and/or managerial)

Inclusion criteria:

To be eligible for inclusion in the study, participants must be clinical or non-clinical NHS professionals who are in attendance at level 1, level 2 and/or level 3 mandatory face-to-face NHS safeguarding training between September 2013 and September 2014

Identification of study population:

The survey will be conducted with clinical and non-clinical NHS professionals attending mandatory level 1, level 2 and/or level 3 face-to-face safeguarding training in seven acute trusts (to include different relevant specialities) and two mental health trusts. Level 1 safeguarding training is attended by all NHS professionals (clinical and non-clinical) working in healthcare settings; level 2 training is attended by clinical and non-clinical NHS professionals who have frequent contact with parents, children and young people; and level 3 training is attended by clinical staff working predominantly with children and or their families who many contribute to assessing, planning, intervening and evaluating the needs of child and parenting capacities where there are safeguarding or child protection concerns.

The selected trusts (located within the boundaries of police force areas with high numbers of detected trafficking cases) are:

1. Croydon Health Services NHS Trust
2. King's College Hospital NHS Foundation Trust
3. Guy's and St Thomas' NHS Foundation Trust
4. Hillingdon Hospitals NHS Foundation Trust
5. East Kent Hospitals University NHS Foundation Trust
6. South London and Maudsley NHS Foundation Trust
7. Greater Manchester West Mental Health NHS Foundation Trust
8. Heart of England NHS Foundation Trust, Birmingham
9. Homerton University Hospital NHS Foundation Trust
10. Cambridge University Hospital NHS Foundation Trust

Recruitment:

NHS professionals attending level 1, level 2 and/or level 3 face-to-face safeguarding mandatory training sessions will be asked to participate in the study. Study researchers will attend the training sessions to describe the study aims and procedures and answer any queries/concerns professionals have regarding their participation in the study. Professionals who agree to participate in the study will be asked to provide written informed consent before completing the self-administered questionnaire. If it is not feasible for professionals to complete the survey during the training day, researchers will provide a link to an online version of the survey to complete at a later date.

Sample size: 675 (65-70 participants per trust)

Measures:

The survey instrument has been adapted from instruments used in our previous research on trafficking and domestic violence, and measures healthcare provider knowledge, experiences, and readiness to identify and respond to trafficking cases. The survey instrument takes approximately ten/fifteen minutes to complete.

Piloting:

The survey instrument has been evaluated and revised by the Project Steering Group, including in relation to clarity and practicality, applicability, and wording. The survey instrument has been piloted with seven NHS professionals.

Data collection:

Self-administered questionnaires will be provided to NHS professionals attending level 1, level 2 and/or level 3 mandatory face-to-face safeguarding training in participating trusts. Members of the research team will attend the training sessions and will provide a brief explanation of the study aims and procedures, and distribute and collect questionnaires.

Analysis:

Data will be entered into a Microsoft Excel datasheet and analysed in STATA11 (16). Basic descriptive statistics will be calculated (e.g. mean scores, percentages). Comparative analyses will be conducted to examine whether scores vary significantly in relation to trust, trust type (acute or mental health), staff type (e.g. clinical, managerial, and administrative), speciality, previous training, gender, and years qualified.

Ethics

Informed consent:

The General Medical Council (GMC) guidance on obtaining consent from adults for research purposes will be followed (17). Potential participants will be given a Participant Information Sheet, which provides clear information about the purpose, subject and nature of the study. It will be emphasised that participation is voluntary and that responses are anonymous and confidential.

Confidentiality:

The information provided by participants will be confidential and all participants will be assigned a unique ID number. Participants' ID number will be used at all times when managing the research

data. Any data collected that includes identifiable details about study participants will be stored separately from the research data.

Risks, burdens and benefits:

1) Risks: professionals may reveal lack of knowledge or competency when being interviewed. All study sites including individual participants will be offered training materials at the end of the study and if there are concerns about a specific case mentioned in training the PI will be contacted to discuss the clinical issues discussed with the professional concerned
2) Burdens: The survey will take approximately ten minutes to complete and will be administered at mandatory face-to-face safeguarding training or via an online survey.
3) Benefits: Resource sheets for professionals, which will include information about organisations that can provide support for people who have been trafficked, will be made available to all participants. The resource sheets have been commissioned by the Department of Health and produced by Platform 51, and will be launched nationally in March 2013. A confidential draft version of the leaflet is enclosed with the REC submission. Summary findings regarding professionals' knowledge, experience and training needs will be provided to NHS safeguarding leads at each participating NHS trust.

Timetable: Data collection will begin in September 2013 and continue for up to one year.

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